EXPERIENCES OF LATINO IMMIGRANT PARENTS OF CHILDREN WITH

DISABILITIES: THE IMPORTANCE OF CULTURALLY AND LINGUISTICALLY

DIVERSE PARENT INVOLVEMENT IN THE IEP PROCESS

A Dissertation

by

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ABSTRACT

Given the large proportion of students who are culturally and linguistically diverse (CLD) in special education, there is a great need to understand and learn from the literature and the experiences of Latino immigrant parents of children with disabilities. It is important to conduct qualitative studies, systematic reviews, and quality reviews to learn more about CLD parents and their children in special education to support them to navigate special education. While studies in this area exist, the literature is scarce. This dissertation contains a qualitative study, a systematic review, and a quality review related to CLD parents with children with disabilities and parent involvement in the IEP process.

The first study is a qualitative study that sought to understand the perspectives of nine Latino immigrant parents of children with disabilities regarding their child's Individualized Education Program (IEP). Semi-structured interviews were conducted and analyzed using a grounded theory approach and the constant comparison method. Seven themes emerged: a) parents' insecurity of knowledge, b) difficult terminology, c) confusion with the IEP process, d) discrimination or misconceptions, e) staff lack of knowledge, f) language barriers, and g) need of parent advocacy.

The second study is a systematic review of ten studies on intervention characteristics to increase CLD parent involvement in the IEP process. The majority of the research identifies parent involvement in academic achievement but is limited related to parent involvement in the IEP process. From this systematic review, only one study had Spanish speaking participants. Some of the studies (n=4) did not mention the characteristics of the parent participants. The rest of the studies did mention the characteristics of the participants but were not considered CLD.

Because of the CLD population's growth in the United States, future research should target CLD parents with children in special education and provide culturally responsive interventions.

The third study is a quality review on the quality of the evidence base for CLD parent involvement in the IEP process. The ten studies included in the systematic review were assessed for quality using the quality standards of Council of Exceptional Children. Three of the studies met all the CEC standards; however, none of those three studies had CLD participants. It is important for future researchers to clearly report the methods they use when doing an intervention to allow replication and be able to have evidence-based practices that practitioners can implement with high-quality. In addition to that, high-quality studies that include CLD population are needed.

DEDICATION

To all immigrant parents that come to this country looking for the American dream. Especially for my parents that came to the U.S for our family to have a better future. Here is to you.

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NOMENCLATURE

CEC   Council of Exceptional Children

CLD   Culturally Linguistically Diverse

ELL   English Language Learner

IDEA   Individuals with Disabilities Education Act

IEP   Individualized Education Program

IOA   Interobserver Agreement

IRR   Interrater Reliability

LEP   Limited English proficiency

QI   Quality Indicators

US   United States

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CHAPTER I

INTRODUCTION

The increasing number of students with disabilities from culturally and linguistically diverse backgrounds in the United States (US) provides educators and practitioners with many opportunities as well as many challenges (Barrio et al., 2017). Some of the challenges in the classroom are/include implementing a culturally responsive curriculum and assessments of those students. For the professionals and educators, a major challenge they face is the development of culturally responsive individualized education programs (IEPs) (Barker & Grassi, 2011). Another challenge professionals and educators face is the lack of involvement of culturally and linguistically diverse (CLD) parents (Beattie, 2019). Research suggests that increasing parent involvement in education helps to increase academic achievement. However, research shows that CLD parents are less involved than White parents (Klugman et al., 2012). Moreover, the literature suggests that CLD parents may face additional barriers than their White counterparts regarding parent involvement in their children's education. Some of these parents do not know what the schools' expectations regarding their involvement are, and they lack collaborative communication relationships with the schools (Beattie, 2019).

Per law, parents are required not only to participate in the IEP meetings but are expected to be treated as equal members of the committee (IDEA, 2004). However, due to different circumstances, parents of CLD students are not participating in those meetings (Jung, 2011). These difficulties are not only a result for parents with limited English proficiency (LEP) but also due to the jargon-heavy language used in meetings (Cavendish & Connor, 2018). These knowledge gaps prevent parents from fully participating in the meeting because they feel lost or

ashamed. Landmark and colleagues (2007) reported parents feeling that they could never be fully prepared for an IEP meeting as they did not comprehend proper placement or all aspects of the IEP. To address this gap in the literature, more research is needed to understand the experiences and perspectives of CLD parents with children with disabilities and their involvement in the IEP process.

Purpose and Research Questions

This dissertation reports the results from three studies related to immigrant parents' experiences and the importance of culturally and linguistically diverse parent involvement in the IEP process. The purposes of this dissertation overall were to a) learn and understand the experiences of Latino immigrant parents with children with disabilities, b) discover parent and interventions' characteristics related to the IEP process and identify what interventions were specifically for CLD parents, c) assess what is the quality of the research literature related to parent involvement in the IEP process.

Study 1

Given the increasing diversity of the population in the United States and the large proportion of students who are CLD in special education, the present study explored the perspectives and experiences of CLD parents of children with disabilities as a means to develop culturally responsive IEP meetings. This study used a qualitative methodological approach applying grounded theory and constant comparison analysis. The main research question was:

1. How do parents with LEP with children with disabilities describe their perceptions and experiences in the IEP process?

Study 2

Previous meta-analyses and systematic reviews talk about the importance of parent

involvement and the benefit of student achievement, as well as how parent participation is important in the life of students with or without disabilities. However, to date, no systematic review has been conducted investigating the efficacy of interventions for increasing CLD parent involvement in the IEP process with children with disabilities. Therefore, a systematic review to evaluate the literature on the importance of parent training and parent involvement in the IEP process is needed. To this end, these research questions guided this study:

1. What interventions have been implemented to increase CLD parent involvement in the IEP process?

2. Do parent demographics influence the level of involvement in the IEP process?

3. What interventions were effective to increase CLD parent involvement in the IEP process?

Study 3

Given that the IDEA mandates parent involvement in IEP meetings, more research was needed to determine the quality of interventions. Therefore, the purpose for conducting this review was to determine the quality of the research on increasing participation and involvement of CLD parents in the IEP process with children in special education.

1. According to the CEC (CEC, 2014), what are the interventions' characteristics related to parent involvement?

2. What is the quality of the evidence for CLD parent involvement in the IEP process for group-based research?

3. What interventions are targeted for CLD parents with children with disabilities?

CHAPTER II

EXPERIENCES OF LATINO IMMIGRANT PARENTS OF CHILDREN WITH

DISABILITIES IN THE IEP PROCESS

The Culturally and Linguistically Diverse (CLD) population in the United States has

gradually increased over the last several decades. At the current rate, researchers estimate that

about 40% of school-age children will speak a language at home other than English by 2030

(U.S. Census Bureau, 2017). In 2018, almost 19% of Texas students received bilingual education

or English as a second language (ESL) service (Texas Education Agency, 2018). The prevalence

of CLD school-age children receiving special education services is also increasing, emphasizing

the need for equity discourse in special education (Barrio, 2020). Research shows that students of

color are disproportionately assigned to special education services (Scott et al., 2017). For years,

researchers, parents, practitioners, and policymakers have tried to alleviate this issue

(Kramarczuk et al., 2017). However, racial disparities are still the leading indicators of inequality

in educational services (Gregory et al., 2010).

Research indicates that students of color experience lower academic performance and

higher dropout rates than their White counterparts (National Center for Education Statistics,

2014). Many studies have found that parental involvement is associated with student

achievement (Sebastian et al., 2017). However, for parents with Limited English Proficiency

(LEP), to be involved with their child's education remains a challenge. Most of these CLD

families arrive in the United States with different cultures, languages, and traditions. They may

be hesitant to advocate in the same way as other families do because they lack the knowledge of

the education system from the United States (Harry, 2008). Thus, this presents challenges in

access and opportunity for their children receiving special education services (Proctor, 2016). Specifically, these families and their children may encounter challenges when they are forced to navigate a new culture, country, and school system simultaneously without proper supports (Harry, 2008).

Parents of children with disabilities must attend Individualized Education Program (IEP) meetings annually to plan their children's education and coordinate special education services. Parent involvement in special education and at the IEP meetings is significant (Wolfe & Duran, 2013). Improving children's education with disabilities requires parents to be actively engaged and advocate for their children's needs. However, for LEP parents, it is often difficult to voice their questions or concerns during the IEP process because of language barriers, lack of knowledge, and lack of cultural responsiveness (Harry, 2008).

Insufficient research has been conducted on parental involvement in special education, focusing specifically on LEP parents from CLD backgrounds (Wolfe & Duran, 2013). In the 1980s, Lynch and Stein (1982) interviewed 400 low-income parents of students in special education from a large, CLD metropolitan school district in southern California. Interviews were conducted at the families' homes in their preferred languages. This study's findings indicated that only 47% of the participants reported making suggestions at the IEP meetings, and parents seemed to be having a passive rather than active role at the IEP meeting. Lynch and Stein (1987) interviewed Hispanic, African American, and European American parents about perceptions of their participation at the IEP meetings and compared the results. Hispanic and African American parents felt that they were given suggestions during the IEP meetings. Still, they thought they knew less about the services their child was receiving, and they felt the communication was not

clear. Hispanic parents also did not know what their responsibilities and rights were regarding

special education.

Sontag and Schacht (1994) conducted a comparative study about White, Hispanic, and

American Indian groups' perceptions and their perceptions and the information they needed

regarding early intervention for their child with a disability. In this study, Hispanic parents felt

that they were not provided with the information they needed to do for their child with a

disability.

Among the studies, CLD parents reported a lack of information about their child's

disability, lack of communication about special education law, language barriers, and in general,

low levels of participation during the IEP meetings.

Park and Turnbull (2001) conducted a study with ten Korean parents with children with

disabilities and their perceptions about their relationship with professionals they work with to

meet their children's needs. In-depth interviews were used in their parent's native language.

Language barriers presented the most significant challenge for eight of the parents. Parents said

their LEP limited their ability to have a meaningful interaction with professionals, preventing

them from advocating and participating in school meetings and events.

Salas (2004) conducted interviews with ten Mexican American women with children

with disabilities, who resided between the US and Mexican border, regarding their experiences at

the IEP meetings. Most participants reported being submissive at the IEP meetings because of

the LEP. One parent said, "When the director of special education programs calls me to tell me

about the meetings for my little girl, I get very nervous and anxious because my English is not

good. And when I go to the meeting, they only tell me what she does wrong, nothing good… I

don't like those meetings because I can't say anything." (Salas, 2004 p. 181). English language

dominance in U.S schools favors monolingual families (Mendez & Ortiz, 2000). Another parent said, "They always use those big words that I can't understand" (Salas, 2004 p. 188). The use of jargon and acronyms without explaining everyday language in meetings is challenging for English speakers but more so for LEP speakers. This barrier has been identified as a significant obstacle for meaningful parent participation at the IEP meetings (Park & Turnbull, 2001; Salas, 2004).

Wolfe and Duran (2013) conducted a systematic review to investigate CLD parents' experiences with the IEP process from 2001-2011. Of the nine studies included in the review, three took place in Virginia, two in Southern California, and one in North Carolina, Midwestern US, and Massachusetts. One study did not report the location. Two of the studies conducted a survey, whereas the other seven used some type of interview. Six of the studies reported language and communication barriers. Parents said that their LEP prohibits them from participating at the IEP meetings and noted that not all the meetings had an interpreter available.

Moreover, in two of the studies, parents indicated that their involvement would be enhanced by greater cultural responsiveness from the professionals, such as being aware of their own assumptions, beliefs, and bias towards other cultures and incorporating examples and concepts related to their culture. From the nine studies, Wolf and Duran (2013) identified six different themes across the studies: language barriers, communication barriers, disrespect for the parent, negativity towards the child, and insufficient information. These findings echo previous conclusions drawn from earlier studies.

More recently, Larios and Zetlin (2018) conducted a case study related to the IEP meetings with eight Latinx families whose primary language was Spanish with children in special education. The findings of this study reported parents wanting the best for their children.

Still, their participation at the IEP meetings was impacted by the schools' level of knowledge and technical language and the family's level of acculturation.

This study differs because no research has been done specifically with Spanish-speaking parents in their native language with children with disabilities. This study was intended to provide school personnel with better ways to communicate with LEP parents and increase parent involvement during the IEP process. Culturally responsive practices recommend that it is best practice to conduct and disseminate research in the native language to allow their authentic voices to be represented in the mainstream literature.

Thus, the current research base presents gaps in the literature and the lack of culturally responsive approaches to parent engagement with children with disabilities in preparation for and at the IEP meetings (Barrio et al., 2017). To address this gap in the literature, more qualitative research is needed to understand better how to best support LEP parents with children with disabilities to be successful partners with the IEP team members.

Given the increasing diversity of the population in the United States (US) and the large proportion of students who are CLD in special education, the present study explored the perspectives and experiences of CLD parents of children with disabilities as a means to develop culturally responsive IEP meetings. The main research question was: How do parents with LEP with children with disabilities describe their perceptions and experiences in the IEP process?

Method

This study employed a qualitative research methodology to answer the primary research question. A qualitative approach allows for more in-depth insight into human perceptions (Rich & Ginsburg, 1999). Moreover, qualitative research provides insight toward "understanding the meanings people make of their experiences" (Morrow, 2007 p. 211).

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This qualitative research study used a phenomenological approach. The phenomenology approach captures the individual experiences of a common phenomenon or experience (Creswell & Poth, 2018). This approach incorporates interviews with multiple people who have experienced similar phenomena and synthesizes their experiences (Carpenter & Pena, 2017). These interviews allowed the participants to share their unique knowledge of an important social world phenomenon through verbal communication (Hesse-Biber, 2017).

The rationale for choosing a phenomenology approach was that this approach seeks to capture the meaning and common features of individuals' lived experiences. In this case, all the participants had a similar experience, and I was able to capture that experience's essence.

Positionality Statement

In qualitative research, the researcher is the primary instrument for data collection and analysis (Lincon and Guba, 1985 ; Hesse-Biber, 2017; Merrian, 2009). Consequently, the human instrument has shortcomings and biases that may impact the study. As qualitative researchers, our experiences and epistemological perspectives may influence how we interact with our participants and the interpretation we have with the data. Therefore, it was important for the principal investigator to be aware of the potential biases (Morrow, 2005). This acknowledgment allows the researchers to explain better the choices made in data collection and interpretation (Creswell & Poth, 2016).

In this study, the researcher and data collector was me the principal investigator. I am a four-year doctoral student in Special Education in a large research university in Texas, native Spanish-speaker with prior experiences working with CLD families in special education. Before coming to the US, the I attended Law School in a recognized University in México. When coming to the US, I did not know much about special education law in the US. After working

with culturally linguistically diverse families in special education, my perceptions were that not many of LEP families with children with disabilities knew much about special education law either.

Consequently, I wanted to address the literature gap between what we know and what the reality is. My goal is to improve schools' culturally responsive practices and build communication between CLD families and educators to improve these families' IEP process. The person who served as an auditor for this study was an assistant professor of special education with experience in conducting qualitative studies with students with disabilities. Another native Spanish speaker four-year doctoral student studying special education with prior experience working with individuals with disabilities and CLD families, helped with coding the data.

Research Design

The participants were recruited as a part of a larger project with Spanish-speaking families with children with Autism Spectrum Disorder (ASD), focusing on one-on-one parent-training and workshops to provide strategies to increase communication and literacy skills through reading. During the one-on-one parent training or workshops, these Spanish-speaking parents were invited to participate in this qualitative study. They were invited to ask other parents outside of the large project to participate in this qualitative study. Additionally, flyers were posted on social media to increase parent participation.

After recruiting some participants, snowball sampling was used. Snowball sampling is when the participants are asked to invite other similar participants to participate in the study (Saldaña & Omasta, 2018). To gain an in-depth understanding of the information in this qualitative study, I also used purposive sampling. Purposive sampling involves identifying and

selecting certain groups or individuals who experienced the same phenomenon and knowing and willing to participate (Creswell & Clark, 2011).

Participants

To be eligible to participate in the study, parent participants needed to be immigrated from Latin America to the US, being an LEP parent living in Texas, had at least one child who was between 3 and 21 years old enrolled in a public school with a disability, and have an IEP. Prior to the interviews, parent participants answered some general demographic questions to determine if they qualified for the study.

Nine immigrant parents originally from Latin America with children with disabilities participated in this study. Latin America encompasses all the Spanish-speaking nations located to the south of the US, including Mexico, Colombia, Argentina, Peru, Venezuela, Chile, Guatemala, Ecuador, Cuba, Bolivia, Honduras, Paraguay, El Salvador, Nicaragua, Dominican Republic, Costa Rica, Panama, Puerto Rico, and Uruguay. For this specific study, eight participants were from different parts of Mexico, one participant from Peru, and one participant from Venezuela. The reasoning behind the sample is because saturation of the information was research at that point. Lincoln and Guba (1985) recommended having a sample until a point of saturation is reached.

All of the parent participants lived in different parts of Texas, such as el Paso, Houston, Dallas, and Spring. The children of these parents attended a public school in Texas. The disability categories served on the districts were the 13 categories covered under the Individuals with Disabilities Education Act (IDEA): Autism Spectrum Disorder, Deaf-Blindness, Deafness, Emotional Disturbance, Hearing Impairment, Intellectual Disability, Multiple Disabilities, Orthopedic Impairment, Other Health Impairments, Specific Learning Disability, Speech or

Language Impairment, Traumatic Brain Injury, and Visual Impairment. (See table 1 with demographics)

Fit of Paradigm

For this qualitative study, the primary research question was answered by using an interpretative paradigm. The interpretative paradigm assumes that the reality is socially constructed (Merriam, 2009). That is, there is no single and observable reality. Instead, there are multiple interpretations of a single event. This particular approach seeks deep understanding and values experiences and perspectives as an important source of knowledge (Hesse-Biber, 2017). Essentially, I was interested in constructing knowledge through the meanings and experiences of the participants. Rather than starting with a theory, the theory was developed based on how the participants create meanings of their experience.

The grounded theory approach because knowledge is not generated from existing theory but is grounded in the data collected from the participants experiencing the same phenomenon (Gasson, 2004). This approach was chosen because it allowed understanding patterns among social realities. That is, even though the participants experienced a similar phenomenon, they could have a different reality.

Data Collection

This qualitative study was conducted through video conference via zoom. This type of data collection was able to reach LEP parents more efficiently and allowed participation across Texas. The research method to collect the data was semi-structured in-depth interviews. This method allowed the interviewer to have a set of questions that guide the conversation, but the participants still had the freedom to talk about what was important to them about the questions and the topic. Semi-structured questions permitted to explore specific areas in greater depth or

even to present or adjust the questions that were not predicted initially (Patton, 2002). In this case, the primary investigator had an interview protocol to introduce the interviewer, build rapport, review consent materials, and a list of questions to guide the conversation.

When participants appeared for the interview, the study was explained to them in greater detail. They were informed about their privacy, confidentiality, risk, potential benefits, and right to withdraw at any time. They were informed about the eventual publication of the results. Then, verbal consent was obtained from the participant. Participants also had the opportunity to ask any questions before starting the interview.

To address the validity of the questions, a pilot interview was conducted with a Spanish-Speaking Latino parent with children with ASD to identify relevant questions that were important to the participant and ensure the questions were clear and concise. The pilot interview information was not included in the constant comparison analysis; The information was used to eliminate ambiguity before the interviews (Donaldson & Grant-Vallone, 2002). With this pilot interview, one question was added to the protocol related to the number of times the parent participant attended an IEP meeting.

The semi-structured in-depth interviews occurred in one session per interviewee. The interviews ranged from 45 to 90 minutes to complete with a mean of 65 minutes. Parents were invited to share additional comments or concerns about the IEP meetings in general. If any questions were unclear, the researcher would rephrase the question and ask again. All interviews were conducted one-on-one in Spanish with a parent, tape-recorded by the primary investigator, and transcribed verbatim later using a *happy scribe*, an online transcription service to transcribe Spanish audio to text.

In addition to the semi-structured in-depth interviews, the primary investigator took field notes during the interview process to record observations of the participant's expressions and the tone of the participant's voice if a specific expression stood out during the interview. Field notes consisted of *on-the-fly* notes. On-the-fly notes involve writing some keynotes or phrases to help remember important observations such as body language and emotions (Hesse-Biber, 2017). This type of data allowed me to see beyond what the participants were saying verbally. The notes and observations also helped to analyze the data in the transcripts and complemented the trustworthiness and credibility of the data.

Setting

A private, quiet home office was used to conduct the interviews. The primary investigator made an effort to build rapport and make the participants feel comfortable speaking openly about their experiences to maximize the participants' confidentiality. Additionally, the primary investigator tried to create a safe atmosphere for them to talk openly and ask any questions they might have related to the interview. Parents received a $20 electronic amazon gift card for their participation at the end of the interview.

Trustworthiness and Credibility

In qualitative studies, researchers view differently reliability and validity than quantitative researchers (Merriam, 1998). To establish the "trustworthiness" of a qualitative study, Lincoln and Guba (1985, p.300) used terms, such as "credibility," "authenticity," "transferability," "dependability," and "confirmability," as "the naturalist's equivalents" for "internal validation," "external validation," "reliability," and "objectivity." To operationalize those terms in analyzing the data, the primary investigator invited the other doctoral student who was native Spanish speaking and was not present at the interviews to read the same interview

transcript independently to do the coding. This team-approach also helped us reduce bias during the data analysis based on the consensus coding approach (Biggs et al., 2018). Additionally, the study had an auditor to corroborate the data's confirmability and objectivity to establish credibility during the whole process.

Moreover, the participants were from a particular part of Texas but from across Texas to allocate credibility and authenticity of the study. Additionally, the interviews were scheduled based on participants' availability rather than the research choice.

Another critical aspect of the study to establish trustworthiness and credibility was member checking into the findings. In the study, I did member checking twice, first with the Spanish transcripts and at the end with the findings.

Triangulation was also part of the research study. Triangulation is when the researchers "make use of multiple and different sources, methods, investigators, to provide corroborating evidence" (Lincoln & Guba, 1985). In this case, the primary investigator was theperson collecting the collecting the data. The doctoral student assisted with coding. The professor with experience with qualitative studies was the auditor expert assisting from the beginning of the study until the end of the study. The auditor expert on qualitative studies gave her theoretical perspective to determine consistency when analyzing the data to increase the research findings' confidence. Accountability was also reached by having an audit trail. An audit trail consisted of keeping row data and explaining how data was collected, interviews, methods, coding, and any decisions made during the process and at the study (Creswell & Poth, 2016).

Data Analysis and Interpretation

Once the interviews were in a Spanish text, the primary investigator created pseudonyms for each participant to keep confidentiality. An excel document was used for the storage and

synthesis of the data. The primary investigator and the other doctoral student coded the interviews using constant comparison analysis. Constant comparison occurs when comparing existing codes with each other to ensure consistency across the members (Strauss & Corbin, 2008). Each participant's response in the interviews was coded as unit data and was coded from one or two sentences to multiple paragraphs. First, the primary investigator and the other doctoral student open coded one of the transcripts to establish reliable coding procedures. Second, we independently open coded the rest of the transcripts and met for consensus after each transcript. We created codes in an excel spreadsheet and used the language of the participants whenever was possible. Third, we developed a set of preliminary code names within themes based on the primary research question. Fourth, we created a table with the definition of each theme. Then, the principal investigator did member checking with the participants again. When doing the second member checking, the principal investigator wanted to review the themes for clarity, consistency, cohesion, and comprehensiveness (Creswell & Poth, 2008). It was important to conduct member checking to build the participants' trust, have clear and consistent ideas of what the participant wanted to say, and eliminate bias by not interfering with the data to allow the participants' voices to come through. Lincoln and Guba (1985) consider member checking into the findings as "the most critical technique for establishing credibility." Finally, the principal investigator did peer debriefing to confirm the final themes.

Results

Participants described their experiences with the IEP process through the following seven themes: a) parents' insecurity of knowledge, b) difficult terminology, c) confusion with the IEP process, d) discrimination or misconceptions, e) staff lack of knowledge, f) language barriers, and g) need of parent advocacy. The following data is the summary of these themes, organized

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by their frequency across participants. The principal investigator chose to retain the Spanish quotes to elevate participants' voices in their native language, followed by the English translation.

All participants ($n = 9$) described having sad, unfair, and scary experience when learning their child had a disability. They did not know what would happen and did not know what to do with a child with a disability. These emotions definitely had an impact in their participation in the IEP process because they already did not know what to expect and what to do for their children. For example, Tamara said, "Me puse muy triste por muchos muchos meses, estuve muy deprimida." "*I was very sad for a lot, a lot of months, I was very depressed.*" Luz said, "Todavía recuerdo y lloró porque me dolió mucho, me dio mucho coraje e impotencia de no saber que hacer." *"I still remember and I cry because it hurt me a lot, I felt impotence and anger of not knowing what to do."* Mary mentioned, "Me dio mucho miedo porque no sabía si lo iba poder sacar adelante." "*I was very scared because I didn't know I could pull it off.*"

Parents' insecurity of knowledge

All the participants ($n = 9$) expressed a lack of knowledge about special education, even though they were very interested in being involved with their child's education. All but one of the participants only had one child with a disability. Therefore, when they got their child's evaluation, it was the first time they heard about special education services. For some of them, it was the first time to hear the disability diagnosis. It was very scary to hear the news because they did not know exactly what special education services meant and what services their child needed. Parents did not have enough information about their child's disability or special education law.

Mary said she felt hurt and scared because she did not know how to raise a child with a disability. "Sentí que era mi culpa, sentí mucho miedo. Sentí dolor porque yo no me esperaba

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nada de eso y en primera dije no se Ingles, en segunda, no sabía cómo conseguir los servicios de educación especial". *"I felt it was my fault, I was very scared. I felt pain because I didn't expect any of that and I said: one, I don't know English, two I really didn't know how to get the special education services."*

Tamara said the school gave her the option to receive the documents by mail and sign them or to go to the school for a meeting. She said she decided to go to the school to the IEP meeting to learn about the special education services for her child because she had no idea. "En la primera junta ni idea de que hablaban, ni sabia cuáles eran los derechos de mi hijo." *In the first meeting I had no idea what they were talking about, and I didn't know my child's rights."*

Luz was in a similar situation, admitting she had no idea that the IDEA existed. She said the IEP team did not tell her about the special education laws. She explained that she learned about it because she connected with other parents who also have a child with a disability. "Nunca me dijeron tú tienes derechos o nunca me mostraron qué hay leyes que protegen a mi hijo. Yo me imagino que es para que uno no pelee o para que uno no pida algo que la ley dice." *"They never told me you have rights or showed me laws that protect my son. I imagine they don't even want us to know it, so we don't fight, or we don't ask for something that the law says."*

Martha mentioned she did not know the information in IEP document was for sure what her child needed. She stated that she did not know what services children with autism needed and what they needed to accomplish at the end of the school year. "No, me sentí segura de que esto es realmente lo que mi hijo necesitaba porque tampoco yo no tenía como una referencia de otro niño con autismo más o menos en el nivel de mi hijo." "*I was not sure about what my child needed because I didn't have a point of reference from another child with autism in a similar level than my son."*

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Rosio also exclaimed she did not know what autism was. She said she was completely lost, and everything happened too fast. When she was asked if her child's goals were different this school year from last year, she said she did not remember because she changed her son from one school to another. "Fíjese que no me acuerdo, pues en la otra escuela decían que ya habían acabado con las metas con él, entonces la verdad no sé muy bien, pero no creo que sean las mismas." "*I honestly don't remember, at the other school they said that he completed the goals, I honestly don't know very well, but I don't think they are the same.*" Most parents (*n* = 6) did not know how to explain their child's disability. When asked, they would say one or two words related to communication, but it was a noticeably short answer. Moreover, they shared that the IEP professionals often did not explain special education law to them and instead they referred parents to look at the copy of the IEP document.

All of the parents stated they learned about special education services and special education law through parent workshops, parent support groups, and other parents that were in the similar situation. About half of the parents (*n* = 5) also mentioned they learned how to talk at the IEP meetings because of the workshops. They also said they usually take the IEP document to these workshops to get assistance with reading the document.

Difficult terminology

Participants also talked about the complex vocabulary the school professionals used at the IEP meetings. All the participants (*n* = 9) felt they did not understand everything that was said at the meeting, even if they had a translator/interpreter to help them. Luz said that at her first IEP meeting, she was feeling lost with the language, "Yo iba completamente ciega de qué era eso, de que significaban las terminologías que ellos utilizaban y las abreviaciones, yo estaba ahí como

zombi". *"I was totally blind about that, about the terminology meaning that they were using and the abbreviations, I was there like a zombie."*

Martha also felt similarly to Luz. When reflecting on her first experience, she expressed, "Fui sola y fue horrible la experiencia porque no le entendí a casi nada. Yo estaba casi llorando." *"I went by myself and it was horrible experience because I didn't understand most of it. I was almost crying."* She also mentioned she is not the only one, *"*Yo me abrumo con tanta información y he visto muchas mujeres que salen en llanto y es que es mucha información muy sensible para muchas mamás." *"I get overwhelmed with so much information and I have seen other women getting out crying. It is because there is a lot of sensitive information for a lot of moms."*

Juana also stated, "No sé qué información ellos buscan cuando preguntan cosas, utilizan palabras muy grandes y van directo. Siento que a veces las preguntas son muy amplias y yo me quedo no tengo ni idea a que se refieren." *"I don't know what they are looking for when they ask you questions; they use big words and go straight to it. I feel the questions are too broad and I have no idea what they are referring to."* Tamara echoed this sentiment*:* "Hay algunas palabras y algunos conceptos que son muy complicados" *"There are some words and concepts that are very complicated."*

Mary also mentioned that the principal of the school was her interpreter, but she still would take her husband because she was overwhelmed with so much information. She even said that she had doubts on signing the IEP document because she was unsure if she understood everything. She mentioned that even though the school personnel knew that Spanish was her first language, they still would give her the documents in English. She said in the past couple of meetings she asked for the documents in Spanish. Mary stated, "Yo decía ¿cómo es que yo voy a

firmar algo que no estoy completamente segura de que entienda? Entonces yo empecé a decirles que me dieran los documentos en inglés y español." *"I was like, how I'm going to sign a document if I'm not completely sure I understood? Then, I started asking them for the documents in English and Spanish."* Sol also had a similar situation; she had a teacher that would translate for her, but she would bring a friend to help her with the interpretation because she mentioned it is very difficult to understand even with the interpreter. She stated "Yo la verdad no se mucho de las IEPs solo lo básico y la verdad no entiendo muy bien, solo se lo que me va diciendo la persona que me ayuda." *"I honestly don't know a lot about the IEPs only the basics, I honestly don't understand very well, I only know what the person who helps me is telling me."*

In addition to feeling overwhelmed with the terminology used by IEP professionals at the meetings, many participants also felt that the terminology in the IEP document was difficult to understand even if they read it in Spanish. Tamara mentioned that she would take the Spanish IEP document home, but she thought that the translation was not accurate. "El papel que te dan con los objetivos de tu hijo ni siquiera están bien traducidos, no se quien se encarga de esas traducciones, no se le entiende." *"The paper they gave you with the goals of your child is not even translated correctly. I don't know who translated those documents, [but] you can't understand them."*

Luz mentioned that she also asks for the IEP document in both languages but even the document in Spanish is difficult to understand. She stated, "Hay palabras y tablas que no entiendo y algunas otras cosas que digo y ¿esto? ¿qué significará?" *"There are some words and tables that I don't understand and other things that I'm like what is this? What does it mean?*

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Confusion with the IEP process

Many participants (*n* = 6) repeatedly discussed being confused with the IEP process in general. Participants did not know what to expect at the IEP meetings because they did not receive any prior training or attend a meeting with the teacher or any school personnel to tell them what to expect. Rosio stated, "No me explicaron de lo que se iba a tratar la junta solo me mandaron un correo invitándome a la junta" "*They did not explain me what the meeting was about, they just sent me an email inviting me to the meeting.*" They felt they were not prepared to be at the meeting because they did not know anything. Rosio stated: "Para mí fue aterrador...porque uno no se espera que van a estar ahí como diez gentes, ¿y dije yo qué pasa? ¿Qué vamos a hacer? Me dio mucho miedo, ansiedad de no sé qué va a pasar con mi hijo." *"I was terrified because... we don't expect ten people there, I was like what is happening? what are we going to do? I was very scared and anxious because I didn't know what was going to happened with my son."*

Martha mentioned that sometimes they do not say anything because they do not know if what the professionals are saying is accurate, since the parents themselves do not have much knowledge, they do not know how to react. Martha stated, "En la primera ocasión no dije nada porque la verdad yo sentía que solamente decía aja, si está bien. En la primera junta uno piensa que no tiene opción. Té dicen que es un documento legal entonces fírmalo." "*At the beginning, I didn't say anything, I felt that I was just nodding saying yes, it is fine. At the first meeting you think that you have no options. They tell you is a legal document so sign it.*" Luz also expressed similar feelings to Martha, "Ósea me pusieron un traductor y todo, pero no entendía que era esa reunión para que era o que derechos yo tenía, que si mi opinión valía o no valía. Yo imaginé que ahí yo estaba nada más como escuchando y ya." *"I mean, they had a translator and everything,*

but I didn't understand what the meeting was about, what rights I had, and if they considered my

opinion or not. I just imagined I was there to listen."

Maria exclaimed that they really do not know what documents the IEP professionals are

giving to them. "Nosotros estamos cegados, no sabemos en realidad que es lo que nos están

dando" *"We are blind, we don't know in reality what they are giving us."* Similarly, Luz said

"Yo me sentí totalmente confundida, sino hubiera sido por los talleres y por el grupo de apoyo de

padres, tal vez a la fecha yo estaría perdida". "*If it wasn't for the parent support group or the*

workshops, maybe I would still be lost." Luz revealed she attended parent support groups after

her first IEP meeting because she did not understand the majority of the process and the IEP

document. She mentioned she looked online for parents in a similar situation and joined a group

where they offer workshops in Spanish to help other parents understand the IEP document and

understand special education law.

Discrimination or misconceptions

Most participants ($n = 6$) also expressed that the IEP professionals do not ask them their

availability, they just inform them the day and time of the meeting without asking them. Mary

said, "al principio me mandaban por correo la carta para avisarme que tenía una junta en dos

días, me decían tiene la cita tal día y a tal hora, hasta que les dije que me dijeran con

anticipación, no, yo me enoje con ellos" *"At the beginning they used to tell me via email two*

days in advance the day and time of the meeting, until I told them to tell me in advance, no, I was

mad at them."

Some participants ($n = 3$) thought that the professionals thought less about them and that

was the reason for giving them less time in the meetings and for not telling them in advance.

Tamara stated that she felt inferior compared to "white people." "Ellas me mandaron un citatorio

que decía que mi junta era de las 11:30 a 12:00 pm, porque te lo puedo jurar que ellas dijeron a esta mexicana en 30 minutos la desocupamos, no habla inglés, mírale el nopal en la frente." *"They sent me a document with my meeting time, and it said from 11:30 to 12:00pm because I swear, they said they will dismiss this Mexican in 30 minutes. She doesn't speak English, look at the cactus on her forehead."* Tamara thought that the professionals thought that of her, adding, "Si fuera anglosajona seria otra cosa.*" "If I were Anglo-Saxon, it would have been different."*

Participants (*n* = 6) felt unnoticed because the IEP professionals did not tell them what to expect at the meeting, and because they do not talk to the parents about IDEA and special education law, especially during their first meeting. Laura was convinced that the IEP professionals do not want them to know their rights, she stated "Entre menos sepas tu es mejor para ellos, así no hay pérdida de tiempo." *"The less you know, the better for them, that way there is no waste of time."* She felt hurt and said she wished she knew things related to her child's disability before the first couple of IEP meetings. She stated, "Me duele, me duele haber sido ignorante por mucho tiempo." *"It hurts, it hurts that I was ignorant for a long time."*

All of the participants felt that they do not have the necessary tools to be able to support their child. They mentioned they receive little or no information from the schools about the IEP meeting until they are at the meeting.

Staff lack of knowledge

Most participants (*n* = 5) also talked about teachers and school personnel not being knowledgeable about the IEP document and special education law themselves. Laura said that after going to the workshops for a few years she knows that the teachers lack information about the IEP document and special education law. She exclaimed, "Las maestras no están preparadas, no conocen los conceptos, si eres un papá que le gusta leer y que te gusta juntarte con grupos, te

vas a dar cuenta que al final sabes más tú que el maestro sin importar el estatus migratorio."

"The teachers are not prepared and don't know the concepts. If you are a parent who goes to parent groups, you realize that you know more than the teacher regardless of your immigration status."

Besides the lack of knowledge with the IEP document, parents also felt school personnel lacked knowledge in the area of disabilities. Some general education teachers did not know they had a child with a disability in their class until the parents pointed out. Luz shared that she stayed after school to talk to the teacher because she observed her child did not receive accommodations. Luz stated, "Me quede para hablar con la maestra y le digo mire mi hijo es Luis, yo no sé si usted sabe que él es autista, y me dice la maestra uh yo no tenía ni idea." *"I stayed to talk to the teacher, and I told her, look, my son is Luis, I'm not sure if you know that he has autism. The teacher said, ugh, I had no idea."* Luz also said the teacher looked at the system to verify that she had a child with a disability and the teacher did not find anything on her system.

Maria had a similar situation to Luz, explaining that she thinks the teacher did not know about her child's disability. Maria mentioned her child does not look like she has a disability, but the only thing she observed is that her child could not speak. She thinks the teacher may just not have noticed it. Maria mentioned that she had to tell the teacher her child had a disability. She indicated, " La maestra no se había dado cuenta que mi hija tenía una discapacidad o no sé si no me dijo nada. La que yo moví todo fui yo." *" The teacher did not know my daughter had a disability, or I don't know if she just didn't tell me anything. I was the one who pointed it out."*

Participants (*n* = 6) also mentioned that after going to parent workshops to learn about the IEP and special education law they noticed the teachers only do copy-paste of other child's IEP

or about their child's IEP from previous years. The parents felt worried about that. Juana stated, "En la última junta les dije no quiero que sea un copy-paste, porque si comparo la evaluación de dos años atrás a la de casi cuatro años, es exactamente igual palabra por palabra." *"At the last meeting I told them I did not want copy-paste, because if I compared the evaluation from two years ago to the almost four years ago, is exactly the same thing, word by word."* Laura also shared, "Cuando yo saqué los sobres de la junta y los empecé a leer uno por uno por así decirlo con lupa, me di cuenta que era un copy-paste de los objetivos, un copy-paste de todo." *"When I took the envelopes, they give you and began to read them one by one, with a magnifying glass so to speak, I realized that it was a copy paste of the objectives, a copy-paste of everything."* Parents felt that because the lack of knowledge of the school personnel, they tend to do a lot of copy-paste from other documents with a similar disability only changing the name of the student.

Language barriers

Another critical barrier of parent participation at the IEP meetings and the IEP process was the language barrier. Participants ($n = 6$) mentioned that they do not feel equipped to contribute with the IEP team because the majority of the professionals do not speak Spanish and they do not want to talk to them in English because of embarrassment of their accent. Some parents, like Mary, felt intimidated to talk to them: "Si le soy honesta, me intimidaba el no saber inglés." *"If I'm being honest with you, I used to be intimidated because I didn't know English."* She mentioned that because she is learning more about her child's disability and the IEP process, she feels less intimidated and she asks more questions for the good of her child.

Rosio felt similarly and noted that at her first few meetings she felt intimidated. "Pues intimidada verdad, pues la mayoría son americanos verdad, eran muchas personas, pero este, era muy intimidante porque la directora de la escuela es americana, pues todo lo están diciendo en

inglés." *"Well, intimidated, right, because most of them are Americans, there were many people there, but, yes, it was very intimidating because the director of the school is American, and everything they are saying is in English."*

Since English is not their first language, some parents did not feel comfortable talking to the school personnel at the IEP meeting. Four parents mentioned they limit themselves to listening instead of being active participants despite their desire to be involved with their child's education. Martha stated, "No me siento suficientemente cómoda para hablar tanto en ella." *"I don't feel comfortable enough to talk during the meeting."* Sol also stated that language and immigration status was a big barrier for her to be involved at the IEP meeting. "La mayor parte creo es el idioma y el sentirme discriminada, tal vez como menospreciada por no hablar inglés o por no tener documentos." *"Most of it I think is the language and feeling discriminated against, perhaps as despised for not speaking English or for not having documents."*

Laura echoed this sentiment, stating: "Yo en las primeras juntas no preguntaba porque tu piensas que los maestros son la ley, yo no decía nada porque yo decía es que yo soy inmigrante y no hablo Ingles, si me explicó." *"In the first meetings I didn't ask anything, you think that the teachers are the law, I kept myself quiet because I was like, I am an immigrant, and I don't speak English."*

Need for parent advocacy

Participants ($n = 6$) felt the need to advocate for their children in order for them to receive high quality special education services. Maria mentioned she noticed something was not okay with her daughter, so she asked the school to do an evaluation. She said if she would not have asked, she probably would not be receiving special education services now. She stated the teacher did not notice anything with her child until Maria mentioned it. "Pues si yo no hubiera

hecho nada y ella no hubiera sido diagnosticada ahorita a lo mejor seguirían con que no está bien, nada más tiene problemas. Como dicen en México es burrita, no puede hablar porque no quiere." *"If I hadn't done anything and she hadn't been diagnosed right now, maybe they would continue with the fact that she has problems. As they say in Mexico, she is slow learner she can't speak because she doesn't want to."*

Luz experienced a similar situation in which the teacher did not know she had a child with a disability in her class until Luz told her. Luz discussed how she started investigating how to help her child, "Empecé a conectarme con otros papás que también eran padres especiales y algunos de ellos me comentaron de grupos de apoyo y de algunas asociaciones quedaban tipo de talleres para que nosotros entendiéramos lo que era un [IEP] y las terminología y todo eso." *"I began to connect with other parents who were also special parents and some of them told me about support groups and some associations offering workshops for us to understand what an [IEP] was and the terminology and all that."*

Laura also said the school did not pay attention to her until her child was victim of bullying and was physically hurt by other kids at school. Until then, he started receiving the special education services he needed, according to the mom. Laura stated, "Mi hijo estuvo 4 años sin ningún tipo de servicio relacionado con la discapacidad de motricidad, nunca tuvo terapia de lenguaje, nunca tuvo terapia ocupacional, nunca tuvo nada, cuando se supone que en la reunión [IEP] están los objetivos del estudiante." She said, "No, un maestro no te va a decir nada*." "My son went 4 years without any type of service related to the motor disability, he never had speech therapy or occupational therapy, he never had anything, when the [IEP] meeting is supposed to be the student's goals*." Laura distrusted the staff on this matter and said, *"No, a teacher is not going to tell you anything."*

Laura felt that something terrible needed to happen for the school personnel to hear her voice. She mentioned before she knew about her child's disability, she did not know anything about it, but because she did not see any progress with her child, she needed to study everything related to special education. She even mentioned that she only slept 3 or 4 hours for a year so she could study at night about special education law and the services her child needed.

Discussion

The purpose of the present study was to examine Latino immigrant parents' experiences and perspectives of children with disabilities in the IEP process. Overall, many participants seemed hurt and frustrated with the school system. Despite the widespread arguments in the literature, not a lot has changed since the 1980s. Participants expressed a need for more tools to help their children. They requested more support from the school personnel in the area of special education services and special education law in general. The findings provide several important contributions to the field of special education about ways in which educators and professionals can improve their practices to include the voices of those underrepresented.

First, it is important to note that parents would like to have a more active role during the IEP process and have better collaboration, but they want to feel heard, understood, and supported. Parents expressed their desire to contribute and to be involved in their child's education. The themes elucidating the complications with this collaboration expanded on previous literature focused on these parent-teacher collaborations. The literature indicates that a major barrier for LEP parents to participate at the schools is the language barrier (Hardin et al., 2009; Lo, 2008; Salas, 2004). However, in this study, having LEP was not the most commonly discussed barrier. Rather, it was the parents' lack of knowledge that often was the first thing that prevented them from participating in the IEP process and to support their children with their

education. Although the language was a barrier, all of the participants mentioned that if they had the knowledge, their collaboration with the IEP professionals and school personnel would be better.

Second, it is imperative to examine current teacher preparation for culturally responsive practices in general and special education settings (Barrio, 2020). Parent-teacher relationship is fundamental for a successful IEP meeting and student success (Zetlin & Curcic, 2014). The voices of these participants reflect tension and unequal relationships.

Finally, the findings indicate that parents' perceptions regarding the IEP process did not differ from one parent to another. All of the parents felt similar regardless of their level of education and socioeconomic status. Thus, when preparing the IEP document and the IEP meeting, the student's unique students' needs need to be the main focus and no the parent's level of education (Zetlin & Curcic, 2014).

Implication for Research and Practice

Several practical recommendations for educators and IEP professionals when working with immigrant parents with children with disabilities are suggested. First, strengthen the communication between CLD families and educators. One of the main things to improve the interaction between families from Latin America and educators is empathy. Having empathy for parents that come from a different country is crucial. Educators and professionals should be open to other cultures, ask about the education system in their native country, and be able to open up the conversation so parents feel welcome. If teachers do not speak Spanish, we suggest they use an interpreter, or a letter translated in the parent's language to tell them how much they care about their family and their child's education. Be sensitive to nonverbal communication and understand the needs of those families. Second, offer ways for LEP parents to navigate special

education in their primary language. One of the ways to do it would be to create a vocabulary list in the parent's native language related to special education terminology and acronyms (e.g., goals, disability, accommodation, IDEA, etc.). This way, parents will feel more confident to participate in their child's education because they know what the terminology and acronyms mean. Likewise, ask parents for suggestions while creating the list and use positive and simple language. Third, improve culturally responsive practices related to the IEP process. When creating goals for the students from CLD backgrounds, culturally responsive instruction needs to be address, and a culturally responsive and relevant IEP needs to be developed. For example, the IEP team can seek input and information from the parents as equal partners in the process, and include socioeconomic, environmental, and linguistic/cultural background before making decisions.

Based on this study's findings, all of the parents did not know they were part of the IEP team and did not feel part of it. By complementing the IEP with culturally relevant instruction, parents will feel part of it and facilitate student success. Fourth, provide workshops to educate LEP parents to build their knowledge about special education. Schools should offer training sessions and workshops in Spanish for parents attending the IEP meeting for the first time and for parents who have attended IEP meetings previously and want to learn more about the process. This can be done by inviting other parents who have more experience in the IEP process to serve as speakers. This way, parents will be more likely to attend and relate to other parents who are in the same situation. These workshops could also benefit parents for emotional support. These connections can allow parents to see beyond the complicated IEP process and make them knowledgeable and prepared to become better advocates of their children with disabilities, leading to a higher quality of education and expanded post-school opportunities.

Limitations and Future Research

  This study has several limitations that recommend pathways for future research. First, this study involved a relatively small number of participants that immigrated from Latin America. Future research should involve immigrant participants from different countries to examine perspectives from different regions. Second, the interviews were conducted in Spanish one-on-one and were analyzed in Spanish. This may lead to misunderstandings with the English translation. Future research should have an additional bilingual person to check the translation and make sure is accurate. Third, the study started by asking participants of a big project to participate in this study. However, it is possible that some parents felt they had to participate because they were receiving services from the big project even though it was mentioned that their participation was voluntary. Future research should aim to broaden the recruitment process. Fourth, since most of the parents participants on this study had a child with Individuals with Intellectual Disabilities (IDD) such as ASD/severe disabilities, the finding may generalize to other parents with children with IDD rather than parents of children with other types of disabilities.

Table 1

Characteristics of Parent Participants and their children with disabilities

Relationship with child	Pseudonym name	Age	Country of birth	Years living in the US	Level of Education	Marital Status	Public Assistance	Child's Disability	Child's Age
Mother	Juana	33	México	7	Associate Degree	Married	Yes	ASD	5
Mother	Rosio	42	México	23	Associate Degree	Divorced	No	ASD	5
Mother	Luz	44	México	13	Bachelor's Degree	Married	No	ASD	6
Mother	Laura	48	México	4	Master's Degree	Married	No	Down's Syndrome	11
Mother	Martha	33	Perú	21	Associate Degree	Single	Yes	ASD	5
Mother	Maria	38	México	7	Bachelor's degree	Married	No	ASD	6
Mother	Sol	31	Venezuela	1	High School	Married	No	Cerebral Palsy	10
Mother	Tamara	40	México	5	High School	Married	Yes	ASD	7
Mother	Mary	42	México	10	High School	Married	Yes	ASD	8

Table 2

Summary of Themes and Definitions

Category/Theme	Definition
Parents' knowledge insecurity	Parents' insecurity of knowledge refers to parents who do not know what special education services their child needs. Parents lack the information about their child's disability and do not know what goals are best for their child.
Difficult terminology	Difficult Terminology is the use of jargon and acronyms during the IEP meeting without personnel explaining the meaning in layman's terms for parents.
Confusion with the IEP Process	Confusion with the IEP process refers to misunderstanding interactions between the parents and the school personnel at the IEP meetings. Parents do not have prior information or knowledge for at the IEP meeting and what to do after the meeting.
Discrimination or misconceptions	Discriminations or misconceptions refers to parents' feelings of discrimination, inequality, stereotyping, and misunderstandings.
Staff lack of knowledge	Staff lack of knowledge refers to the fact that parents feel that professionals are uninformed about their child's rights and goals.
Language barriers	Language Barriers are situations in which limited English proficiency is the reason for ineffective communication between the parents and the IEP professionals.
Need for parent advocacy	Parent Advocacy refers to the parents speaking, arguing, and defend for their children by themselves without feeling the support of the IEP professionals.

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CHAPTER III

THE IMPORTANCE OF CULTURALLY AND LINGUISTICALLY DIVERSE (CLD)

PARENT INVOLVEMENT IN THE IEP PROCESS: A SYSTEMATIC REVIEW

In the United States, "education is primarily a State and local responsibility" (U.S Department of Education, 2017). Before the 1970s, education for students with disabilities was viewed as a privilege rather than an individual right (Huefner, 2000). Until the case of Brown v. Board of Education helped promote the change for children with disabilities. In 1954 this case was one of the cornerstones of the civil rights movement. A plaintiff named Oliver Brown filed a suit against the Board of Education because his daughter was denied entrance to a White school. The plaintiff claimed that Black schools were not the same as White schools and that the 14th amendment of the U.S Constitution was violated. Ruling in favor of Oliver Brown opened the doors to all diverse individuals' rights, including those with disabilities. With that argument and two other particular cases in the 1970s, Pennsylvania Association of Retarded Citizens (P.A.R.C) v. Commonwealth Pennsylvania (1971) and Mills v. District of Columbia Board of Education (1972), the Equal Protection Clause of the 14th Amendment mandated to the Board of Education to provide education to all the students, including students with disabilities (Yell, 1998).

Even with this Equal Protection ruling, it was not until 1975 that children with disabilities were heard. President Gerald Ford signed into law the Education for All Handicapped Children Act, Public Law 94-142 (PL 94-142). The purpose of this law was: "to assure that all children with disabilities have available to them…a free appropriate public education which emphasizes special education and related services designed to meet their unique needs;" "to assure that the rights of children with disabilities and their parents…are protected;" "to assist States and

localities to provide for the education of all children with disabilities;" and "to assess and assure the effectiveness of efforts to educate all children with disabilities" (U.S Department of Education, 2007, p. 4).

Since then, the PL 94-142 has been amended several times, most recently in December 2004, and is currently known as the Individuals with Disabilities Education Act (IDEA; Yell, 1998). One primary component of PL 94-142 and maintained through the reauthorization of IDEA 2004 was an Individualized Education Program (IEP), which serves as the primary monitor for delivering the services provided to students in special education (Fish, 2006).

Moreover, according to IDEA, the IEP meeting was designed for parents and professionals to exchange information and mutually plan the services for the child's best interest with disabilities (Feinberg et al., 2014). Therefore, parents must be members of the IEP team to make decisions on their children's education in special education and must have opportunities for active and meaningful participation in the IEP process (Fish, 2008). Furthermore, schools must provide a written consent form to the parents before an assessment, or anything related to their children can be initiated (Yell & Katsiyannis, 2003).

Parent involvement at school is crucial for the child's progress with disabilities and is the primary factor that contributes to their development. Parent involvement is an individual right and a social need and must be established (Valenzuela et al., 2020).

Most of the literature about parent involvement has focused on academic achievement in general education settings (Goldman & Burke, 2017) and is not related to parent involvement in the IEP process. Jeynes (2003), a meta-analysis, who included 21 studies on the effects of parental involvement on minority children in academic achievement, demonstrated that overall parent involvement was significant for all the minority groups in the study. However, parental

involvement benefited Latinos and African Americans more than Asian Americans. Another meta-analysis by Jeynes (2005) on parent involvement and student academic achievement in urban elementary schools in which 41 studies were analyzed indicated a statistically significant relationship and positive results between parent involvement and academic achievement. Hill and Tyson's (2009) meta-analysis examined the relationship between parental involvement and academic achievement, looking at the differences between African American and European American students. Findings indicated a positive relationship between parental involvement and academic achievement for both groups of students, but it was stronger for European American students. Another author, Wilder (2014), also did a meta-synthesis related to parent involvement in academic achievement and synthesized nine meta-analysis results. He found a strongest relationship if parental involvement was defined as parental expectations rather than homework assistance in general. Further, a meta-analysis by Castro and colleagues (2015) in which parent involvement on student academic achievement was measured with 37 studies with children from kindergarten through secondary schools demonstrated a positive effect on parental involvement and academic achievement.

In accordance with the literature, in general, education parent involvement and parent participation are essential for academic achievement and positively relate to children's performance. However, in special education mandated by law (IDEA, 2004), there is a lack of research in this area, specifically in conducting systematic reviews and meta-analyses.

Moreover, the research related to parent involvement with children with disabilities in the IEP process is even more scarce (Martin et al., 2006). To date, no systematic reviews were found, and only one meta-analysis (Goldman & Burke, 2017) was found on parent involvement in the context of IEP meetings. However, this meta-analysis did not have culturally and

linguistically diverse (CLD) parent participants. The authors included five randomized control trials, but only four studies with effect sizes were included. The results of the random-effects model were not significant. They did not provide evidence of the effectiveness of parent training in increasing parent involvement in schools for parents with children with disabilities. Therefore, it is important to evaluate the efficacy of interventions for increasing parent involvement at schools, specifically CLD parent involvement with children with disabilities.

To date, no systematic review or meta-analysis has been published related to parent involvement in the IEP process with CLD parent participants. For this study's purpose, CLD is defined as the population who comes from an environment where parents' primary language is other than English and their background, values, and culture may differ from the mainstream culture (Garcia, 2002).

Purpose

Previous meta-analyses and systematic reviews talk about the importance of parent involvement in education and the benefit of student achievement, and how parent participation is important in the lives of students with or without disabilities. However, to date, no systematic review has been conducted investigating the efficacy of interventions for increasing CLD parent involvement in the IEP process with children with disabilities. Therefore, a systematic review to evaluate the literature on the importance of parent training and parent involvement in the IEP process is needed. To this end, these research questions guided this study:

1. What interventions have been implemented to increase CLD parent involvement in the IEP process?

2. Do CLD parent demographics influence the level of involvement in the IEP process?

3.What interventions were effective to increase CLD parent involvement in the IEP process?

Method

Document Identification

In this study, potential studies for inclusion were located using three steps: a) electronic database searches, b) ancestral searches, and c) hand search. Search procedures are displayed in Figure 1 (PRISMA) developed by Moher et al. (2009).

Literature Search Procedures

With the help of an experienced librarian in literature research and systematic reviews, electronic databases were systematically searched to retrieve articles and dissertations within the following EBSCO scientific databases: ERIC, Educational Source, Legal Source, PsycINFO, and Academic Search Ultimate, ProQuest Dissertations & Theses Global. The search was conducted using two search strings to identify the maximum number of potential eligible studies within each of the databases. The first of these strings contained keywords related to the intervention: *intervention, training, training methods, collaborat*, cooperat*, parent involvement, parent participation, Individualized Education Program, IEP, Individualized Education Plan. The second of these strings contained keywords associated with the possible participants: Cultural Differences, language minorities, divers*, cultur*, linguistic, language."* All keywords within each of the strings were joined or combined with the Boolean operators AND, and, OR. The search from all databases was limited to documents in English published between 1975 to 2020. The date 1975 was chosen because the first special education law, the Education of Handicapped Children Act, was passed in 1975 and later changed to IDEA, which mandates parent involvement at the IEP meetings. The search procedures resulted in 233 documents. These

documents were uploaded into the Rayyan application database (Ouzzani et al., 2016) to be screened for title and abstract.

Tittle and Abstract Screening

Inclusion/exclusion criteria

To be included in this systematic review, studies needed to meet the following criteria: (a) the intervention involved either informing parents about the IEP document, the IEP meeting, the IEP process or about special education law; (b) participants were parents or legal guardian of children with disabilities, aged 3-21 years old as defined in Part B of IDEA; (c) the study used an experimental design (e.g. single case experimental design, group experimental design, quasi-experimental design or randomized control trail); and (d) studies needed to be conducted in the United States. Documents were excluded based on the following criteria: (a) studies were not experimental design; (b) literature, systematic, and meta-analysis review studies; (c) duplicated studies; (d) studies that addressed parent involvement other than at school; (e) qualitative studies; and (f) magazines and books. If information was not identified through the title and abstract, the study was included to review the whole text. After reading titles and abstracts from 233 studies, 34 potential studies were identified for full-text reading. See Figure 1 for exclusion reasons.

Full-Text Screening

Qualifying studies (n =34) that met the inclusion criteria with title and abstract were assessed in full to determine if they met all the inclusion criteria' requirements. From this evaluation, 29 studies were excluded for not meeting the inclusion criteria. The remaining 5 studies were included.

Ancestral search

Once we identified the five studies through full text, an ancestral search was conducted.

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An ancestral search suggests looking at the reference list of the studies identified and to see if there are additional studies that may meet the inclusion criteria. Titles were screened and in instances of potentially identifying a new study, the full article was screened. From this ancestral search, two studies that met the inclusion criteria were identified.

Hand search

This search was conducted in the journals that published the studies included through full text and ancestral search (n =7). Two duplicate studies were found. A dissertation from Jones (2006) was included during the title and abstract and full-text screening, but when doing the hand search, the same study was published in a later year by Jones and Gransle (2010). Thus, we included the peer-review article. Additionally, during our full-text screening, we included a dissertation by Goldstein (1980), but later during hand search, the same study was published a later year by Goldstein & Turnbull, (1982). However, this study was only one page long and had limited information. Thus, the Goldstein (1980) dissertation was included. From this search, three studies were identified meeting the inclusion criteria.

Variable Coding

Studies that met the inclusion criteria were coded in an Excel spreadsheet on following variables (a) type of intervention; (b) interventionist/implementer; (c) language of the intervention delivered; (d) setting; (e) intervention length; (f) intensity (number of minutes or number of sessions); (g) research design; (h) IOA collected; (i) sample size; (j) social validity; (k) parent demographics (age, race/ethnicity, primary language, and level of education); (l) child demographics (disability, age/grade, ethnicity/race, and primary language). The coding was

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completed by an independent second-rater and compared to the first rater's codes to determine agreements and disagreements.

Inter-Rater Reliability (IRR)

Title and Abstract

Application to the inclusion and exclusion criteria was performed with two doctoral students in special education with some experience in conducting systematic reviews. Thirty percent of the search results were randomly chosen to analyze title and abstract as a part of the training. If there were any discrepancies or disagreements, where solved them by looking at the inclusion and exclusion criteria and talking about them to come to a consensus. Training was conducted until 90% on accuracy was achieved. The rest of the documents (70%) were reviewed independently with a total IRR of 94.71% on accuracy. The IRR was conducted on 100% of the studies in title and abstract.

Full Text

Once we had the documents to be reviewed for full text (n=34), application of the inclusion and exclusion criteria was performed with another doctoral student in special education. Before independently reviewing the studies, we practiced with 30% of the studies and achieved 90% inter-rater reliability. We resolved any disagreements by talking and come to an agreement.

Variable Coding

The variable coding stage was performed with another doctoral student in special education with 50% of the randomly selected studies. Before independently coding, the coders practiced with one study until the reliability met 90% agreement. After coding, we compared results and resolved any discrepancies with the discussion. We had a 95% of agreement on the

variable coding. Reliability was always calculated using the formula: the sum of agreement/total number of agreements + disagreements × 100 (House et al., 1981)

Results

Descriptive Review

Ten documents published between 1980 and 2016 were included in the systematic review. A total of 331 parent/legal guardian participants with children with different types of disabilities were included. All the studies included were group experimental design because single case research design studies were not found during the search.

Research Design

All ten studies used group research designs. Four studies (Blinckerhoff & Vincent, 1986; Goldstein, 1980; Hirsch, 2004; and Plunge, 1998) did a randomized group design randomly assigning participants to treatment and control groups. Two of the studies (Blietz, 1988; Boone, 1992) did a group comparison experimental design comparing treatment and control groups. Three of the studies (Camacho, 2007; Mereoiu et al., 2016; and Stout, 2004;) did a pretest-posttest group experimental design with the same group of participants and one study (Jones & Gansle, 2010) did a quasi-experimental design with random assignment of participants.

Participant Characteristics

A total of 331 parent/legal guardian participated across the ten studies. All of the studies included mothers and fathers with children with disabilities. However, three studies (Hirsch, 2004; Plunge, 1998; and Stout, 2004) included legal guardians (grandfather/grandmother and an aunt) who had legal custody of the child with disabilities at the time of the study. Four of the studies (Blietz, 1988; Goldstein, 1980; Jones & Gansle, 2010; and Plunge, 1988) did not include parent race or ethnicity. Two of the studies (Boone, 1992 and Camacho, 2007) included

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culturally linguistically diverse participants from Hawaiian, part Hawaiian Filipino, Japanese, Portuguese, Samoan, or mix ethnic backgrounds. Still, it did not mention whether they spoke a language other than English, and (Camacho, 2007) included Spanish speaking participants from South America and the Caribbean. The remaining studies (n=4) included parents who were African American, Caucasian/White, and Hispanic/Latino. (Hirsch, 2004) also reported having one American Indian parent participating in the study. Parent aged varied throughout studies. (Blinckerhoff & Vincent, 1986) had an experimental mother mean of 27.9 years old and a control mother mean of: 25.1 years old. (Boone, 1992) had a mean age of 43 years old, (Plunge, 1998) reported having different age participants with a range from 27 years to 62 years, (Hirsch, 2004) reported the majority of parents between 36 to 45 years of age. The mean age of the participants on (Camacho, 2007) study was 38 years old. (Stout, 2004) reported having family participants between 23 and 64 years old, and (Mereoiu, 2016) reported having participants between 26 and 50 years old. The rest for the studies (n=4) did not report age of participants. The majority of the studies (n=6) did not report language of the participants. (Boone, 1992) did not report the language of the participants; however, it was mentioned that the participants did not require an interpreter as a result of their limited English proficiency. (Hirsch, 2004) reported having participants proficient in the English language. (Stout, 2004) stated that English speaking was required to participate in the study, and (Camacho, 2007) was the only study who had participants whose language was Spanish speaking participants. The parent level of education varied through the studies from not having High school completed, to having a graduate degree.

Setting

The intervention setting for all (*n*=10) of the studies was a school. From elementary schools through high schools with an urban setting being the primary one. (Boone, 1992) also mentioned that the school library and the cafeteria served as a setting for their intervention.

Duration, intensity, and number of sessions

Duration was defined as the number of weeks the studies lasted. Only one study (Mereoiu et al., 2016) reported that the intervention lasted six months because it was a collaborative training model between professionals and families with children in special education. The rest of the studies (*n*=9) did not report the duration but reported some time in minutes or days related to the sessions. Please see Table 1 for more specific details.

Treatment fidelity, interobserver agreement and social validity

From the studies, half of them (*n*=5) (Blinckerhoff & Vincent, 1986; Blietz, 1988; Camacho, 2007; Goldstein, 1980; and Mereoiu et al ., 2016) reported fidelity of implementation while the other (*n*=5) studies did not report fidelity of implementation of the intervention. Another group of studies (*n*=5) (Boone, 1992; Hirsch, 2004; Jones, 2010;Plunge, 1998; and Stout, 2004) reported Interobserver agreement (IOA). The remaining studies (*n*=5) did not report IOA. Other studies (Blinckerhoff & Vincent, 1986; Mereoiu et al ., 2016; and Plunge, 1998) reported social validity while the rest (*n*=7) did not report it.

Question number 1: What interventions have been implemented to increase CLD parent involvement in the IEP process?

All of the interventions (*n*=10) found for this study were implemented before the IEP meeting happened except for the one from (Goldstein, 1980) who sent some questions to the parents before their IEP meeting but also had a parent advocate during the IEP meeting, for

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parents to feel comfortable enough to contribute at the meetings without feeling left out. The

other authors (*n*=9) had different types of interventions such as conferences prior to the IEP,

videos, informational handouts, and workshops. See Table 1 for descriptions.

Question number 2: Do parent demographics influence the level of involvement in the IEP

process?

For this systematic review, the purpose was to include only research related to CLD

parent involvement. According to my CLD definition, only parents from an environment where

the parent's primary language was other than English needed to participate. However, during the

search, only one study (Camacho, 2007) was found with Spanish-speaking participants. Thus, the

literature on parent involvement did not specifically target CLD population. Thus, we included

all the studies related to parent involvement in the IEP process regardless of the participant's

demographics. Most of the studies that reported participant demographics (*n*=4) reported having

Caucasian/White, African American/Black, and Hispanic/Latino as participants. Hirsch (2004)

also reported having 2.2% of participants from Alaska Native background. Thus, we were unable

to answer this question because the interventions were not targeted specifically for CLD

population. Additionally, some of the studies (*n*=4) did not report key characteristics of the

parent participants.

Question number 3:What interventions were effective to increase CLD parent involvement

in the IEP Process?

All of the interventions (*n*=10) reported having significant parent participation and

contribution at the IEP meetings after the interventions were implemented. However, these

interventions were implemented before the IEP occurred or during the IEP meeting.

Discussion

The purpose of this systematic review was to investigate interventions for CLD parent involvement related to IEP meetings. Findings across the ten studies provide the first summary of interventions for parents with children with disabilities associated with the IEP process. These interventions examined how best to increase parent participation during the IEP meetings. Three main findings were identified.

The first finding regarding the set of studies that met the inclusion criteria and were included in the narrative synthesis. Although we intentionally looked for studies that included CLD parent participants, there were not enough studies that only included CLD parents with children with disabilities to be able to create a systematic review with only those studies. If we had included only the studies that included CLD parent participants, the study would not have been possible since we only found one document from Camacho (2007) related to CLD parent involvement in the IEP process. Taking that into consideration and based on the literature, if the interventions are not specifically for CLD parents, they do not have the opportunity to participate even if they want to but because there is a lack of interventions in this area representing diversity in parent involvement. Research shows that parents from diverse backgrounds may have different advocacy expectations and less opportunities for participation in the special education system (Harry, 2008).

Second, the initial search was intended to include any type of experimental design related to this topic. However, no single case research designs were found but only ten group experimental designs were identified. These studies were published over a wide time period (i.e., 36 years), showing that his topic is of consistent importance. However, it was surprising to see that the pace of experimental design did not increase in recent years related to this topic or

including specifically CLD population in the studies. The last experimental design related to parent involvement with children with disabilities was in 2016, which was very surprising to find because parent participation at the IEP meetings is legally mandated (IDEA, 2004), and parents must be members of the IEP team to make decisions related to their child's education.

Third, parental involvement has been well documented at home (National Research Council, 2001) with focusing on training parents with children with disabilities to utilize strategies to support their children. The focus of parental involvement at home for children with disabilities is evidenced by multiple reviews in this area (McLaughlin et al., 2012; McConachie & Diggle, 2007; Patterson et al., 2011). However, little attention has been paid to the more traditional forms of school participation identified in the general education settings, such as attending school programs or volunteering at school. Paying attention to this type of parent involvement may be effective in creating collaboration between the school personnel and the parents and may increase the level of parent involvement in the IEP process. Solely focusing on parent training before or during the IEP meetings may not be sufficient to increase parent involvement in the IEP process, but also, we may want to broader the interventions that involve school personnel as members of the IEP team.

Implications for Practice

Results from this systematic review provide school personnel and researchers with evidence for effective interventions to improve parent participation at the IEP meetings. However, schools should encourage and promote parent involvement to different parents from different cultures and other countries related to the IEP process and invite them to be more involved at the school doing some volunteering work or participating at the school in different ways. To increase parent participation, the school personnel should create more collaborative and

supportive environments for the parents to express their opinions regarding their child's education, especially if the parent's perspective is different from the rest of the IEP team.

Limitations and Future Research

The primary limitation of this study reflects the limitation of the body of literature examining interventions for parents related to the IEP process. It is also the first implication for future research. There is a dearth of research focused on parent involvement in the IEP process and more deficiency considering diversity and differences in parent involvement. Future research should continue to build on the literature and increase research supporting parent involvement in the IEP process. Because of the growth of the CLD population in the United States, future research should also target CLD parents with children in special education since, according to the literature, these CLD parents may experience greater levels of stress because of the language or other barriers (Harry, 2008). Moreover, additional research is needed to understand better how different interventions and participant characteristics impact parent participation. Additionally, beyond the intervention focused on parent involvement in the IEP process, the lack of quantitative experimental design research in this area demonstrates the need for developing interventions that are more broadly for parents with children with disabilities.

Figure 1

PRISMA 2009 Flow Diagram

Records identified through database searching
(*n* = 233)

Additional records identified from ancestral, and hand search
(*n* = 5)

Records after duplicates removed Title/abstract assessed for eligibility
(*n* = 197)

Records excluded, with reasons
(*n* =163)
Ineligible participants, *n* = 51

Ineligible outcome, *n* = 49

Ineligible research design, *n = 63*

Full text assessed for eligibility
(*n* = 34)

Records excluded, with reasons
(*n* = 24)
Ineligible participants, *n* = 2

Ineligible outcome, *n* = 3

Ineligible research design, *n = 19*

Included in quantitative synthesis
(*n* = 10)

PRISMA Flow Chart Moher et al. (2009)

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* Refers to the studies included in the systematic review

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CHAPTER IV

A QUALITY REVIEW OF THE RESEARCH ON CULTURALLY AND LINGUISTICALLY

DIVERSE (CLD) PARENT INVOLVEMENT IN THE IEP PROCESS

English Language Learners (ELL) with disabilities continues to grow in the United States

(Lo, 2013). Watkins and Liu (2013) stated that although there are more than 400 different

languages in the ELL population, Spanish remains the predominant second language.

Approximately 150,000 ELL students are diagnosed as having a disability per five-year period.

Once an ELL student is determined to be eligible for special education services, educational

agencies may encounter additional challenges, such as providing assessments in their first

language and making sure their parents can participate in their education (Lhamon & Gupta,

2016).

Educational legislation, such as the Individuals with Disabilities Education Improvement

Act (IDEIA, 2004), mandates special education families' ongoing participation with children

with disabilities to ensure special education programs' efficiency. The Individuals with

Disabilities Act (IDEA) outlines several procedures regarding parent participation at the

Individualized Education Plan (IEP) meetings. Thus, parent involvement is crucial for academic

success in children with and without disabilities (Goldman & Burke, 2019). Moreover, several

studies support what the IDEA mandated about parent participation at the IEP meetings

(Feinberg et al., 2014) and showed that parent involvement with schools had resulted in better

parenting and better teaching. Like Becher (1984), older studies found that teachers are more proficient in their professional instruction when they have a greater level of parent participation in school activities.

Furthermore, recent studies, have also shown positive effects on parent involvement at home such as student engagement with task and homework and in general education settings (Nunez et al., 2019). However, few studies have discussed the effects of parental involvement in special education, specifically related to the IEP process. Additionally, those that do discuss parent participation in the IEP process have shown that parents are not involved in the development of the IEP document. It has been suggested that the culture and the socio-economic status has a direct relationship with the level of participation in the education and the IEP process of children in special education (Winters, 1993;Witt, et al., 1984;). Thus, culturally, and linguistically diverse (CLD) families tend to have low levels of participation in the context of IEP process (Harry, 2008).

Other research has addressed the importance of parent involvement in the IEP Process through qualitative research but qualitative research enough. Park and Turnbull (2001) conducted a study with ten Korean parents with children with disabilities and their perceptions about their relationship with professionals whom they work with to meet the needs of their children. In-depth interviews were used in their parent's native language. Language barriers presented the greatest challenge for eight of the parents. Parents said their limited English proficiency (LEP)

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limited their ability to have a meaningful interaction with professionals, preventing them from advocating and participating in school meetings and events.

Salas (2004) conducted interviews with ten Mexican American women with children with disabilities who resided between the US and Mexican border regarding their experiences at IEP meetings. Most of the participants reported to be submissive at the IEP meetings because of their LEP. English language dominance in U.S schools favors families who are monolingual (Garcia et al., 2000). The use of jargon and acronyms without explaining the process of the meetings in everyday language is challenging for English speakers but more so for LEP speakers. This barrier has been identified as a major obstacle for meaningful parent participation at the IEP meetings (Park & Turnbull, 2001; Salas, 2004).

More recently, Larios and Zetlin (2018) conducted a case study with eight Latinx families whose primary language was Spanish with children in special education to get to know parent's counter stories of the IEP meetings. All participants reported not fully understanding the IEP process and the technical language involved, which impacted their ability to communicate at the IEP meetings and understand each's family's level of acculturation. In this case, the level of acculturation means their commitment to the majority of the host culture (Nunez, 2019). Moreover, the schools did not have any supports in place to help bridge communication between the families and the educators at these meetings. In addition, quantitative research on parent involvement in the IEP process for CLD parents with children with disabilities is lacking. These

gaps should be addressed to successfully create quality research to successfully implement parent involvement interventions in the IEP meetings.

Prior to this study, there are no syntheses of the state of the quality of interventions related to CLD parent involvement in the IEP process. Thus, this is the first quality review that addresses CLD parent involvement in the IEP Process. One of the most important reasons to evaluate the quality of research is that the researcher could use the methodological quality criteria to determine if that particular intervention meets the quality standards so educators, parents, and other researchers can implement interventions with high-quality methodology. Rather than the poor-quality method (Horner et al., 2005).

Purpose

Given that the IDEA mandates parent involvement in IEP meetings. The purpose of this review was to determine the quality of the research on increasing participation and involvement of CLD parents in the IEP process with children in special education.

Procedures

Once the studies were identified and demonstrated experimental control (e.g., quasi-experimental design, randomized control trial, or pre-posttest) and provided an intervention or training to parents with children with disabilities, the studies were analyzed for quality indicators using the proposed Council for Exceptional Children (CEC) guidelines 2014. The following specific research questions were postured:

Research Questions

1. According to the CEC (CEC, 2014), what are the interventions' descriptive characteristics related to parent involvement?

2. What is the quality of the evidence for CLD parent involvement in the IEP process for group-based research?

3. What interventions are targeted for CLD parents with children with disabilities?

Method

Document Identification

In this study, potential studies for inclusion were located using three steps: a) electronic database searches, b) ancestral searches, and c) hand search. Search procedures are displayed in Figure 1.

Electronic Database Searches

The author and a research librarian used keywords terms and thesaurus terms to search different databases in EBSCO within the following scientific databases: ERIC, Educational Source, Legal Source, PsycINFO, and Academic Search Ultimate. In addition, ProQuest Dissertations & Theses Global database were included to search grey literature. Within each of the databases, the search was conducted using two search strings. The first of these strings contained keywords related to the intervention: *intervention, training, training methods, collaborat*, cooperat*, parent involvement, parent participation, Individualized Education Program, IEP, Individualized Education Plan.* The second of these strings contained keywords

associated with the possible participants: *cultural differences, language minorities, divers*, cultur*, linguistic, language."* All keywords within each of the strings were joined or combined with the Boolean operators AND/ OR. The publication year for each of the strings was restricted to documents in English and published between 1975 to 2020. The year 1975 was preferred because it was the year when the first special education law was passed. A total of 233 documents were identified using the electronic searches.

Inclusion/Exclusion Criteria

Title and abstract screening

Inclusion and exclusion criteria were applied to categorize studies upon reading the title and abstract of each. To be included in this review, the studies needed to meet the following criteria: a) a parent intervention was provided; b) participants were parents with children with disabilities, aged 3-21 years old as defined in Part B of IDEA; c) the intervention involved either training or informing parents about the IEP document, IEP meeting process, or special education law; d) the study used group experimental design (quasi-experimental design, pre, and post-test or randomized control trial); and e) studies needed to be conducted in the United States. All titles and abstracts were reviewed and excluded if they did not meet the criteria. If the information in the title/abstract stage was not clear to support the excluded decision, we kept the document into the full-text stage. After reading titles and abstracts from 233 studies, 34 potential studies were identified for full-text reading.

Full-text screening

Qualified studies from the title and abstract (*n*=34) were evaluated in full to determine if they met all the requirements in the inclusion criteria. Studies were excluded if studies were qualitative, literature review, book review, meta-analysis, systematic review or an informative or descriptive study. After the studies were evaluated for full text, 29 studies were excluded due to not meeting the inclusion criteria. The remaining five studies were included through this phase. Finally, the studies were screened against the CEC group standards (CEC, 2004), if the studies meet or not meet the standards were included. The purpose of this is because of the limited number of available studies. However, If they did not have all the inclusion criteria' conditions, the studies were excluded. (See Figure 1 for the PRISMA flow chart of each search at each stage and exclusion with reasons).

Ancestral search

Once the documents were identified through full text, the reference list of all five eligible documents was screened that included a) a review of the reference lists of included studies and b) a database search determining studies that cited the included articles via Google Scholar. From the ancestral search, two additional studies that met the inclusion criteria were identified.

Hand search

A hand search was conducted in the following journals that published studies meeting the inclusion criteria and were relevant to the topic area: *The Journal of Educational Research, Teaching Exceptional Children, Exceptional Children, Multiple Voices for Ethnically Diverse*

Exceptional Learners, *Multicultural Education, Psychology in the Schools, Journal of Policy & Practice in Intellectual Disabilities, Journal of Law & Education, Intervention & School & Clinic, Exceptionality, Journal of Education Research, Education and Treatment of Children, Preventing School Failure*, *Bilingual Research Journal, Multicultural Learning and Teaching, and Journal of Latinos in Education. The* same search procedures and inclusion criteria were used with the hand search. It was noted that Jones (2006), a dissertation, was included when doing the full-text screening, but then published later in 2010. Thus, the peer-review article was included instead of the dissertation. Additionally, Goldstein (1980) was identified as a dissertation and subsequently published. However, the published document was only one page long and did not have sufficient information for coding. Thus, the dissertation was used to analyze the data. From this search, three additional studies were identified meeting the inclusion criteria.

Coding Procedures for Quality Indicators

The CEC Standards for Evidence-Based Practices in Special Education (CEC, 2014) were used to evaluate the studies included in this review. The Quality Indicators (QIs) address the quality of eight areas of research, including (a) context and setting, (b) participants, (c) intervention agent, (d) description of practice, (e) implementation fidelity, (f) internal validity, (g) outcome measures/dependent variables, and (h) data analysis. Because all of the studies identified for the review employed group comparison search, we only used the QIs relevant to

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group design and excluded the QIs targeting single-case research because it was not relevant to this review.

Interrater reliability (IRR) on screening

The primary coder (first author) evaluated all the documents in coding procedures (title/abstract, full-text, and quality indicators) and another two doctoral students in special education with some experience in systematic reviews served as a second and third rater using the same inclusion and exclusion criteria to evaluate a random selection of the certain number of references from the original total of 233 studies. A 100% of IRR was done for the title and abstract screening, 100% for the full-text screening, and 50% of CEC Quality Indicators to establish IRR. Before the independent coding stage, the first author trained raters to code in each stage until the raters' reliability met 90% agreement. Re-training was taken whenever the rating score fell below 90%. The first author independently reviewed and/or discussed the discrepancy's solutions among other raters. IRR was evaluated by dividing the agreements by agreements and disagreements and obtaining a percentage by multiplying that figure by 100. The agreement scores for title/abstract were 94% across categories for exclusion and inclusion, for full text was 90%. The raters discussed disagreements, if necessary, to come to an agreement.

Variable Coding

Documents from the literature search were coded in an Excel spreadsheet following these variables: (a) type of intervention; (b) interventionist/implementer; (c) language of the intervention delivered; (d) setting; (e) intervention length; (f) intensity (number of minutes or

number of sessions); (g) research design; (h) IOA collected; (i) sample size; (j) social validity;

(k) parent demographics (age, race/ethnicity, primary language, and level of education); and (l)

child demographics (disability, age/grade, ethnicity/race, and primary language). Variable coding

was completed by an independent second rater, and the codes were compared with the first raters

codes.

Quality Indicator Coding

To evaluate the studies for the presence or absence of QIs for the 10 studies as defined by

CEC (2014), the fist author coded the studies for the following QIs: (1.0) context and setting,

(2.0) participants, (3.0) intervention agent, (4.0) description of practice, (5.0) implementation

fidelity, (6.0) internal validity, (7.0) outcome measures/dependent variables, and (8.0) data

analysis.

Inter-Rater Reliability (IRR) on Quality Indicator and Variable Coding

The quality indicator coding was completed by the primary coder (first author) and two

independent coders who were doctoral students in special education. The second and third raters

coded 50% of the studies. Before independently coding, the coders practiced with one study until

the reliability met 90% agreement. After coding, coders compared results, including discussing

and resolving any discrepancies, and calculated IRR point-by-point for each study and each QI

component. All disagreements were resolved through discussion among the three coders prior to

analysis. Raters agreed for 92.5% (range, 85%-100% within quality indicator categories) of 88

opportunities for the CEC Standards.

Of the ten studies included for the review, five of the studies were randomly selected for IRR on variable coding. Coding for all ten studies was completed by the primary coder (first author) and an independent coder who was a doctoral student in special education. Before independently coding, the coders practiced with one study until the reliability met 90% agreement. After coding, coders compared results, including discussing and resolving any discrepancies, and calculated IRR point-by-point for each study and each variable coding component. Raters agreed for 95% (range, 90%-100%) of the variable coding.

Methodological Quality Indicators

QI 1.0. Context and setting

To meet QI 1.0 the study had to provide information on a least one characteristic of the demographic (e.g., location, region, site, school setting). If the study described that information, this indicator was considered met.

QI 2.0. Participants

To meet QI 2.0 the study had to provide information on at least one demographic variable to describe parent participants (e.g., gender, age, ethnicity). To meet the second component, the study needed to describe participant disability/risk status. This second component was not included because the participants were parents of children with disabilities. Thus, this component was not applicable.

QI 3.0. Intervention agent

To meet QI 3.0 the study had to describe at least one demographic of the intervention

agent (e.g., role, age) or how the intervention agent delivered the intervention. For this QI, we counted as an intervention agent the interventionist or implementer (e.g., the researcher, first author), since most of the documents of this review were dissertations.

QI 4.0. Description of practice

To meet QI 4.0 a study had to describe the intervention procedures with enough detail to be replicable. This QI was also met if the study described the materials (if needed) used for the intervention with replicable detail.

QI 5.0. Implementation fidelity

To meet QI 5.0 a study had to describe an assessment of fidelity for the intervention procedures (e.g., a checklist, observation of procedures). It was also met if the study provided length, time, or a percentage to assess the study (e.g., 25 min a week, % of all sessions throughout the intervention (beginning, middle, or end of the intervention period).

QI 6.0. Internal validity

To meet QI 6.0 a study had to describe control/comparison (group comparison studies) conditions and/or use and experimental design. For this study, all of the documents included had to be an experimental research design (e.g., randomize group design, pretest-posttest, group comparison). Thus, all the studies met this indicator.

QI 7.0. Outcome measures

To meet QI 7.0 the study had to include important outcomes through formal social

validity assessment or another type of measurement to validate the intervention's effects, not only for the studies that had positive results.

QI 8.0. Data analysis

To meet QI 8.0 a study had to report information o effect size even if the study outcomes were not statistically significant (e.g., Cohen's d, Hedge's G). Or other psychometrics reporting the effects of the intervention with some type of measure (e.g., effect sizes, standard deviation, mean) to calculate the outcome of the intervention.

Results

This quality review aimed to examine and summarize the literature surrounding interventions or training for parents with children with disabilities at the IEP. From full text, ancestral, and hand search, a total of 10 studies were identified and included in this quality review. A total of 10 experimental or quasi-experimental group design documents were reviewed and analyzed. A total of 331 parent or caregiver participants with children in special education were included in this study. Only three of the studies (Hirsch, 2004; Jones, 2010; and Stout, 2004) met the QI in all the eight categories. The rest of the studies (*n*=7) met at least one criterion of the QI but not all of them (See Table 1).

Descriptive review of Studies Included

Included studies were published from 1980-2016. Six of the studies were found in the gray literature (dissertations), (Blietz,1988; Camacho, 2007; Goldstein, 1980; Hirsch, 2004;

Plunge, 1998; and Stout, 2004), and four studies were (peer-review) articles published in different unique journals, (Boone, 1992; Brinckerhoff & Vincent, 1986; Jones & Gansle, 2010; and Mereoiu et al., 2016). All of the studies (*n*=10) implemented their intervention in school settings. Three of the studies (Camacho, 2007; Moreiou, 2016; and Stout, 2004) did a pretest-posttest experimental design intervention, and the rest of the studies were randomized group design with a control group. Five of the studies (Boone, 1992; Hirsch,1999; Jones, 2010; Plunge; 1998; and Stout, 2004) collected interobserver a Put these in the same parenthesis agreement (IOA) while the rest of the studies did not. Six of the studies (Blietz, 1988; Boone, 1992; Goldstein, 1980; Hirsch, 1999; Jones, 2010; and Stout, 2004) collected social validity or some type of questionnaire to measure the satisfaction of the intervention while the other four did not. In four of the studies (Blinckerhoff & Vincent, 1986; Boone, 1992; Jones, 2010; and Mereoiu, 2016), school community liaison, general education and special education teachers were the implementers/interventionists of the intervention. While in the other six studies, the first author/primary researcher was the implementer/interventionist of the intervention. Only one of the studies (Camacho, 2007) was implemented in Spanish-to-Spanish speaking parents' participants. For Stout, 2004 the requirement to participate in the study was that the parent participants needed to speak English as a primary language. (Jones, 2010) had two parents that only spoke Spanish, but the surveys were not translated to Spanish, instead, the data was collected at the IEP meeting using an interpreter. The rest of the studies did not report the primary language of the parent/legal guardian participant. Four of the studies (Blietz, 1988;

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Goldstein, 1980; Jones, 2010; and Plunge, 1998) did not report parent/legal guardian race/ethnicity. While the other studies did. (Boone, 1992) reported having parent participants from Hawaiian, part Hawaiian Filipino, Japanese, Portuguese, Samoan, or mixed ethnic backgrounds. The rest of the studies reported having African American, Caucasian/White, and Hispanic/Latino participants. In addition to that, (Hirsch, 2001) also reported having American Indian/Alaska Native participants in the study (See Appendix 1 for additional descriptive information).

Methodological Quality Indicators

1.0 Context and setting

All studies met QI 1.0, describing information about the location the intervention was implemented. All of the studies described that the intervention was implemented in a school setting from elementary schools through high schools. Nine of the studies reported the location of the intervention except for (Goldstein, 1980), who only mentioned that the intervention was implemented with participants from five elementary schools in one local education agency (LEA).

2.0 Participants

All studies met QI 2.0, all of the studies reported having parents (mothers and fathers) with children with disabilities. Additionally, (Stout, 2004) reported having a grandfather and an aunt, similar to (Hirsch, 2001), who reported a grandmother participating as a legal guardian of the child.

3.0 Intervention agent

All of the studies described the role of the interventionist/implementer to meet QI 3.0. Four of the studies (Blinckerhoff & Vincent, 1986; Boone, 1992; Jones, 2010; and (Mereoiu, 2016) reported that the interventionist or implementer of the intervention was the general education teacher or the special education teacher. For the rest of the studies, the first author was the implementer of the intervention. (Goldstein, 1980) was the primary implementer of the intervention but used a counselor and a teacher's support to accomplish it.

4.0 Description of a practice

For this QI 4.0, all of the studies described the procedures of the intervention. However, three studies (Blinckerhoff & Vincent, 1986; Blietz, 1988; and Boone, 1992) did not describe the intervention or materials (if needed) with enough detail to allow replication.

5.0 Implementation fidelity

Five of the studies met QI 5.0 for reporting implementation of fidelity using observations, checklist, or audio-taped recordings to measure this indicator. (Blinckerhoff & Vincent, 1986; Blietz, 1988; Camacho, 2007; Goldstein, 1980; and Mereoiu, 2016) did not report fidelity of implementation.

6.0 Internal validity

All of the studies met QI 6.0 since they had to have a comparison group (treatment and control) and/or use and experimental design. Three of the studies (Camacho, 2007; Mereoiu,

2016; and Stout, 2004), had a pretest-posttest/survey, while the other seven studies had a comparison group.

7.0 Outcome measures/ dependent variables

Seven of the studies (Blietz, 1988; Boone, 1992; Camacho, 2007; Goldstein, 1980; Hirsch, 1999; Jones, 2010; and Stout, 2004) met QI 7.1. These studies measured parental satisfaction through surveys, Likert scales or interviews. All of the outcomes of these measurements were positive. The other three studies did not report social validity.

8.0 Data Analysis

Eight of the studies (Blietz, 1988; Boone, 1992; Camacho, 2007; Hirsch, 1999; Jones, 2010; Mereoiu, 2016; Plunge, 1998; and Stout, 2004), did report effect size or standard deviation and mean to calculate the effect size. Thus, eight of the studies met QI 8.1. The other two studies did not report any information to calculate the effect of the intervention.

Question number 1: What is the quality of the evidence according to the CEC (CEC, 2014) of descriptive characteristics of the parent interventions reviewed?

Only three studies (Hirsch, 2004), (Stout, 2004), and (Jones, 2010) met all of the eight quality indicators from the CEC. The rest of the studies did not meet at least one QI. Therefore, there is a need for quality studies related to parent interventions and parent involvement at the IEP process.

Question number 2: What is the quality of the evidence for CLD parent involvement in the IEP process for group-based research?

More group-based research is needed in the context of CLD parent involvement in the

IEP process. During this review, only one study from (Camacho, 2007) included Spanish-speaking participants with children with disabilities. However, this study did not meet the QI related to the implementation of fidelity. Thus, no research has been done in this area, and the quality of the research that exists is poor.

Question number 3: What interventions are targeted for CLD parents with children with disabilities?

Like it was mentioned before, only one study from (Camacho, 2007) was target specifically for Spanish speaking parents with children with disabilities. This intervention consisted in providing workshops to the parents in their native language (Spanish) to learn about the IEP meetings and the IEP process in general.

<div align="center">

Discussion

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This quality indicator review analyzed ten group experimental design studies by using CEC quality standards (CEC, 2014) in the full-text stage. The ten studies implemented an intervention for parents of children with disabilities. As a result of the analysis, the results showed important issues that need to be considered and addressed in terms of interventions for parents with children with disabilities at the IEP meetings. Only three studies met the CEC quality standards in full for group methodology. In particular, because there was not enough support of fidelity of implementation, since only half of the studies met this indicator, and almost half of the studies did not use a measure for social validity. It is important to gather data

concerning social validity to make sure the implementation of the intervention is meaningful for the participants. Additionally, three studies did not describe in full the procedures to be able to replicate the intervention, and two of them did not report an effect size or any data to calculate the outcome of the intervention. These findings show the lack of quality research in this area. Furthermore, only one study implemented the intervention with Spanish-speaking parents with children with disabilities. However, this study had a pre-test and post-test intervention with only one group of participants not using a comparison group, which was the downside of this intervention. Overall, this literature can be described as limited due to the small number of studies and variability of the included research.

Implications for Practice

There is an urgent need to conduct more interventions related to CLD parent involvement at IEP meetings, as well as implementing these interventions addressing Quality Indicators (e.g., CEC, 2014) when conducting research studies. Moreover, it is important that researchers clearly report the methods they use when doing an intervention to allow for replication and have evidence-based practices that practitioners will implement with high-quality. High-quality studies are needed to understand better the parent perceptions related to the IEP process, particularly CLD to build a partnership and increase parent involvement in the schools during the IEP process.

Limitations and Future Research

Some limitations in this quality review need to be addressed and considered for future

research. First, the number of studies collected and reported data in all of the CEC (2014) standards was limited. Therefore, researchers are encouraged to increase their studies' quality and report the information from the CEC standards to create quality research. Second, this quality review included group design studies because single case studies were not available. Thus, future researchers are encouraged to develop interventions using single-case research design to determine what interventions work best for parent involvement. Third, only a few studies reported effect sizes of the data. Four, only one study included Spanish speaking parents with children with disabilities and implemented the intervention in Spanish. Future research is encouraged to create interventions for CLD parents who are LEP to support them and help them to be involved with their child's education. Additionally, in terms of reporting the findings, researchers need to provide more comprehensive information related to parent and child characteristics to make statements about the representativeness of the sample and see if there is any relationship between these characteristics and parent involvement in the IEP process. This has been a common problem in multiple studies, and it does not seem improving in recent studies.

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CHAPTER V

SUMMARY AND CONCLUSION

Summary

The overarching purpose of this three-part study was to learn from the experiences of immigrant parents with children with disabilities about the IEP process as well as to look at the literature to find studies that reported on an intervention related to parent involvement in the IEP process. First, a qualitative study of Latino immigrant parents with children with disabilities was conducted. Seven themes emerged after completing the study: a) parents' insecurity of knowledge, b) difficult terminology, c) confusion with the IEP process, d) discrimination or misconceptions, e) staff lack of knowledge, f) language barriers, and g) need of parent advocacy. Second, a systematic review of the literature on studies related to interventions increasing parent involvement at the IEP process was conducted. Through this search, ten studies were found but only one study had CLD parent participants. Third, a quality review of the ten studies included in the systematic review using CEC, 2014 standards was performed. Through this search, three studies of the ten studies included, met all the quality standards.

Qualitative Study

The purpose of the present study was to examine Latino immigrant parents' experiences and perspectives of children with disabilities in the IEP process. Overall, many participants seemed hurt and frustrated with the school system. Despite the widespread arguments in the literature, not a lot has changed since the 1980s. Participants expressed a need for more tools to help their children. They requested more support from the school personnel in the area of special education services and special education law in general. The findings provide several important

contributions to the field of special education about ways in which educators and professionals can improve their practices to include the voices of those underrepresented.

First, it is important to note that parents would like to have a more active role during the IEP process and have better collaboration, but they want to feel heard, understood, and supported. Parents expressed their desire to contribute and to be involved in their child's education. The themes elucidating the complications with this collaboration expanded on previous literature focused on these parent-teacher collaborations. The literature indicates that a major barrier for LEP parents to participate at the schools is the language barrier (Hardin et al., 2009; Lo, 2008; Salas, 2004). However, in this study, having LEP was not the most commonly discussed barrier. Rather, it was the parents' lack of knowledge that often was the first thing that prevented them from participating in the IEP process and to support their children with their education. Although the language was a barrier, all of the participants mentioned that if they had the knowledge, their collaboration with the IEP professionals and school personnel would be better.

Second, it is imperative to examine current teacher preparation for culturally responsive practices in general and special education settings (Barrio, 2020). Parent-teacher relationship is fundamental for a successful IEP meeting and student success (Zetlin & Curcic, 2014). The voices of these participants reflect tension and unequal relationships.

Finally, the findings indicate that parents' perceptions regarding the IEP process did not differ from one parent to another. All of the parents felt similar to one another regardless of their level of education and socioeconomic status. Thus, when preparing the IEP document and the IEP meeting, the student's unique students' needs need to be the main focus and no the parent's level of education (Zetlin & Curcic, 2014).

Systematic Review

The purpose of this systematic review was to investigate interventions for CLD parent involvement related to IEP meetings. Findings across the ten studies provide the first summary of interventions for parents with children with disabilities associated with the IEP process. These interventions examined how best to increase parent participation during the IEP meetings. Three main findings were identified.

The first finding regarding the set of studies that met the inclusion criteria and were included in the narrative synthesis. Although we intentionally looked for studies that included CLD parent participants, there were not enough studies that only included CLD parents with children with disabilities to be able to create a systematic review with only those studies. If we had included only the studies that included CLD parent participants, the study would not have been possible since we only found one document from Camacho (2007) related to CLD parent involvement in the IEP process. Taking that into consideration and based on the literature, if the interventions are not specifically for CLD parents, they do not have the opportunity to participate even if they want to but because there is a lack of interventions in this area representing diversity in parent involvement. Research shows that parents from diverse backgrounds may have different advocacy expectations and less opportunities for participation in the special education system (Harry, 2008).

Second, the initial search was intended to include any type of experimental design related to this topic. However, no single case research designs were found but only ten group experimental designs were identified. These studies were published over a wide time period (i.e., 36 years), showing that his topic is of consistent importance. However, it was surprising to see that the pace of experimental design did not increase in recent years related to this topic or

including specifically CLD population in the studies. The last experimental design related to parent involvement with children with disabilities was in 2016, which was very surprising to find because parent participation at the IEP meetings is legally mandated (IDEA, 2004), and parents must be members of the IEP team to make decisions related to their child's education.

Third, parental involvement has been well documented at home (National Research Council, 2001) with focusing on training parents with children with disabilities to utilize strategies to support their children. The focus of parental involvement at home for children with disabilities is evidenced by multiple reviews in this area (McLaughlin et al., 2012; McConachie & Diggle, 2007; Patterson et al., 2011). However, little attention has been paid to the more traditional forms of school participation identified in the general education settings, such as attending school programs or volunteering at school. Paying attention to this type of parent involvement may be effective in creating collaboration between the school personnel and the parents and may increase the level of parent involvement in the IEP process. Solely focusing on parent training before or during the IEP meetings may not be sufficient to increase parent involvement in the IEP process, but also, we may want to broader the interventions that involve school personnel as members of the IEP team.

Quality Review

This quality indicator review analyzed ten group experimental design studies by using CEC quality standards (CEC, 2014) in the full-text stage. The ten studies implemented an intervention for parents of children with disabilities. As a result of the analysis, the results showed important issues that need to be considered and addressed in terms of interventions for parents with children with disabilities at the IEP meetings. Only three studies met the CEC quality standards in full for group methodology. In particular, because there was not enough

support of fidelity of implementation, since only half of the studies met this indicator, and almost

half of the studies did not use a measure for social validity. It is important to gather data

concerning social validity to make sure the implementation of the intervention is meaningful for

the participants. Additionally, three studies did not describe in full the procedures to be able to

replicate the intervention, and two of them did not report an effect size or any data to calculate

the outcome of the intervention. These findings show the lack of quality research in this area.

Furthermore, only one study implemented the intervention with Spanish-speaking parents with

children with disabilities. However, this study had a pre-test and post-test intervention with only

one group of participants not using a comparison group, which was the downside of this

intervention. Overall, this literature can be described as limited due to the small number of

studies and variability of the included research.

Conclusion

As the number of students with disabilities from culturally and ethnically diverse

populations increases in the US, it is critical to provide education, tools, and supports to CLD

parents with children with disabilities to create culturally responsive and relevant IEPs. It is also

important to create a culturally responsive safe environment for the parents for them to learn how

to navigate the special education system. As parents become more knowledgeable, they would

feel more empowered to be mor involve in their child's education and at the IEP meetings. These

considerations will lead to more positive perceptions of the IEP process, a higher quality of

education, and tremendous student success.

Appendix A - Participant Demographic Questionnaire (English version)

1. What is your relationship to this child?
   ○ Mother

   ○ Father

   ○ Guardian

2. What is your primary language ?
   ○ Spanish

   ○ More Spanish than English

   ○ More English than Spanish

3. Race or ethnicity:
   ○ Hispanic/ Latinx (any race)

   ○ African American

○ White

○ Two or more races

○ Native American or Alaskan Native

○ Asian

○ Other: _____

4. Is your child between 3-21 years old? How old? _____

5. What is your child diagnosis? _____

6. How old are you? _____

7. What is your highest level of education? **Check only one**.

☐ Eighth grade or less	☐ Bachelor's degree
☐ Some high school but no diploma	☐ At least one year of course work beyond a B.A. or B.S.
☐ High school diploma or equivalent	☐ Master's degree
☐ High school diploma or equivalent, **plus** technical training or certificate	☐ Education specialist or professional diploma based on at least one year of course work beyond a master's degree
☐ Some college but no degree	☐ Doctoral degree
☐ A.A., A.S., two-year degree	☐ Other: *Specify*: _____

8. In what country did you complete your education: _____

9. What is your place of birth?_____

10. How long have you been in the US? _____

11. Do you receive any public assistance such as food stamps, WIC, housing assistance, or welfare?
⭘Yes   ⭘No

12. Are you currently employed?
⭘Yes   ⭘No

13. What is your marital status?
○ Married

   ○ Single

○ Other

14. Do you require an Interpreter or English Language assistance at the IEP meetings?
   ○Yes   ○No

Semi-Structured Interview Questions

Began with Special Education Services

a) How did you find out that your child needed special services?

b) What was his/her diagnosis?

c) What was your reaction?

d) When did your child start getting special education services? (time)

e) To how many IEPs have you attended?

f) In how many schools/school districts has your child received special education services?

g) What type of special education services does your child receive at school that are

included in the IEP document?

Understanding an IEP document

a) Are you fully aware about what is an IEP document?

a) In your own words how would you explain other parents what is an IEP?

b) Why do we have annual meetings?

Support received before an IEP meeting.

a) What kind of support did you receive from your child's school/district in preparation for the IEP meeting (e.g., a checklist, what to expect, who would be there; quality and quantity of communication from home to school)?

b) How helpful was the support you received from the child's school or district?

c) What type of support do you wish was available to help you prepare for IEP meetings?**Support during the IEP meeting**

a) What kind of support did you receive during the meeting? How helpful was this support?

b)   Did you receive a copy of the Procedural Safeguards at or before the meeting?

c)   How was the communication between yourself and professionals at the meeting?

d)   Do you feel comfortable with the message or with what the professionals are talking about in the meeting?

e)   How the professionals communicate with you about the progress or goals of your child?

f)   Are you satisfied with that form of communication?

g)   Did the IEP team address the strengths of your child at the meeting?

h)   In what ways do you participate at the IEP meetings? Do you get asked to give your opinion during the meeting?

i)   Do you feel respected by your child's case manager and/or special education teacher? If yes, what do they do that makes you feel that way? If no, what do you wish they did to help you feel more respected?

j)   Were you satisfied with the IEP results? Why or why not?

k)   Did you feel comfortable signing the IEP document?

l)   What do you think the IEP team can do to make these meetings more effective?

m) How helpful is the interpreter/translator at the IEP meeting?

Knowledge about parent rights

a)   Are you aware of your rights as a parent?

b)   What would you do if you disagree with the IEP team?

c)   Do you know what laws protect your child with a disability?

d)   If you knew that the goals that are implemented at the IEP meeting are not helping your child what would you do?

After the IEP meeting

a) Once you leave the meeting and you have the document, they gave you at the IEP, what do you do with it?

b) Do professionals from the IEP team follow up with you regarding the meeting?

Advise to Other Parents

a) What type of advice would you give to other CLD parents who are native speakers regarding the IEP meeting/document?

Table B.1

Overview of the Studies

Study	Goldstein (1980)	Brinckerhoff & Vincent (1986)	Blietz (1989)	Boone (1992)	Plunge (1998)
Publication Type	Dissertation	Journal Article	Dissertation	Journal Article	Dissertation
Design	Randomize Group Design	Randomize Group Design	Group Comparison Experimental Design	Group Comparison Experimental Design	Randomize Group Design
Sample Size	45	14	45	30	44
Intervention and Length	a) Send questions before IEP Conference with a follow up telephone call, b) Having a parent advocate present at the conference with a mean of 23.84 minutes of length per IEP conference	Completed a developmental assessment on their child's present performance, recorded their family profile, and had a meeting with a school/community liaison person prior to their child's IEP meeting	Parent Training Packet (PTP) including a) introduction empathizing that parents are part of the IEP team, b) parents' rights, c) overview of special education process, d) participants included in the IEP conference , e) preparation for the conference, f) goal setting, g) questions that parents should ask at the meetings, h)due process, i) special education services, and j) forms in one-hour session 1 to 3 days prior to the IEP conference	Preconference training prior to the IEP meeting for no more than one hour long to provide information to the parents about transition planning and offered information about a) student skills, b) how to ask questions, c) stating agreements or disagreements with school professionals	A 40-minute video tape training before the IEP meeting including a) a description of parents' legal rights, b) the special education process, c) communication strategies
Reported Findings	Parents who attended the conference with the school counselor as an advocate made the highest proportion of relevant contributions to the conference when compared to the other groups of parents	Participants in the experimental group shown statistical significantly greater frequency in contributions, goals, and decisions made at IEP meetings	There was not statistically significant difference between the parent groups who received the intervention and parents who did not received the intervention	Parents who received the preconference training higher scores when evaluating transition knowledge than parents who did not receive the training	Parents in the experimental group evidenced higher levels of knowledge of their legal rights and reported higher levels of self-efficacy in advocating for their children compared to the parents in the control group

Study	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
Publication Type	Dissertation	Dissertation	Dissertation	Journal Article	Journal Article
Design	Pre- and Post- test intervention	Randomize Group Design	Pre- and Post- test intervention	Quasi-experimental design with random assignment	Pre- and Post- test intervention
Sample Size	18	45	37	41	12
Intervention and Length	Prior to the IEP conference parents received a 27-minute video-based multimedia instructional intervention to a) increase parent knowledge of special education legislation, b) evaluation process, c) increase parent participation	Before the IEP conference between one to two hours parents received a) Informational Handouts and b) one-one-one training regarding special education process	Talleres en español para las Necesidades de Familias en educación Especial (Spanish Workshops for the Needs of Families in Special Education) to a) influence knowledge about their children's IEP process, and b) influence parent involvement in their children's education. Five workshops were implemented with approximately 3 hours each workshop	Prior to the IEP meeting parents received a mini conference with the special education teacher to review a) specific vocabulary used at the IEP meeting, b) goals and objectives, c) rationale for parent participation at the meetings, d) how to ask questions if needed information. Mini conferences lasted between 20 and 30 minutes one session	A family-professional partnership intervention on perceptions of the IEP process with the teachers and the parents to a) promote collaboration in special education, and b) provided strategies for effective communication, equality, and partnership in decision making. This collaborative training model lasted six months
Reported Findings	Parents assigned to the treatment group demonstrated significantly greater knowledge of special education and exhibited significantly more verbal behavior during the IEP	Parents in the treatment condition reported higher rates of preparation exhibited statistically significantly higher rates of active participation during the initial meetings than parents in the control condition	The results from the parents who attended the workshops were statistically significant confirming that it was likely that participants' attendance in the workshop gain a higher score on the test where participants demonstrated their knowledge related to the IEP process	There was no statistically significant differences between the mini-conference group and the control group on the number of comments made per minute by the participant. However, the test indicated that the teachers in the mini-conference group rated the parents as having participated more than in the control group	Parent and professional groups rated the items in the test medium to high indicating that the IEP process is valuable for setting goals and establishing objectives that improve the quality of education of students with disabilities

Table B.2

Summary of parent participant demographics

Study	Goldstein (1980)	Brinckerhoff & Vincent (1986)	Blietz (1988)	Boone (1992)	Plunge (1998)
Relationship with Child	Parents of children with learning disabilities	Parents of handicapped children	Parents of children who were referred for special education services	Parents of high-school students with mild/moderate disabilities	Mothers (n=32) Fathers (n=10) Aunt (n=1) Grandfather (n=1)
Age	Not reported	Experimental mother mean: 27.9 Control mother mean: 25.1	Not reported	Mean 43 years old	The mean age of the participants was 37 years (mode = 32 years) with a range from 27years to 62 years
Race/Ethnicity	Not reported	Experimental Group Mothers: 6 white - 1 black Control Group Mothers: 5 white-2 black	Not reported	Hawaiian, part Hawaiian Filipino, Japanese, Portuguese, Samoan or mix ethnic backgrounds	Not reported
Primary Language	Not reported	Not reported	Not reported	Not reported but stated that none of the parents required interpreter as a result of limited English Proficiency	Not reported
Level of Education	Not reported	Mothers average 12 years of education	Not reported	10-12 years of education	High school, Technical School, College or University, Graduate Degree

(Continued)

Study	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
Relationship with Child	Mothers -75% Fathers -09% Grandmother-09% Grandfather-03% Aunt-03%	Mothers (n =36) Fathers (n=9) Legal guardian (grandmother) (n=1)	Mothers -78% Fathers -20% Other - 2%	Parents of special education students	Parents of Children with disabilities
Age	The average age of family participants was 37, with a range of 23 to 64 years of age	Between 36-45 years of age	Mean age was 38 years old	Not reported	26–30 years = 3 31–35 years = 1 36–40 years =2 41–50 years = 5 51–55 years =1
Race/Ethnicity	Caucasian- 75% Hispanic -22% African American- 3%	African American - 4.3% Caucasian/White - 71.7% Hispanic/Latino - 23.9% American Indian/ Alaska Native- 2.2%	Caribbean -82% South America-18%	Not reported	African American =1 Caucasian/White= 10 Hispanic/Latina=1

Study	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
Primary Language	It does not mention exactly. However, one of the requirements to participate was to speak English as primary language	Proficient in English language	Spanish Speaking	Not reported	Not reported
Level of Education	College degree- 9% Some college-18% GED-56% Did not complete High School-15%	Mother Some High School = 8.7% High School Graduate = 21.7% Partial College = 39.1% College Graduate = 26.1% Graduate Training = 4.3% Father Some High School = 10.9% High School Graduate = 21.7% Partial College = 32.6% College Graduate = 23.9% Graduate Training = 8.7%	4 years of college - 43% 2 years of college - 31% Up to 12th grade -9% Up to 8 grade -6%	Graduate degree- 17.1% Associates or bachelor's degree- 24.4% Hight school -39% Did not graduate high school-19.5%	Not reported

Table B.3

Summary of the child's demographics

Study	Goldstein (1980)	Brinckerhoff & Vincent (1986)	Blietz (1988)	Boone (1992)	Plunge (1998)
Child disability/diagnosis	Learning disabilities	Not reported	Not reported	Mild/Moderate disabilities	Specific Learning Disability Speech/Language Impairment /Cognitive Disability/ Emotional Disability
Child Age/Grade	1st-5ft grade	Experimental: Range age from 2.2 to 5.5 years with a mean of 4.0 Control group: ranging from 3.7 to 5.11 with mean of 4.8 years	Not reported	High School students	Kindergarten through sixth grade
Child Race/Ethnicity	Caucasian/White = 32 African American/Black =13	Not reported	Not reported	Not reported	Caucasian/White =79.5% African American Black =6.8% Hispanic=13.6%
Child Primary Language	Not reported	Not reported	Not reported	Not reported	Not reported

(Continued)

Study	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
Child disability/diagnosis	Experimental group: Learning Disability= 3 Other Health Impaired= 4 Autism= 2 Control group: Learning Disability= 7 Other Health Impaired= 0 Autism= 1 Emotional Disturbance=1	Specific Learning Disability (SLD)	Not reported	Learning Disabilities=26.8%, Other health impaired=24.4%, Mental retardation =19.5%, Autism=17.1%, Visually Impaired=4.9%, Orthopedic Impairments=2.4%, Emotional Disturbance=2.4%,and Speech or Language Impairment=2.4%	
Child Age/Grade	Averaged 8 years of age and were in 3rd grade	The average age of The students was 9.3 years old	Not reported	Elementary school=17 Intermediate School=16 High School=6	Not reported
Child Race/Ethnicity	Caucasian/White =70% Other than Caucasian= 30%	Not reported	Hispanic	Not reported	Not reported
Child Primary Language	Not reported	Not reported	Not reported	Not reported	Not reported

Table B.4

Quality Indicator Summary

Quality Indicator	Goldstein (1980)	Brinckerhoff & Vincent (1986)	Blietz (1988)	Boone (1992)	Plunge (1998)	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
1.0 Context and Settings	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
2.0 Participants	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
3.0 Intervention Agent	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
4.0 Description of Practice	Y	N	N	N	Y	Y	Y	Y	Y	Y
5.0 Implementation Fidelity	N	N	N	Y	Y	Y	Y	N	Y	N
6.0 Internal Validity	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
7.0 Outcome Measures	Y	N	Y	Y	N	Y	Y	Y	Y	N
8.0 Data Analysis	N	N	Y	Y	Y	Y	Y	Y	Y	Y

Y=Yes meets the Quality Indicator (QI) N= Does not meet the Quality Indicator (QI)

Table B.5

Percentage of Studies that Meet Each Quality Indicator (CEC, 2014)

Quality Indicator	Percentage of Studies that Address the QI
1.0 Context and Settings	100%
2.0 Participants	100%
3.0 Intervention Agent	100%
4.0 Description of Practice	70%
5.0 Implementation Fidelity	50%
6.0 Internal Validity	100%
7.0 Outcome Measures	70%
8.0 Data Analysis	80%

Table B.6

Quality Indicator for studies (CEC, 2014)

Quality Indicator	Goldstein (1980)	Blinckerhoff & Vincent (1986)	Blietz (1988)	Boone (1992)	Plunge (1998)
1.0 Context and Settings	Five elementary schools in one local education agency (LEA). This LEA was chosen because it had both urban and rural populations representing different levels of socio-economic status	Schools in Madison Metropolitan School District	Southwest Iowa and Loess Hills Area Education Agency 13 (AEA 13)	Four high schools located in two districts on the island of Oahu, HI	Seven different elementary schools in a suburban school district in central Arizona
2.0 Participants	Parents of Children with learning disabilities	Parents of handicapped children	Parents of children who were referred for special education services	Parents of high-school students with mild/moderate disabilities	Parent or legal guardian of a child who had been referred for a special education evaluation and had no other children receiving special education services
3.0 Intervention Agent	First author, counselor, and teacher	A school community liaison	First author	General Education Teachers	First author and a graduate assistant
4.0 Description of Practice	Questions sent to parents prior to the IEP conference regarding the student and his education and, a guidance counselor present at the IEP conference in the role of parent advocate	Parents completed a developmental assessment on their child's present performance, recorded their family profile, and had a meeting with a school/community liaison person prior to their child's IEP meeting	Conference Parent Training Packet (PTP) including: (1) an introduction accenting parents as part of the educational team, (2) parent rights, (3) an overview of the special education process, (4) participants included in the IEP conference, (5) preparation for the conference,(6) goal setting, (7) questions that should be asked, (8) due process, (9) special education services, and (10) forms	Preconference training delivered to parents to provide them with the basic knowledge about transition planning as part of the IEP. The study documented parent participation in (a) offering information (e.g., parent offered information about student skills,(b) asking questions (e.g., goals about the student), and (c) stating preferences/opinions (e.g., agreements or disagreements with professional opinions)	Video tape training including a description of parents' legal rights, the special education process, and communication strategies before the IEP meeting
5.0 Implementation Fidelity	Not reported	Not reported	Not reported	Direct Observations and Interrater reliability of 80-85% was obtained	Not reported

Quality Indicator	Goldstein (1980)	Blinckerhoff & Vincent (1986)	Blietz (1988)	Boone (1992)	Plunge (1998)
6.0 Internal Validity	Randomize Group Design	Randomize Group Design	Group Comparison Experimental Design	Group Comparison Experimental Design	Randomize Group Design
7.0 Outcome Measures	The parents were interviewed by telephone within a week of the conference to measure parental satisfaction at the IEP	Not reported	Parent's satisfaction survey was administered after the IEP conference	The Parent Conference Opinion Questionnaire (PCOQ) – 12 five-point Likert scale was administrated to measure parent satisfaction	Not reported
8.0 Data Analysis	Parents who attended the conference in which the school counselor was present in the role of parent advocate made the highest proportion of relevant contributions to the conference when compared to parents with whom no intervention strategy was used or parents in the control group. Thus, the mean number of relevant contributions made by parents during the IEP meeting was larger for the two groups in which an intervention strategy was employed (questions sent, parent advocate) than for the control group	Statistical analysis indicated significantly greater frequency in contributions, goals, and decisions made at IEP meetings by parents in the experimental group. The school staff also provided more suggestions to the parents in the experimental group and made more decisions for the parents in the control group	There was not significant difference in mean scores between parent groups that received direct, indirect, or no parent training on increasing parent understanding of the IEP conference	Parents who receive the training obtained significantly higher scores when evaluating transition knowledge than parents who did not receive the training. On the 10 points possible, parents in the experimental group had a mean of 9.47, and parents in the control group had a mean of 7.33	Parents in the modeling group evidenced higher levels of knowledge of their legal rights than parents in the control group. Parents in the modeling group reported higher levels of self-efficacy in advocating for their children compared to parents in the control group

Quality Indicator	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
1.0 Context and Settings	The study was conducted exclusively in elementary schools in Salt Lake City School District, an urban school district located in Salt Lake City, Utah	Fifty-three elementary and secondary schools, in three separate school districts within two Southwestern States participated in this study	Three large school districts in the state of Florida participated in the study. The highest percent of participants (59%) represented a child attending school in School District I. District III were the second largest group (22%), and the smallest group of participants belonged to School District II with (14%)	The study was conducted in five schools in an urban school district in central Texas who served approximately 7,300 students. The district accommodated preschool through high school programs who served children with disabilities	The special education division of the state agency in a midwestern U.S. state (in collaboration with researchers from a higher education institution and other agencies serving children with disabilities)
2.0 Participants	Parents with children who had been referred for initial special education evaluation	Parents of children who were suspected to have a specific learning disability	Primary caregivers of students receiving special education services	Parents of students receiving special education services	Parents of children with disabilities and professionals
3.0 Intervention Agent	Researcher and research assistant	First author	First author	Special Education Teachers	Special Education Teachers
4.0 Description of Practice	Video-based multimedia instructional intervention to increase parent knowledge of special education legislation and the evaluation process, and increase parent participation during the IEP conference	Informational Handouts and one-one-one training regarding special education process	Talleres en español para las Necesidades de Familias en educación Especial (Spanish Workshops for the Needs of Families in Special Education). Five workshops were provided to reduce barriers in the involvement of (CLD) parents with children in special education. The goal of the workshops were: (a) influence knowledge about their children's IEP and (b) influence parent involvement	Mini conference with the special education teacher prior to the IEP meeting to prepare parents for their child's IEP meeting. During the mini-conference teacher review with the parent the specific vocabulary used at the IEP meeting, goals and objectives, rationale for parent participation at the meetings and examples on how to ask questions if needed information	A structured family-professional partnership intervention on perceptions of the IEP process targeting collaboration in special education and provided strategies for effective communication, equality, and partnership in decision making regarding students with disabilities

Quality Indicator	Stout (2004)	Hirsch (2004)	Camacho (2007)	Jones & Gansle (2010)	Mereoiu et al., (2016)
5.0 Implementation Fidelity	Checklist	Audio-taped recordings	Not reported	Direct observation and a checklist	Not reported
6.0 Internal Validity	Pretest-posttest control group/experimental design with random assignment	Randomize Group Design	Pre- and Post-test intervention	Quasi-experimental design with random assignment	Pre- and Post-test intervention
7.0 Outcome Measures	Survey data was used to determine social validity	Parent satisfaction questionnaire	Not reported	Parent satisfaction questionnaire	Linkert scale of 1-5 evaluation
8.0 Data Analysis	Parent participants assigned to the treatment group demonstrated significantly greater knowledge of special education and exhibited significantly more verbal behavior during the IEP conference. There was no difference in the number of questions asked by participants assigned to the two groups	Participants in the treatment condition reported higher rates of preparation than participants in the attention and control conditions; Participants in the treatment condition displayed statistically significantly higher rates of active participation during the initial multidisciplinary meetings than the participants assigned to the attention and control conditions	Results from a Paired Samples t-test demonstrated the benefits after participants attended the workshops, the results were statistically significant confirming that it was likely that participants' attendance in the workshops influenced the score gains on the test where participants demonstrated their knowledge about the IEP process	The Kruskal-Wallis indicated no statistically significant differences between the mini-conference group and the control group on the number of comments made per minute by the parent. However, the test indicated that the teachers in the mini-conference group rated the parents as having participated more than in the control group	Both groups (parents and professionals) rated the items medium to high, indicating that they viewed the IEP process as valuable for setting goals and establishing objectives that improve instruction and the quality of education for students with disabilities