Exploring the Meaning of Parental Involvement in Physical Education for Students with Developmental Disabilities

Dissertation

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Abstract

Parental involvement has been studied in the field of education since the 1970s. Scholars assert that parental involvement affects students’ achievement and performance (Christenson, Rounds, & Gorney, 1992; Epstein, Sanders, Simons, Salinas, Janson, & Van Voorhis, 2002; Fan & Chen, 2001; Herman & Yeh, 1983; von Voorhis, 2003). However, there is minimal research on the effects of parental involvement, particularly in physical education. For children with disabilities, there is even less attention and research given to this area. Although Public Law 108-466, *Individuals with Disabilities Education Improvement Act* of 2004 (IDEIA) supports physical education as part of the general education curriculum, many parents are not fully aware of the importance of their involvement in the physical education. In order for general physical education (GPE) teachers to develop best practices for students with disabilities in inclusive settings, it is necessary for the GPE teachers to work with the parents of children with disabilities because parents and teachers are the most influential agents in the development of children; therefore, positive collaboration between parents and teachers should be placed in GPE, as well. In light of this, this study focuses on exploring the meaning parents of students with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers.

This phenomenological qualitative inquiry is situated in Bronfenbrenner’s ecological systems theory and was conducted to capture the experiences of the parents of students with developmental disabilities (Bronfenbrenner, 1979; Bronfenbrenner &
Morris, 1998). Eight parents from a large metropolitan area in the Midwestern region of the United States of America participated in this study and their experiences were captured by using participants’ demographic questionnaires, a series of three semi-structured interviews, photographs, documents and the researcher's journals. A thematic analysis was utilized to identify the common structures of parents’ experiences (van Manen, 1997). The data was sorted by highlighting, coding, and categorizing with similarities and distinguishing aspects. It was then subsequently organized into themes. Three themes emerged from this thematic analysis; (a) Advocacy, (b) Involvement, and (c) Positive but Superficial Relationship.

The findings of this research unpacked the followings: (a) the parents’ understandings and values of involvement in their children’s physical education programs, (b) the parents’ roles in their children's educational programs, and (c) the importance of collaborative partnerships between home and school. However, relationships between parents and the GPE teachers were not formally constructed due to the limited number of opportunities that parents had to interact with GPE teachers. Parents had limited knowledge of the physical education program, although they perceived physical activity and sports participation as influential venues for their children’s development. The findings also suggested that a need exists for building partnerships between parents of students with developmental disabilities and GPE teachers. This may become possible if GPE teachers were to have a presence and participate regularly in IEP meetings, as well as sharing the GPE program objectives and contents with parents.
Dedication

Dedicated to my beloved parents,
Yong-Hwan Ahn and Myung-Ja Seo

and

My sister and best friend, Ji-Young Ahn
Acknowledgments

As I come to the end of another chapter in my life, I am indebted to many people who have helped and supported me in completing this dissertation. First of all, I wish to express my heartfelt gratitude to the parents of children with developmental disabilities who shared their stories with me without reservation. I thank you for your time and willingness to provide me with honest reflections of your experiences. This research could not have been possible without such openness. My special thanks go to Dr. Samuel R. Hodge, my advisor, for his unconditional guidance and support. Over the past five years, you have consistently showed your confidence and faith in me, which has helped me to feel more confident and affirmed. I sincerely appreciate all the encouragement and motivation you have given me throughout my doctoral program. I would not have been able to survive without your support. I am very grateful to finally reach the light at the end of the tunnel. I am truly indebted to you for all that you have done for me during my doctoral program.

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Field of Study

Major Field: Education

Specialization: Adapted Physical Education

Minor Fields: Special Education and Disability Studies
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Chapter 1: Introduction

Parental involvement in education has long been a topic of interest with regard to successful schooling and academic achievement since the 1970s (Dimmock & O’Donoghue, 1996; Morgan & Fraser, 1992). The term, parental involvement, means “having an awareness of and involvement in schoolwork, understanding of the interaction between parenting skills and student success in schooling, and a commitment to consistent communication with educators about student progress” (Pate & Andrews, 2006, p. 1). In a broader sense, parental involvement in education includes parental aspirations and expectations, parenting behaviors and participation in school activities or functions (e.g. parent-teacher conference, informal meeting with the teacher, volunteer school events or classroom) in which parents provide educational support for their children (Weiss, Kreider, Lopez, & Chatman, 2005). In addition to this, parental support takes place outside of the school, such as monitoring children’s homework, tutoring children and serving in child advocacy (Cotton & Wikelund, 2007; Pate & Andrews, 2006).

According to Dimmock and O’Donoghue (1996), the issue of parental involvement in school originated from concerns about social justice and equity during the 1960s and 1970s. Federally funded programs, such as Head Start and Follow Through, were developed and implemented to support equality among low-income families and individuals with disabilities. The literature also indicates that parental
involvement in school positively influences student performance and achievement both academically and socially (Becher, 1986; Christenson & Cleary, 1990; Cotton & Wiklund, 2007; Epstein, 2001; Fan & Chen, 2001; Pate & Andrews, 2006). For example, Christenson and Cleary (1990) indicated that parental involvement improved students’ grades and test scores, classroom attitudes and behaviors and prompted higher attendance rates and levels of student participation in classroom activities. Parents also developed a better understanding of school work through involvement in their child’s school and were able to help their children with homework. As a result, increased communication between home and school served to increase the success of the students at school.

Coulombe (1995) asserted that parental involvement was crucial because supportive parental involvement increased the chances of students’ success in academics. In addition to this, parental involvement through volunteerism at schools contributed to educational goals and program support directly. Parental involvement in school led to positive effects at home and school by promoting the transition of values between the home and school, encouraging the development of mutual respect among the school staff, students, parents and community members, as well as establishing partnerships between the school and home (Johnson & Webster, 1994; Norton & Nufeld, 2002).

With regard to students in special education, parental involvement has also been recognized as invaluable in terms of promoting the academic and social learning of children (Shea & Bauer, 1985). As a result, Public Law 105-17, the Individuals with Disabilities Education Act (IDEA) of 1997 – the reauthorization of PL 94-142 – made parental involvement mandatory in the decision-making process of the students’
educational plans, officially known as the Individualized Education Program (IEP) (Johnson & Webster, 1994; Norton & Nufeld, 2002; Taylor, 2000). Parents are equal partners with other members of the IEP team and are responsible for collaborating to develop an appropriate IEP for their child. Parents are also entitled to the access of school records related to their child (Spann, Kohler, & Soenksen, 2003). Parental involvement is critical in supporting the two main goals of the IEP. The first is to facilitate the learning of children with disabilities in terms of providing written goals and objectives, resources and services for supporting their success in schools. The second is to serve as a means of communication among teachers, parents, and other educationally focused professionals (Lytle & Bordin, 2001; Sherrill, 2004; Yun, Shapiro, & Kennedy, 2000).

**Statement of the Problem**

The emphasis of parental involvement in schools has been emphasized on increasing students’ success in education and contributing to the goals of school program supports (Norton & Nufeld, 2002). Numerous studies have reported that parental involvement strongly influenced the outcomes of the children’s achievements and performance at school (Christenson, Rounds, & Gorney, 1992; Epstein, Sanders, Simons, Salinas, Janson, & Van Voorhis, 2002; Fan & Chen, 2001; Herman & Yeh, 1983; von Voorhis, 2003). In some cases, parental involvement had a positive impact on student academic achievements (e.g., increased grade point average), student attitudes, and behaviors in schools (e.g., improved self-concept, classroom behavior, attendance, motivation, and retention) (Fan & Chen, 2001).
Parental involvement has also been of increasing interest in special education for the last three decades (Spann et al., 2003). The common interest in the field of special education was to examine the extent to which parents participated in the IEP process, how they engaged in the IEP process, and their relationships with other IEP members – special education teacher, general education teacher, and related service specialists (Garriot, Wandry, & Snyder, 2000; Lusthaus, Lusthaus, & Gibbs, 1981). In the IEP process, parents anticipate playing an active role and collaborate with educators in making decisions related to their child's educational programs, parents often being regarded as recipients rather than partners (Garriot et al., 2000). One study that supports this claim is by Salembier and Furney (1997). They investigated parental involvement in the IEP process from the perspective of parents of children with disabilities. Their findings indicated a lack of collaboration between parents and professionals. The parents felt that they did not have strong relationships with professionals (teachers, school personnel, and representatives of community service agencies), did not have enough information about the planning process and felt that professionals used excessive control over the process. This study affirms the notion that the parents' role in the IEP process is to obtain information transmitted to them rather than being an equal partner in the decision-making process (An & Goodwin, 2007; Garriot et al., 2000).

The topic of parental involvement in GPE programs has not been given much attention, particularly with regard to educational programs for children with disabilities and IEPs. For years, physical education services in schools have been framed by a medical model, highlighting "deficits" in the children's motor abilities and skill development. The services therefore did not go beyond the purpose of a therapeutic
approach. It amounted to therapists (i.e. physical therapist or occupational therapist) providing modified exercise or physical activity programs for students with disabilities in a segregated setting, rather than giving instructions in an inclusive manner (An, 2005; An & Hodge, 2008; Virgilio, 1990).

Owing to the philosophy of inclusion that emerged as a support-based paradigm in education (Polloway, Smith, Patton, & Smith, 1996), the process of inclusion in GPE has been investigated from multiple perspectives, including that of teachers (Hodge et al., 2009; Hodge, Ammah, Casebolt, LaMaster, & O'Sullivan, 2004; LaMaster, Gall, Kinchin, & Siedentop, 1998; Morley, Bailey, Tan, & Cooke, 2005), students with and without disabilities (Goodwin & Watkinson, 2000; LaMaster, et al. 1998; Suomi, Collier, & Brown, 2003; Verderber, Rizzo, & Sherrill, 2003), and the parents of children with disabilities (An & Goodwin, 2007). Common interests in those and other studies were persons’ attitudes and beliefs toward including students with disabilities in GPE and concerns and barriers that can occur during the process of inclusion (Kozub & Lienert, 2003; Lienert, Sherill, & Myers, 2001). Few studies have focused on examining parents’ support and participation in physical education for students with disabilities (An & Goodwin, 2007; Hamilton, Goodway, & Haubenstricker, 1999).

An and Goodwin (2007) reported that parental involvement in physical education programs increased the understanding of disabilities for both teachers and students without disabilities. Parental involvement included parents providing instructional sessions to students (disability awareness), such as introducing wheelchair sports and explaining the characteristics of disability (i.e. spina bifida). Parental support was recognized as an efficient resource for delivering physical activity instruction to all
children. As another example of parent support programs, Hamilton et al. (1999) conducted an eight-week, parent-assisted motor skill intervention program for pre-kindergarteners. They reported that the motor skill intervention program improved the object control skills of young children identified as developmentally delayed and also that parents can be effective instructors of their children’s motor skill development. Although Hamilton et al. (1999) took the position that parental support influenced student achievement, uncertainties still remain about the impact of parental involvement in physical education programs for children with disabilities.

Although the topic of parental involvement in education has been studied for about five decades, research is scarce in the field of physical education with regard to parental involvement with children with disabilities. Limited research has been undertaken on the importance of parental involvement in physical education (Hamilton et al., 1999; Virgilio, 1990). Moreover, the educational goals, supports, and services for children with disabilities are determined through the IEP process, yet, physical education is rarely addressed in IEP meetings (An & Goodwin, 2007; Block, 2007; Melograno & Loovis, 1991). Yet, it is necessary for GPE teachers to collaborate with the parents of students with disabilities in order to meet the needs of students and develop appropriate instructions in inclusive settings. To that end, active parental involvement in physical education matters related to their child’s education could change and raise a students’ learning.

**Theoretical Framework**

Theory can be identified as a set of concepts or an assumption that when considered in terms of interrelationships, may explain a given phenomenon or observed
reality (Palys, 1992). Theory may represent two roles within the framework of qualitative inquiry (Morse & Field, 1995): “…the researcher examines the data for patterns and relationships and then develops and tests hypothesis to generate theory or uses developed theories to explain the data” (p. 4). Since this current study was focused on understanding the meaning of parental involvement in physical education from the experiences of parents of children with developmental disabilities, Bronfenbrenner’s (1979, 1992, 2005; Bronfenbrenner & Morris, 1998) ecological systems theory will be used as the foundation of the study to help facilitate the interpretation of the data.

Bronfenbrenner’s ecological systems theory is a sociocultural view of human development that focuses on the mechanism of interactions between a person’s attributes and his or her environment (Adamsons, O’Brien, & Pasley, 2007; Bengoechea & Johnson, 2001). According to Lerner (2005):

Bronfenbrenner believes that all levels of organization involved in human life are linked integratively in the course of individual ontogeny…that his theory would be incomplete until he included in it the levels of individual structure and function (biology, psychology, and behavior) fused dynamically with the ecological systems he described. (p. xiv)

That is, the ecological systems theory acknowledges that child development does not appear in isolation, but is shaped in relation to the child’s parents, friends, home, school, community, and society. Therefore, examining personal characteristics or contextual characteristics alone will not provide an explanation for the mechanism of human development (Bengoechea & Johnson, 2001). Moreover, this theory has recently evolved to ‘Bioecological Theory of Human Development’ for emphasizing the child’s biology, a primary environment fueling his or her environment (Bronfenbrenner, 2005; Bronfenbrenner & Morris, 1998).
The ecological perspective argues that human development is shaped by the interactions between persons and contexts (Bronfenbrenner, 2005). For example, if the child’s attributes were consistent with environmental requirements, the child’s development would continue and functioning would appear. If the child’s characteristics were not consistent with the environmental requirements, the child’s development would fail to thrive and show dysfunction (Johnson, 1994). Because children with disabilities have unique characteristics, their interactions with multilevel environments are the key to development. Furthermore, the environments and their interactions can make an enormous difference in the developmental outcome of children with disabilities.

The ecological systems theory encompasses four features—Process, Person, Contexts, and Time (PPCT Model) (Bronfenbrenner, 2005; Bronfenbrenner & Morris, 1998). In this current study, each element is discussed in Chapter 2 and examined through the experiences of the parents.

**Purpose of Study**

The purpose of this study is to explore the meaning that parents of students with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers. The following questions guided this study:

1. *What meaning do parents of students with developmental disabilities ascribe to their involvement in their child’s physical education programs?*
2. *What meaning do parents of students with developmental disabilities ascribe to their interactions and relationships with their child’s GPE teachers?*
Significance of the Study

Students with disabilities are now increasingly included in GPE and participate in activities with their peers without disabilities as a result of legislative mandates (Public Law 108-446, Individuals with Disabilities Education Improvement Act of 2004)\(^1\) (Block, 2007). Parental support in physical education is extremely powerful in that GPE teachers may establish appropriate instructional strategies–activity modification, adaptation, learning goals and objectives–in order to meet the needs of students with disabilities effectively within an inclusive setting effectively (An, 2005, 2007). Parents, as primary caregiver of students with disabilities, can share valuable information with the school. For example, children's medical history, daily activities at home, needs, capabilities, interests, likes and dislikes, and so on. In turn, parents are able to provide additional physical activity opportunities at home or outside of school with the support of GPE teachers so that students with disabilities may continue developing their skills and expanding their learning beyond school. Moreover, parental support may also promote physical activity and healthy lifestyles for the social inclusion of students with disabilities. Therefore, investigating teachers' and parents' experiences within physical education contexts provides insights into the nature of parental involvement as well as the collaboration between GPE teachers and parents.

The present study contributes to the field of physical education in several ways. First, as a phenomenological inquiry, the study illustrates what phenomena of parental involvement occur in the context of inclusive physical education at both the elementary and secondary level. Second, through the parents' experiences, this study provides an

\(^1\) Recent reauthorization of IDEA.
insider’s perspective on the present topic. The descriptions of the parents’ experiences help provide ideas to other parents of children with disabilities, such as a way of helping their children’s learning in physical education and getting involved in the physical education program at school. It would also suggest ideas to GPE teachers relating to developing educational implications for parental involvement in schools. For instance, ways to collaborate with parents of children with disabilities, teachers’ roles regarding inclusion, parent education for school participation and home supports, school efforts to assist parents.

**Limitations**

There were three major limitations to this study:

a) This qualitative study focused on exploring the perceptions of eight primary caregivers of students with developmental disabilities. The findings of this study might not be representative to the experiences of all parents who have children with disabilities due to the limited number of participants. It is clear that the attributes of the active agent (person) are varied in different types of disabilities.

b) The researcher initially attempted to gather the stories of both parents for the child with developmental disabilities. However, three of the fathers had a time conflict with work schedules, and although the other four fathers were on site during the interviews with the mother, only one father consented to an interview.

c) This study explores the experiences of actively involved parents who were well educated and of middle class status. The findings of this study therefore may not be representative of parental involvement concerning the ecology of low-income families, single parent families, or immigrant families.
Definitions of Terms

The following terms were defined for clarification purposes as used in this study.

1. *Asperger’s syndrome* is a severe and sustained impairment in social interaction, coupled with repetitive, stereotyped patterns of behavior that seriously impacts function. It is also known as high-functioning autism (Sherrill, 2004, p. 605).

2. *Autism* means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, evident before age three that adversely affects a child’s educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences (Federal Register, 2006, 34 C.F.R. § 300.8 (c)(1)(i))

3. *Developmental Delay* is defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development (Federal Register, 2006, 34 C.F.R. § 300.8 (b)(1))

4. *Developmental Disability* is a severe, chronic disability of an individual 5 years or older that (a) is attributable to a mental or physical impairment or combination of mental and physical impairment; (b) is manifested before the individual attains age 22; (c) is likely to continue indefinitely; (d) results in substantial functional limitations in three or more of the following major life activities: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for
independent living, and economic self-sufficiency; and (e) reflects the individual’s need for a combination and sequence of special, interdisciplinary, or generic service, individualized supports, or other forms of assistance that are lifelong or of extended duration and are individually planned and coordinated (American Association on Intellectual and Developmental Disabilities, 2010, p. 219).

5. *Down syndrome* is a genetic condition associated with intellectual disabilities. It results from a chromosomal defect or abnormality (Winnick, 2011).

6. *Inclusion* is a philosophy that students with disabilities should be educated in their neighborhood schools and in age-appropriate general education classes with the necessary support services and supplementary aids to promote students’ success and to prepare them to participate as full members of society. Providing special services for students with disabilities in the general education classrooms allows such students to be members of the same community as other children and youth (McGregor & Vogelsberg, 1998).

7. *Inclusive Physical Education* means that students with disabilities participate in GPE with their peers, receiving individually determined and appropriate programs with supplementary aides and supporting services to meet individual needs (Goodwin, Watkinson, & Fitzpatrick, 2003).

8. *Individuals with Disabilities Education Act (IDEA)* is a federal law that requires school districts to provide a “free appropriate public education” (FAPE) to eligible children with disabilities. The development of an individualized education program (IEP) is a means for FAPE to be carried out for eligible children with disabilities under IDEA through special education and related
services under the public supervision to children at no cost (Block, 2007).

9. *Individualized Education Program (IEP)* is a written legal document that describes the special educational services, including goals and objectives, and resources that eligible children with disabilities are to receive under IDEA (Sherrill, 2004).

10. *Medical Model* is the notion that disability is presumed by the biological reality of impairment (Williams, 2001). The medical model typically adopts an individual approach to disability, focusing on “bodily abnormality, disorder or deficiency, and the way in which this in turn ‘causes’ some degree of ‘disability’ or functional limitation” (Barnes et al., 1999, p. 21).

11. *Parent* refers to the biological parent of the child, but may also include the legal guardian or other person standing in *loco parentis*, such as a grandparent or stepparent with whom the child lives, or a person who is legally responsible or appointed to for the child’s welfare (Public Education Network, 2004b, p. 31).

12. *Parental involvement* refers to the participation of parents in regular two-way, meaningful communication with the school, involving student academic learning and other school activities (Public Education Network, 2004b, p. 31).

13. *Special Education* is defined as a specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including (i) instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and (ii) instruction in physical education (Federal Register, 2006, 34 C.F.R. § 300.39 (a)(1)).
Chapter 2: Review of Literature

Introduction

The purpose of this chapter is to review the literature relevant to the issue of parental involvement in children’s learning and development. The involvement of parents in their children's education, particularly for families who have children with disabilities, is a crucial issue in terms of developing intervention programs, providing adequate services and enhancing students’ development (Christenson & Conoley, 1992; Shea & Bauer, 1985). This current study builds on the ecological perspectives of human development (Bronfenbrenner, 1979, 2005; Bronfenbrenner & Morris, 1998), hence, this chapter describes ecological systems theory. The notion of parental involvement, which has emerged in education, is discussed in the following section. Next, parental involvement practices with regard to children's development and education are reviewed by examining literatures on the perceptions of parents and teachers about parental involvement and the relationships between home and school. Finally, the influences of parents on their children's participation in physical education and sport are also examined.
Ecological Systems Theory

Bronfenbrenner's (1979, 1992, 2005) ecological systems theory is an interactive and dynamic system of human development that provides a conceptual scheme constructed by an interaction between the active person and his or her environment. Bronfenbrenner (2005) illustrated the ecological paradigm of human development by using the formula, $Dt = f(t-p)PE(t-p)^2$, which is derived from the classical equation of Kurt Lewin, $B=f(PE)^3$. In his formula, behavior is substituted into development as a joint function of person and environment. Time is considered as one of the forces affecting human development. As a result, development is identified as “the set of processes through which properties of the person and the environment interact to produce constancy and change in the characteristics of the person over the life course” (Bronfenbrenner, 1992, p. 191).

According to Bronfenbrenner and Crouter (1983), environment is identified as any event or condition outside the person that either influences or is influenced by the developing person. Interaction means the exchanges between an active human organism and the persons, objects, and symbols in its immediate environment. Also, it signifies the interrelations between the hierarchically structured environment influencing child development, such as home, school and community (cited in Sontag, 1996). From the ecological perspective, development is considered as a joint function of the characteristics of the environment and that of the person over time (Sontag, 1996).

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2 Development = function (time-process)(Person Environment)(time-process).

3 Known as a mathematical equation representing that behavior is the function of the person and his or her environment (Bronfenbrenner, 1992)
More specifically, the properties of the ecological paradigm are identified in two propositions (Bronfenbrenner, 1995). The first proposition affirms that:

Human development takes place through processes of progressively more complex reciprocal interaction between an active, evolving biopsychological human organism and the persons, objects, and symbols in its immediate environment. To be effective, the interaction must occur on a fairly regular basis over extended periods of time. Such enduring forms of interaction in the immediate environment are referred to as proximal processes. Examples of enduring patterns of proximal process are found in parent-child and child-child activities, group or solitary play, reading, learning new skills, studying, athletic activities, and performing complex tasks. (p. 620)

The second proposition identifying the property of the ecological paradigm is related to the interaction of forces in human development (Bronfenbrenner, 1995), which states:

The form, power, content, and direction of the proximal processes effecting development vary systematically as a joint function of the biopsychological characteristics of the developing person; of the environment, both immediate and more remote, in which the processes are taking place, and the nature of the developmental outcomes under consideration. (Bronfenbrenner, 1995, p. 621)

In summation, the ecological systems theory views human development as an outcome or a consequence that occurred by the reciprocal interactions of four key features - process, person, context, and time – also known as the PPCT model (Bronfenbrenner, 1995, 2005).

*Process* is also known as the proximal process identified as the form of dynamic interaction between the active person and the environment operating over time and the primary mechanism for producing human development. For example, the process can refer to interactions between child and parent, child and teacher, parents and teachers, and child and parents’ social networks. It also applies to the interrelations among
different levels of environmental contexts i.e., family and community, school and community, family and society (Bronfenbrenner, 2005). According to Bronfenbrenner (1995), *process* is considered as a critical component in the ecological model because it is the one that drives the development of a person. Bronfenbrenner and Morris (1998) further illustrated that the power of the *process* to shape development is presumed to vary followed by “a function of the characteristics of the developing person, of the immediate and more remote environmental contexts, and the time periods, in which the proximal processes take place” (Bronfenbrenner & Morris, 1998, p. 994).

*Person* is the second component of the PPCT model and represents a function of the individual or an active agent contributing subsequent development (Bronfenbrenner, 1992, 2005). Bronfenbrenner and Morris (1998) identify three types of characteristics that are most influential in shaping the development:

The first are *dispositions* that can set proximal processes in motion in a particular development domain and continue to sustain their operation. Next are bioecological *resources* of ability, experience, knowledge, and skill required for the effective functioning of proximal processes at a given stage of development. Finally, there are *demand* characteristics that invite or discourage reactions from the social environment of a kind that can foster or disrupt the operation of proximal processes. The differentiation of these three forms leads to their combination in patterns of Person structure that can further account for differences in the direction and power of resultant proximal processes and their developmental effects. (p. 995)

Because human development is a function of the interaction between the person and his or her environment, the developmental outcomes occur differently across individuals depending on what characteristics are exhibited and how those characteristics are expressed in his or her environment (Bengoechea & Johnson, 2001). That is, the level of a person's functional orientation to the environment will affect one's developmental
progression, which can be slower and move along fewer developmental pathways (Sontag, 1996). Sontag also addresses the personal attributes of the child with disabilities that could position the child to be at risk for atypical, disrupting interactions, resulting in adverse context-based and context-differentiated relationships. On the other hand, the child’s unique characteristics may provide protection against such relationships and the adverse relationships can lead to deprived development for the child.

*Context* refers to a hierarchically structured environment that affects a child’s development (Bronfenbrenner, 2005). The category of contexts consists of four levels of the environmental system: (a) microsystem, (b) mesosystem, (c) exosystem, and (d) macrosystem (i.e., society, culture) (Bronfenbrenner, 2005). These four environmental systems represent different levels of proximity (Bronfenbrenner, 1979). A critical characteristic of the ecological systems theory is based on the concept of “multiperson systems of interaction” (Bronfenbrenner, 1979, p. 21) and the developmental effects of the interrelations between these settings, both direct and indirect. The nature of the personal interaction at the microsystem level is influenced by the events and activities at the macrosystem level (Sontag, 1996).

The *microsystem* is the first level of context where the development of a child is directly affected by the surrounding environment, which includes family, teacher, peer group and classroom, or neighborhoods. Bronfenbrenner (2005) defines it as “a pattern of activities, roles and interpersonal relations experienced by the developing person in a given face-to-face setting with particular physical and material features and containing other persons with distinctive characteristics of temperament, personality, and systems of belief” (p. 148). In ecological theory, the emphasis of the microsystem is on (a) how
the persons in the immediate environment perceive the properties of the environment and (b) the characteristics of persons with whom the child interacts (parents, teachers, peers) (Sontag, 1996)

The mesosystem refers to the connection between the child’s microsystems, i.e., the parents and teachers. In the mesosystem, parents and teachers work together to teach the child, so the development of the child is influenced through this connection (Bronfenbrenner, 1992, 2005). Specifically, it “comprises the linkages and processes taking place between two or more settings containing the developing person (e.g., the relations between home and school, school and workplace)” (Bronfenbrenner, 2005, p. 148). According to Bronfenbrenner (1979), there are four types of interconnections between the home and school settings: (a) multi-setting participation where the child is engaging in more than one setting such as home and school, (b) indirect linkage where the parent is establishing the connection between home and school, (c) intersetting communications where messages are transmitted from one setting to the other (through the school newsletter for instance) and (d) intersetting knowledge where information or experiences are obtained from others (Sontag, 1996).

The exosystem is the environment where a child’s development is not directly influenced by events occurring outside of his or her world, such as the parents’ world of work or the parents’ circle of friends, as well as the parents’ supporting network (Bronfenbrenner, 1986). Bronfenbrenner (2005) referred to the exosystem as encompassing “the linkage and processes taking place between two or more settings, at least one of which does not ordinarily contain the developing person, but in which events occur that influence processes within the immediate setting that does contain that
person” (p. 148). Examples include parents’ workplace, parents’ social network, and community influence (Bronfenbrenner, 1986).

The macrosystem represents the social and cultural belief systems where the child is raised. According to Bronfenbrenner (2005), the macrosystem is comprised of:

the overarching pattern of micro-, meso-, and exosystems characteristic of a given culture, subculture, or other broader social context, with particular reference to the developmentally instigative belief systems, resources, hazards, lifestyles, opportunity structures, life course options, and patterns of social interchange that are embedded in each of these systems. The macrosystem may be thought of as a societal blueprint for a particular culture, subculture, or other broader social context. (pp. 149-150)

The final tenet is the dimension of time and how it relates to the environment and how it influences the human development of change—physical growth, puberty, and aging (Figure 2.1). Bronfenbrenner (1986) defines this as the chronosystem: “the person’s development of changes (and continuities) over time in the environments in which the person is living” (p. 724). Developmental changes in the chronosystem are caused by life experiences or events, which are classified as internal (e.g., puberty, severe illness, disability) and external events (entering school, the birth of sibling, divorce, death, moving) (Bronfenbrenner, 1992). Bronfenbrenner (1979) suggested that human development is a process involving “a change in the characteristics of the person that is neither ephemeral nor situation-bound; it implies a reorganization that has some continuity over both time and space” (p. 28). More specifically, Bronfenbrenner and Morris (1998) explained that:

Microtime refers to continuity versus discontinuity within ongoing episodes of proximal process. Mesotime is the periodicity of these episodes across broader time intervals, such as days and weeks. Finally, Macrotime focuses on changing expectations and events in the larger society, both within and across generations, as they affect and are affected by, processes and outcomes of human development over the life course (p. 995).
Figure 2.1. Ecological Systems Theory. Source: adapted from Cole & Cole (2001)
Parental Involvement in Education

Policy

Parental involvement in school and the education of children has become a growing interest. It holds many positive outcomes for the learning development of children with regard to academic achievement and social and emotional development and adjustments (Becher, 1986; Epstein, 2001; Hartas, 2008). It is also considered as being one of the mechanisms that influences school improvement (Gettinger & Guetschow, 1998). Since the 1980s, the importance of parental involvement has been acknowledged with the rapid growth of evidence supporting the positive impact on students’ performances. Parental roles are identified and implemented by policymakers through federal education programs such as IDEA (Barge & Loges, 2003; Clarke & Williams, 1992). For instance, if the school district receives federal funding for educational programs (e.g., Chapter 1, Head Start), the school district must implement a written policy on parental involvement (Clarke & Williams, 1992).

In addition to this, federal legislation, such as Title I of No Child Left Behind (NCLB), Individuals with Disabilities Education Act (IDEA), Goals 2000: Educate America Act, and Title I of Improving America’s School Act, underscores parental involvement as a support of improving the nation’s schools (Barge & Loges, 2003; Public Education Network, 2004a). Goals 2000: Educate America Act, in particular, specifies parental participation as one of the national education goals (Goal 8): “By the year 2000, every school will promote partnerships that will increase parental involvement and participation in promoting the social, emotional, and academic growth of children” (PL103-227, Title I, Section 102, (8)(A) ). The primary purpose of this legislation is to
improve public education for all students, including students with disabilities (U.S. Congress, 1994).

In the field of special education, parental involvement is considered to be a key element in establishing strong and effective learning experiences for students with disabilities and the professionals they work with at school (Stoner, Bock, Thompson, Angell, Heyl, & Crowley, 2005). Under the legislation of IDEA, parents are required to be actively involved in the development of their child’s IEP by participating in IEP team meetings and making decisions in collaboration with school professionals in the best interests of their child (Taylor, 2000). The concept of parent-professional collaboration is one of six principles that govern the education of students with disabilities (Turnbull, Turnbull, Erwin, & Soodak, 2006).

**Concept of Parental Involvement**

Wolfendale (1983) defines parental involvement as “an umbrella term that describes all the models and types of liaison between parents, schools and other community institutions that provide for children” (cited in Khan, 1996, p. 60). Title I, No Child Left Behind (NCLB, 2004), defines parental involvement as:

- the participation of parents in regular, two-way, and meaningful communication involving student academic learning and other school activities, including ensuring that parents play an integral role in assisting their child’s learning; that parents are encouraged to be actively involved in their child’s education at school; that parents are full partners in their child’s education and are included, as appropriate, in decision-making and on advisory committees to assist in the education of their child; and that other activities are carried out, such as those described in section 1118 of the ESEA (Public Education Network, 2004b, p. 31)

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4 Elementary and Secondary Education Act
One study by McBride and Lin (1996) provides a description of the concept of parental involvement. This study examines the viewpoints of parents, teachers, and family support staffs (administrators) with regard to parental involvement in prekindergarten programs for children who were at-risk. A total of 47 parents and 17 staff members participated in a series of focus group interviews. McBride and Lin (1996) used break characteristics i.e., characteristics that differentiate groups from one another, to form a focus groups consisting of 5 or 6 members in each parent group. Teachers and staff groups are divided into experienced teachers, novice teachers, and staff members.

Overall, all three groups had similar views on the importance of parental involvement in educational programs and goals for home and school partnerships. Parents perceived their involvement as a means of communicating with school personnel, supporting their children's participation in home and school and involving them in governance and advocacy activities. School teachers and staff perceived that parents should work with staff members in order to meet children's needs. According to novice teachers, parents should understand the programs in supporting their children. Family staff considered that parents should take their responsibility by becoming involved in their children's programs, rather than being guided by the school.

Epstein (2001) categorizes parental involvement into six categories: (a) parenting; (b) communicating; (c) volunteering; (d) learning at home; (e) decision making; and (f) collaborating with the community. Epstein (2001) explained how schools could work to assist parents with being or staying informed and involved in children's learning at home and school. Parenting (Type 1), which represents basic obligations of parents caring for their children, helps families build their parenting and child-rearing skills, family
supports, understanding child and adolescent development and setting the home environment to support the children's learning. Communicating (Type 2) refers to the basic obligations of the school and is a way of interacting between home-to-school and school-to-home about school programs and student progress. Volunteering (Type 3) is the recruitment, organization and schedule of parents who help and support at school or in other locations. Learning at Home (Type 4) implies parental involvement at home by helping students with homework, other curricular-linked activities, decisions and planning. Decision Making (Type 5) as a way of parental involvement in advocacy and governance includes families as participants in school decisions and develops parent-leaders and representatives, through school parent-teacher association (PTA), committees, councils, and parent organizations. Collaborating with the community (Type 6) coordinates the work and resources of community businesses, agencies, colleges or universities and other groups to strengthen school programs, family practices and student learning and development (Epstein, 2001).

Another interpretation of parental involvement is by Bloom (1992). In his explanation, there are seven types of critical roles that parents can be involved in on three different levels: (a) involvement with their own child's education, (b) participation in school life, and (c) advocacy. In the first level, parents play roles as spectators and teachers. According to this approach of parental involvement, parents monitor their children's progress, read notes or reports sent from school and attend meetings. In the second level, parents become accessories, educational volunteers or employees for their children, teachers and school. In the third level, advocacy allows parents to play the roles of decision/policy makers, movers, and shakers as an independent force at local, district,
or state levels (Kahn, 1996).

Shepard and Rose (1995) propose the empowerment model, which provides an organizational structure of parental involvement. The primary goal of the empowerment model is to enable parents to be capable of making meaningful contributions to their children's education (Shepard & Rose, 1995). According to Shepard and Rose (1995), the empowerment model is structured into a hierarchical, developmental constitution that is comprised of four ascending steps involved in school as forms of parental involvement: (a) basic communication, (b) home improvement, (c) volunteering, and (c) advocacy (Figure 2.5).

The first step of parental involvement is “basic communication,” which helps parents make a connection with their child’s school and teacher. The parents’ responsibilities include monitoring their child’s progress and informing the child’s teacher, as well as receiving information about their child from the teacher. The next step, “home improvement”, refers to the activities that are designed to develop parenting skills in general and skills related to the child’s home-learning environments. The third step of parental involvement is volunteering, which is the part of giving time to the school by helping and interacting with students and other parents at school through volunteering, which enhances the parents’ self-efficacy. The uppermost level of parental involvement is advocacy. This stage includes the activities of joining local, community, and statewide agencies to influence educational improvements, such as policies and decision-making in school affairs.

In the empowerment model, the parent is a key person with the power of making effective use of sources, being effective problem-solvers, and having productive
interactions with others. According to this empowerment model, professionals should empower parents to be more involved in school related matters on behalf of their child (Shepard & Rose, 1995).

ADVOCACY: Includes involvement in local, district, or statewide groups which impact the policy, procedures, and various institutional changes affecting their community. Also includes a number of activities which involve non-school sectors such as local businesses.

VOLUNTEERING: Involvement activities which extend beyond the immediate home environment and bring the parent into greater contact with the school are included in this level. Parental confidence in self and abilities are necessary here as parents establish more and stronger contacts with other parents and school personnel.

HOME IMPROVEMENT: Increased commitment is required at this stage as parents must be more actively engaged in personal development as well as their child's life. Primary activities within this level may be categorized as: (a) Informing parenting skills and (b) Enhancing home learning.

BASIC COMMUNICATION: Initial involvement begins with parents and teacher sharing information. This two-way interaction may be further subdivided into the following categories: (a) Teacher informing parents and (b) Parents informing teachers.

Figure 2.2. Empowerment Model for Parental Involvement (Shepard & Rose, 1995, p. 376).

Parental Involvement Practices

Parental involvement in schools, in general, has been regarded as a valuable element that influences the learning and development of children. Many studies have highlighted the importance and the benefits of parental involvement in schools (Becher,
1986; Clarke & Williams, 1992; Christenson & Cleary, 1990; Cotton & Wikelund, 2007; Epstein, 2001; Hartas, 2008; Kahn, 1996; Pate & Andrews, 2006). For instance, students show improvement in various areas such as test scores, attitudes, and behaviors when their parents become more involved in the school life of their children. With parents taking a more active role in the education of their children, they gain a better understanding of how the school works, and more importantly, parental involvement helps develop relationships between the home and the school (Christen & Cleary, 1990; Hartas, 2008).

Becher (1986) reported that involved parents held more positive attitudes about school and school personnel, helped gather community support for different school programs, became more actively involved in community affairs, developed increased self-confidence and enrolled in other educational programs. Henderson (1989) also reported on the positive effects of parental involvement that improved student cognitive performances, improved student behaviors and attitudes toward school, increased school climate, and increased school-community relations (cited in Kahn, 1996).

With the aid of federal legislation (i.e., Goals 2000: Educate America Act, IDEA, NCLB), the involvement of parents has been progressively increased in American schools for students with disabilities as well for students without disabilities (Blue-Banning, Summers, Frankland, Nelson, & Beegle, 2004; Epstein, 2001; Stoner, Bock, Thompson, Angell, Heyl, & Crowley, 2005). Many researchers have examined the perceptions of teachers and parents focused on the constructions and forms of parental involvement, the roles of parents and teachers and the working process between parents and professionals (Barge & Loges, 2003; Gettinger & Guetschow, 1998; Esquivel, Ryan,

Gettinger and Guetschow (1998) introduced the perspectives of teachers and parents on parental involvement roles, perceived effectiveness, and perceptions of barriers in parental involvement. A questionnaire was used to examine the perspectives of teachers and parents. One hundred and forty-two teachers and 558 parents responded to the survey (Kindergarten to grade 12). The participants also answered two open-ended questions about their beliefs and recommendations for increasing parental involvement. Overall, both parents and teachers had similar perceptions with regards to the role of parental involvement being direct involvement (e.g., assisting child, communicating with teachers) or indirect involvement (e.g. attending school meetings, volunteering school activities). The direct involvement of the parent was considered to be more effective in assisting children than indirect involvement by both parents and teachers. They also both identified ‘lack of time’ and ‘work demands’ as the biggest barriers to being actively involved in their children’s education. Both parties recognized that ongoing communication is necessary for them to increase parental involvement. In particular, parents mentioned that it would be useful to receive information ahead of time in order to plan ahead and increase their participation in school related matters. Also, other supports (e.g., child care, time flexibility) can help reduce the barriers to involve in school activities. Gettinger and Guetschow (1998) asserted that the preferences of parents and teachers for parent involvement were information gathering and communication between parents and teachers and showed that parents can be useful in supporting their children’s education.
In a study by Barge and Loges (2003), the perceptions of parents, students, and teachers were explored in the forms of parental involvement and communicative activities. The main focus of their study was to examine the similarities and differences of perceptions among the different groups of middle school teachers, middle school students who were labeled at risk, and their parents. The researchers conducted nine focus group interviews for parents. The interviews lasted between 60 and 75 minutes, and each parent focus group consisted of five to thirteen parents (N = 80). For the student group, seven focus group sessions ranged from 30 to 55 minutes and were conducted with 5 to 7 students in each focus group (N = 128). For teachers, the researcher administered a survey due to the difficulty of scheduling focus group interview sessions. They distributed 114 surveys to all middle school teachers in the school district and had sixty-three surveys returned. All three groups agreed that high-quality parental involvement and communication were essential components to building positive relationships with teachers and monitoring a child’s academic progress. In particular, the groups all identified various strategies of communication, such as parent-teacher conferences, PTA meetings, contacting teachers, and responding to report cards and progress reports, as a way of developing positive relationships with parents. The three groups had differences of perceptions with regard to the areas of discipline and encouragement and the roles of extracurricular activities and community support networks. The findings of this study showed that developing relationships between the different parties i.e., parent-teacher, parent-child relationship, were recognized as a high-quality form of parental involvement.
Smrekar and Cohen-Vogel (2001) conducted a study that focused on the experiences of low-income families of color. They explored the parents’ value of schooling, the meaning of parental involvement and the nature of school and parents’ relationships. Utilizing random sampling, they initially recruited 30 families (10 from each classroom in grade 2, 4, and 6) from a public elementary school. However, only 12 parents (10 families – 4 African Americans, 4 Latinos, and 2 Pacific Islanders) met the criteria, such as length of time in the school district, length of time in the community, affiliation with school based group, and demographic factors, to participate in the study.

Four general themes emerged through a series of in-depth interviews. These were (a) educational background and experiences, (b) ideas about the meaning and value of schooling, (c) ideas about the role of parents in their children’s schooling, and (d) relationships between the parents and schools. Most of the families considered schooling as a vehicle for social mobility and a place for their children to be able to acquire social skills for a successful adult life. Regardless of the lack of education or educational opportunities of the parents, formal education for their children was highly valued. Although the parents viewed attendance at meetings and assistance with homework as their responsibility, some parents felt it was a difficult task because of their limited English. Also, many parents believed that the role of decision-making was the responsibility of school officials and viewed themselves as observers. Parents described that their participation in school-based activities were limited to PTA meetings and other formal ceremonies and events organized by school. The school did not welcome unannounced visits. Parents expressed concerns that they would be criticized about their level of involvement in school.
Concerning the education of children with disabilities, Hilton and Henderson (1993) investigated the attitudes of special education teachers, who served students with severe disabilities in self-contained classrooms, toward parental involvement and the parents’ role in the educational process. Eighty-six elementary level special education teachers ($n = 78$ females, $n = 8$ males) completed a questionnaire on reasons for contacting parents, parent involvement practices, teacher attitudes towards parent involvement, attitudes toward parents, opinions concerning the roles of parents, and parent input for teacher decision making. According to the teachers questionnaire responses, teachers contacted parents for various reasons, such as describing a students’ day at school, curriculum and noting how to teach and manage behaviors. Overall, a low-level of parental involvement practice was indicated, but some teachers showed higher levels of parental involvement practice depending on teachers’ characteristics (e.g., taught a wide range of disabilities, worked at various schools, higher number of college level training experiences, and higher socioeconomic system). Most teachers (90%) had positive perceptions toward parental involvement and saw it as being critical to a child’s learning outcomes. However, 80% of the teachers thought that they were still successful in supporting the children at school without the involvement of parents. Teachers identified the roles of parents as being school supporters, home tutors, co-learners, and advocates. Only half of the teachers perceived parents as decision-makers in the IEP process and they did not think it was helpful to have parental input when making decisions. Although the topic of parental involvement was significantly perceived as beneficial in a child’s education, teachers seemed to keep a certain level of boundary when it comes to developing and implementing the special education programs for their
students with disabilities. The implications of the teacher responses contradicted what other studies have encouraged in parental involvement in schools and suggest that not all teachers welcomed parental involvement and should be limited to giving support to teachers and their children.

In another study related to students with disabilities, Spann et al. (2003) investigated the involvement of families who have children with autism or pervasive developmental disabilities in special education. Their research focused on special education services, communication between family and school personnel, parents’ knowledge about the IEP process and their involvement and the families’ level of satisfaction for the special education services received. Forty-five families completed a telephone survey. Most children (73%) were in general education classrooms but received some level of special education services (e.g., physical therapy, occupational therapy, speech therapy, and paraprofessional services). Only half of the parents indicated that they communicated with school personnel on a regular basis to discuss various topics e.g., the child’s progress and behavior and issues raised at either home or school. The parents of younger students (i.e. kindergarten, elementary) had higher levels of interaction than those of older students. Many parents expressed their dissatisfaction with the limited communication with school personnel. Most parents (78%) responded that they had a moderate to high level of knowledge of their child’s IEP documents. Fifty-six percent of parents indicated that they were moderately involved in the IEP process for their child by helping develop the IEP, planning and problem solving. Unfortunately, the parents of children with autism/pervasive developmental disabilities in this study did not positively perceive the partnerships between parents and teachers.
due to the lack of correspondence from the school.

Hartas (2008) conducted a case study to explore the parental involvement practices of a family who had a child, Joe, with autism spectrum disorder (ASD). Hartas observed parental participation practices during the process of obtaining a statement for special education needs (SEN). Hartas (2008) sought to provide a detailed portrait of the parents’ views and feelings with emphasis on their involvement in their son’s educational planning process. The experiences of Joe’s parents were documented through semi-structured interviews, documents and classroom observations for Joe’s entire preschool year. Joe’s parents were actively involved in the educational planning process. They worked closely with school professionals by sharing their knowledge of Joe so that the school could have a better understanding of Joe’s level of development and functioning. Also, they negotiated educational provisions, resources and access to inclusive education. Overall, Joe’s parents perceived parental involvement as a good practice, though they were challenged by the differences in professional views and practices.

Esquivel, Ryan, and Bonner (2008) explored the perspectives of involved parents’ experiences in school-based team meetings. The main goal of this study was to gain an understanding of parents’ positive and negative experiences in school-based team meetings, and further to help build guidelines to promote meaningful participation for parents. The researchers conducted two, separate surveys by mail to the parent members in the school district special education advisory committee. Nine out of seventeen parents completed the surveys and also attended a 30 minute-long discussion meeting. Five thematic categories consisting of 17 items were reported as follows: (a) meeting context and organization, (b) relationship, (c) communication, (d) problem-solving and
(e) parent emotions. The positive experiences described by parents were the minimum numbers of team meetings to attend, professionals’ understanding of children’s interests and strengths, professionals’ awareness of parents’ opinions and beliefs, the contribution of team members in meetings, and the professionals’ willingness to take responsibility. The negative experiences reported were the lack of facilitation and organization of the team meeting, conflicts in opinions, teachers’ lack of understanding of their child, low level of professionals participating in meetings, low level of teachers’ expectations for setting up goals, failing to implement solutions and the lack of understanding of the complexities of a child’s disability.

In summary, this section provides information on how parents and teachers perceived the practices of parental involvement in a child’s education. Based on the literature reviewed, the major outcomes were related to the effectiveness in the child’s education, the description of the patterns or forms of parental involvement, the roles of parents and parent-teacher relationships. Both parents and teachers perceived parental involvement as being a key factor influencing the child’s education and effective development in various developmental areas, such as cognitive and psycho-social skills. Parents used various forms of parental involvement to support their children’s education i.e. communication, attending meetings, volunteering and monitoring. These were generally categorized as direct involvement (parent-teacher conference, IEP meeting, monitoring and teaching their child) and indirect involvement (volunteering school activities, and PTA conferences). Although most parents were actively involved in their child’s education, some schools limited the scope of parental roles to only supportive tasks, such as teacher assistants, co-learners, and school supporters (Hilton & Henderson,
In many cases, the role of the parents as decision-makers was not recognized by the teachers (Hartas, 2008; Esquivel et al., 2008).

**Home-School Relationships**

**Understanding Home-School Relations**

According to Epstein (1987, 2001), three different perspectives influence the home-school relationship, which are (a) separate responsibility; (b) sequential responsibility; and (c) shared responsibility. *Separate responsibility* assumes that the home and school have different goals, roles and responsibilities regarding the children’s education and socialization. This perspective stresses that:

> the distinct goals of the two institutions are achieved most efficiently and effectively when teachers maintain their professional, universalistic standards and judgments about the children in their classrooms and when parents maintain their personal attention and particularistic standards and judgments about their children at home. (Epstein, 2001, p. 22)

The *sequential responsibility* perspective emphasizes the critical stages of the parents’ and teachers’ contributions to child development. As a result, this perspective suggests that the roles of the parents and teachers occur at different times during the child’s development. Parents have the responsibility to educate and prepare their children until they begin formal schooling. Once the child enters school, teachers have the primary responsibility for educating the child. Lastly, the prospect of *shared responsibility* highlights coordination, cooperation, and complementarities of the school and families to promote communication and collaboration between the two entities.

Cunningham and Davis (1985) introduced three models for conceptualizing the nature of parents and professional relationships. These are the expert, transplant and consumer. The major differences between these models are determined by the member’s
expertise, responsibilities and the need for a collaborative relationship. The expert model implies that the professional has total expertise and should make all the decision in a relationship. Parents are only expected to seek out professional help and carry out the instructions or guidance given by the “expert” professionals. No attempt is made to involve parents in the decision-making process. In the transplant model, professionals consider themselves as being experts, but also recognize the value of parents' input as a resource. This model encourages partnerships in a relationship between parents and professionals. However, the parental role is still limited and supervised by the professionals. Professionals transplant their skills to the parent, and yet they still maintain control of making decisions. Unlike the other two models, the consumer model identifies the parents’ expertise and their responsibilities to their child. This model acknowledges the parents’ rights to have control in the decision-making process for their child. Accordingly, the role of expert in this model is to provide the necessary information and a variety of options to help keep parents in making appropriate decisions on behalf of their child.

**Conceptual Frameworks of Home-School Partnerships**

**Epstein’s model of overlapping spheres of influence.** As mentioned above, Epstein’s model designs from a social and organizational perspective and focuses on the cooperation of families and schools and encourages the communication and collaboration between the two institutions i.e. home and school (Epstein, 2001). It consists of external and internal structures. The external structure is composed of spheres representing the home, school, and community. These spheres may be pushed together or pulled apart by four forces of time (Force A), family (Force B), school (Force
C), and community (Force D) (Epstein, 2001) (Figure 2.3). These forces may or may not help create opportunities for shared activities among the home, school, and community. However, this model emphasizes the reciprocity among teachers, families and students, recognizing that students are active agents in the home-school relationship. For instance, these spheres overlapped during periods of preschool and early elementary school years (Force A). The zone of interaction between the two spheres of home and school increases when the parents participate in their children's schooling and education (Force B). When the teachers make an effort of including parents in their children's schooling (Force C), the interaction increases between the home and school. The amount of overlap between the two spheres will be at a maximum when the home and school operate as true partners within all comprehensive programs that include shared activities (Epstein, 2001).
In contrast to the external structure, the internal structure describes both the institutional and interpersonal communication lines along with locating where and how social interactions occur *within* and *across* the boundaries of school, home, and community (Epstein, 2001) (Figure 2.4). The internal structure has two levels of communication, i.e., institutional and individual, and two types of interaction, i.e.*within* and *between* organizations. Institutional communications represent the interactions between the home and the school. In this level, family members communicate with
school staff to discuss general schooling issues, such as school programs, policies, volunteer opportunities, and activities regarding parent-teacher organization, or advocacy groups in the community (Epstein, 2001). Individual communication refers to interactions between the parents and the teachers. Parents may discuss their child's progress through parent-teacher conferences, phone calls, or email communication. The teacher may suggest related activities to help increase the students' learning at home to improve the child's academic and/or social development and competence (Epstein, 2001).

Figure 2.4. Epstein's (2001) Overlapping Spheres of Influence (Internal Structure)
Based on Epstein's model, the presumption is that the interactions between the parents and the teachers of sharing their abilities, interests and knowledge benefit the child’s learning and development. It implies “how school can work with families and communities to assist them to become or stay informed and involved in children’s education at home and school” (Epstein, 2001, p. 43).

*Hoover-Dempsey and Sandler’s (1995, 1997) Mode.* The model of parental involvement developed by Hoover-Dempsey and Sandler (1995, 1997) focuses on conceptualizing the process of parental involvement influencing the children’s educational outcomes. This model gives reason as to why the parents become involved in their children’s education and describes the patterns of influences during the process. In this model, parents have the positive and beneficial influences on their children’s educational achievements. The process of parental involvement is hypothesized by several levels of concepts. The key variables influencing the children’s achievements in school are the parents’ decision to get involved, the parents’ choice of forms to involve, the mechanism influencing their child’s outcome, and the mediating variables (Figure 2.4) (Hoover-Demsey & Sandler, 1995).

The first variable is the parents’ decision to become involved in their children’s education, which is the “parents’ role construction, parents’ sense of efficacy for helping children, and the opportunities or demands for involvement from children and the school” (1995, p. 326). The parents decide to participate in their children's education when parents understand the importance of their role in collaboration, how they can positively affect their child's learning, and when they perceive desire from both the child and school for them to be involved (Hoover-Dempsey & Sandler, 1997). The second
variable in this process is the parents’ choice of involvement forms. Once parents decide to be involved, they participate based on their skills and knowledge, the demands of time and energy and invitations from their children, the teachers and their school. The third variable is the mechanism of parental involvement affecting their child’s education. It explains how the child’s educational outcomes are influenced by means of modeling the mechanism of parental involvement affecting their children’s education. This variable explains that children’s educational outcomes are influenced by the means of modeling, reinforcement, and instruction. Lastly, these three mechanisms are tempered or mediated by the developmentally appropriate strategies selected from the parents and the fit between parents’ actions and the expectations of school for parental involvement (Hoover-Demsey & Sandler, 1995).

Consequently, three key variables describe the process of parental involvement. First is why parents choose to become involved. Secondly, what forms parents use as their involvement. Third is why their involvement influences their children’s educational outcomes. Parental involvement is a dynamic process constructed by the equal contributions from the parent, school, child, and society.
Figure 2.5. Parental Involvement Process (Hoover-Dempsey & Sandler, 1995, p. 327).
Perspectives on Parents-Professional Relationship

In order to understand the importance of the home and school partnerships in the secondary school level, Mundschenk and Foley (1994) examined the perspectives of high school teachers and parents of students with and without disabilities. The researchers interviewed 34 high school teachers serving both students with and without disabilities in urban and rural areas teaching the subjects of math, physical education, science, auto body, English, business, special education and driver education. Ninety-two parents were randomly selected from the teachers’ classrooms and participated in phone interviews. The researchers grouped parents into high achieving (HA, n = 21), average achieving (AA, n = 25), low achieving (LA, n = 23) and having a disability (DS, n = 23).

The interviews focused on determining the prerequisites to successful partnerships between the home and school and describing the communication and decision-making process. The findings indicated that both parents and teachers perceived communication as the key ingredient to building the positive relationships and it was the most critical prerequisite to successful partnerships. Interestingly, both parties expected the other party to make contact regularly and develop the relationship. With regard to the issue of the decision-making process, the majority of the parents reported that school personnel never requested their opinions prior to making any decisions. Conclusively, no partnership existed between high school educators and parents with and without disabilities. However, both parties commonly considered the importance of communication between parents and educators in order to strengthen home-school partnerships.
In another study, conducted by Blue-Banning et al. (2004), the perspectives of parents and teachers toward home and school partnerships were explore. The main focus was to examine the indicators of professional behaviors in collaborative partnerships. Utilizing focus group interviews, the perceptions of the parents of children with and without disabilities and teachers were captured. In addition to this, the researchers administered individual interviews for culturally and linguistically diverse family groups to gain an in-depth understanding about the cultural variables that may affect the quality of partnership. A total number of 137 families were involved in this study. The thirty-four focus groups (eight per group) were interviewed for approximately two hours each. In addition to this, thirty-two individual interviews were with non-English speaking parents and their service providers (18 families, 14 professionals). Six themes emerged as indicators of professional behaviors representing collaborative family and professional partnerships. These were (a) communication, (b) commitment, (c) equality, (d) skills, (e) trust, and (f) respect. These themes also represented the key factors associated with positive partnerships. As a result, the findings of this study suggest that collaborative partnerships between home and school can be achieved through providing appropriate training to professionals based on these six components in order to develop their relationships with families.

Stoner et al. (2005) investigated the experiences of the parents of children with autism spectrum disorder (ASD) with regard to their interactions with education professionals. Utilizing a collective case study method, four married couples selected from a parent support group meeting participated in a series of semi-structured interviews lasting 60 to 90 minutes, the prerequisites being that they were the child’s
biological parents, were married and that they have a child with ASD enrolled in the public school system in preschool at the elementary level. Two main themes were (a) the important influences on parent perceptions and (b) common experiences that either reduced or enhanced parental trust. The findings indicated that the parents’ interactions with educational professionals were initially influenced by a sense of distrust with medical professionals. This sense of distrust profoundly affected the parents’ motivation to build reactive patterns of behaviors for self-education and external problem-focused behaviors. Also, their experiences during the early intervention years influenced the parents’ behaviors to shift into gathering information and being persistent, which are external problem-focused behaviors. However, the parents’ perceptions changed again when their children began formal schooling. The parents encountered obstacles within the special education system, such as perceiving the IEP meetings as complex and obtaining appropriate services as being complicated and difficult. Their level of trust in educational professionals decreased, so parents needed to have frequent, open, and honest communication with the educational professionals. Overall, this study suggested that professionals needed to understand the parents’ point of view in relation to their child’s education. Open and honest lines of communication should be open and welcomed in order to build strong partnerships between the home and school.

**Parental Involvement and Physical Education**

Hager and Beighle (2006) emphasized the importance of promoting physical activity in physical education because it could contribute towards children having healthy lifestyles. Physical educators should take an advocacy role to promote physical activity in the course of physical education and even from the school to the community.
Social support (e.g., encouragement and role modeling) is a positive way to encourage children and youths to participate more in physical activities (Hohepa, Scragg, Schofield, Kolt, & Schaaf, 2007). This support should come from parents, families, peers and teachers. With parents being the child’s first teacher, they can provide a strong foundation to support their children to be physically active by showing their interest and modeling how to be more physically active (Van Deventer, 2000; Virgilio, 1990). Parental influence in physical education during childhood and the adolescent periods is particularly significant because it facilitates not only the children’s physical development, but it also influences their cognitive, social, and psychological development (Bailey, 2006; Ellis, 2001). According to these studies, parental involvement needs to be increased in physical education.

An and Goodwin (2007) reported that the mothers of children with spina bifida valued parental involvement in inclusive physical education. In their study, the researchers explored the experiences of mothers of children with spina bifida in their children’s physical education. Parents were actively involved in their children’s education programs. The major type of their involvement discovered in this study was “participation” and “communication.” By sharing information, they intervened to provide awareness sessions in classrooms i.e., disability awareness, disability sport awareness so that other members, including teachers and students without disabilities, could have a better understanding of students with disabilities. The other form of involvement was communication with school personnel through formal means (IEP meeting, parent-teacher conference) and informal means (telephone, email, communication booklet). In addition to their involvement in school, all families in this
study were physically active in community sport programs, resulting in the children showing a high level of interest in physical activity and skill performance.

In a different study, Columna, Pyfer, Senne, Velez, Brindenthull, and Canabal (2008) explored the perspectives of Hispanic parents of children with disabilities on the issue of parental expectations of adapted physical educators. They reported that Hispanic parents of children with disabilities wanted to be more involved in their children's education. Furthermore, the adapted physical educators embraced that parental supports were effective.

Folsom-Meek (1984) also indicated that parents were good assistants in adapted physical education. Children with disabilities are now commonly included in general physical education. However, they still need individualized instructions for various types of activities. As home-based activities, parents can provide individual instruction to their children with the support of receiving adequate training from adapted physical education specialists or general physical education teachers. This helps to reinforce skill development when parents are able to carry out what the children learned in school at home.

According to Virgilio (1990), teachers need to facilitate the involvement of parents in physical education because the parents might not be aware of the benefits of physical education in their child’s learning and education. Virgilio (1990) defined parental involvement in physical education as communicating with the school, participating in school and helping their children at home. In order to increase parents’ participation in physical education, teachers should use a variety of strategies.
One key strategy is regular communication with parents. Teachers must provide program information ahead of time so that parents can have some sense of PE program objectives. For example, types of activities, goals to achieve and parental roles to help their children (Vigilio, 1990). Vigilio (1990) asserts that there are several techniques that can be utilized for exchanging information between teachers and parents. The easiest way of communicating is sending a newsletter home. Teachers may include announcements such as upcoming school events and class unit information, reminders for clothing and safety issues and provide information for home-based activities relating to class units. Another means of communication is for GPE teachers to engage in parent-teacher conferences. Virgilio (1990) advocates the opportunity for teachers and parents to build their relationships to support children’s learning.

Parents play multiple roles in schools such as classroom aides, volunteers, school governance and guests or observers. Parents play pivotal roles not only in the general education classroom, but they can assist in the actual physical education class by sharing their athletic talents and experiences. They can also help the school and their child by helping to monitor during recess time, transport students as chauffeurs for games and intramural events, or even videotape the games. During field days or school events (e.g. fun day, Jump Rope for Heart), parents should be encouraged to get involved in activities with their children. In addition, parents can take an active role in the decision-making processes of school administrative matters such as fund raising, budgeting, public relations, policies and curriculum decisions.

The final form of parental involvement is helping children at home (Vigilio, 1990). In order for parents to be effective at enhancing the students’ healthy lifestyle, teachers
must coordinate class activities with parents so that parents can replicate the class activities at home. This can also be achieved by using newsletters and parent-teacher conferences. Teachers may develop a pocket reference including a variety of activities and games for parents.

In summation, parents are a vital influence in the educational outcomes of children with disabilities. In order to improve the learning and skill level for children with disabilities in general physical education, parents must become more involved.

Summary

This chapter provided an overview on the structures of parental involvement in education and information about how parental involvement has been practiced in schools. In the field of education, parental involvement is a key component to improving students’ learning and development. Many studies have found that parental involvement influenced their children’s academic achievement and attitudes (Fan & Chen, 2001). In particular, federal law, such as IDEA, mandates parents’ participation in the IEP meeting for students with disabilities. Nevertheless, there are still unanswered questions relevant to the practices of parental involvement such as: “how are parents stimulated to involve? “How are their relationships with teachers established? What opportunities are available for parents to become involved in schools?”

The reviewed literature showed that there is a need to build relationships between home and school in order to obtain high-quality forms of parental involvement. Particular emphasis needs to be placed upon the importance of establishing home-school partnerships so as to improve the child’s learning outcomes. Open and frequent communications between the parents and teachers is central to building and
strengthening partnerships. The different roles that parents have with regard to their involvement in their children’s education were also examined in the literature. Many teachers did not consider the role of decision-maker to be one of the parent’s roles, even though there are policies that support and encourage parents to take active roles in the decision-making process. It is clear that there are inconsistencies between policies and practice. It is necessary to investigate further the implementation of policy in schools with regard to parental involvement. There are a few studies available that are related to parental involvement in physical education, although parents are considered to be key members in influencing their children’s learning and development (Ellis, 2001; Hohepa et al., 2007).

This study best aligns with the propositions of Bronfenbrenner’s (1979, 1992, 2005) ecological systems theory that child development is a consequence of the interactions between an active, developing agent (i.e. child) and his or her environmental contexts. Personal attributes of children with disabilities can interrupt their relationships with the environmental contexts or prevent them to continue. As a consequence, their development can be affected by the roles their parents play in their education.
Chapter 3: Methodology

Introduction

The topic of parental involvement in education has been investigated for the last five decades. In most cases, research focused on examining the impact of parental involvement on students’ educational achievement and performance, the ways participating in the students’ education, the patterns and understandings of home-school relationships, and the extent to which schools and parents satisfied (Betcher, 1986; Cotton & Wiklund, 2007; Garriott et al., 2000; Salembeir & Furney, 1997). However, there is a lack of studies on the experiences of parents of students with disabilities in inclusive education, particularly in relation to physical education. Therefore, the primary goal of this research investigation was to capture the experiences of parents, who have children with developmental disabilities, focused on how they perceived parental involvement, and how they involved in their children’s physical education. This study explored the meaning parents of youngsters with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers.

This chapter consists of three sections. The first section includes a description of professional background to bring my viewpoints and biases in relation to the topic of parental involvement. Next, I present a brief overview of the methodological framework guiding the study’s design driven from an interpretivist paradigm, and a phenomenological perspective as a way of communicating the lived experiences (Crotty, 1998).
The last section explained the procedure and process of study, including participant selection, data collection and analysis.

**Researcher’s Bias**

Prior to coming into the adapted physical education doctoral program at The Ohio State University, I was a physical educator, coach for athletes with disabilities, and program coordinator of disability sports at a rehabilitation center in South Korea. My formal, professional experiences caused me to reflect on the parents’ roles in their children’s physical education. In the past, I have always tried to develop close relationships with the parents as I designed and provided physical activity programs to their children with disabilities. The parents often shared information about their children’s school physical education programs. I also tried to provide information with regard to school physical education to the parents as much as I could. Although the parents showed their enthusiasm about their children’s participation in physical activity programs and expressed their willingness to support education, they were less interested in influencing their children’s physical education programs at school. This discrepancy intrigued me and caused me to focus on their involvement in their children’s physical education.

I do not position myself as a parent of a child with disability; however, I have been involved in the disability community as a teacher, coach and program coordinator for the past fifteen years. Throughout these years, I have interacted with both families and their children with disabilities and have learned that children’s learning can be developed more effectively and meaningfully with the support that comes from parental involvement. Parental support helps motivate children to enjoy participating in physical
activities, and this, in turn, enhances their level of skills. In addition, the frequent interactions with the parents helped me to have a better understanding of their children’s conditions and needs, and it helped me know how to support their child better when developing physical education programs and working with their children.

During my PhD program, I continued to work as an instructor in an adapted an aquatics program in the Department of Recreational Sports at the Ohio State University. This was part of an adapted recreational sport program for people with disabilities, from ages 4–18. I became involved in this program in order to familiarize myself with the disability community in America. This opportunity gave me the chance to meet and interact with the families of children with disabilities, especially children with developmental disabilities. The parents of children with disabilities regularly attended and observed their children’s participation in the adapted aquatics programs. I made conversation with the parents and discussed their child’s progress in the adapted aquatics program and other topics related to their child. The parents always gave me a brief summary of the events happened during the week at home and in school and even shared their concerns about matters related to their child.

In this study, my main role was being an interviewer. In order for me to obtain a detailed portrait of the parents’ experiences, I had a pre-meeting session before the actual series of three interviews with each participant to build rapport. I communicated with the parents via phone and email after all the interviews completed.
Qualitative Research

Qualitative research is often an interpretive and naturalistic process that explores social and human phenomena. The aim of such inquiry is to understand the meaning of human action and its interaction with a social world that people have constructed (Creswell, 1998; Denzin & Lincoln, 2005). The emphasis of qualitative research is on the subjective nature of inquiry, so the researcher studies things in natural settings that try to make sense of or interpret phenomena in that persons convey the meaning to them. In qualitative inquiry, multiple methods of data collection and triangulation are utilized in order to secure an in-depth understanding of the phenomenon in question (Denzin & Lincoln, 2005).

Phenomenological Methods

Phenomenology is considered to be both a philosophy and a methodology describing and understanding the structures of experience (Ivory, 2003). Wagner (1983) explained phenomenology as:

a way of viewing ourselves, or viewing others, and of viewing all else that comes in contact with our lives. In this sense, it is a system of interpretation that helps us perceive and conceive ourselves, our contact and interchanges with others, and everything else within the realm of our experiences. (p. 8)

Creswell (1998) described phenomenological inquiry as an attempt to describe and interpret “…the meaning of the lived experience for several individuals about a concept or the phenomenon” (p. 51). That is, phenomenological inquiry seeks out the meaning of day-to-day human experiences. It also engages through the process of description, intuition, reflection and interpretation (van Manen, 1997). By phenomenological inquiry, we deepen our understanding of the essence or meaning of everyday experiences.
Hermeneutic phenomenology is grounded in the philosophical idea of hermeneutics as a system of interpretation (Allen & Jensen, 1990; Annells, 1996). Hermeneutics is an approach in human science that attempts to understand the meaning of the written word of inquiry that focuses on interpreting a text or work of art. However, in the larger context of qualitative study, it has come to include interpreting interviews and observed actions because lived experiences gathered from persons’ language (Patton, 2002). The meaning of spoken language requires interpretation given the subjective, non-neutral, and relational quality of words (van Manen, 1997).

Hermeneutical interpretation also attempts to construct a vivid description of human actions, behaviors, intentions, and experiences as we find them in the day-to-day world (van Manen, 1997). The discourse of meaning by hermeneutical phenomenology is a combination of description, thematic interpretation, and metaphoric insight (Ray, 1994). van Manen (1997) asserted that hermeneutics was a method of inquiry in the human sciences that attempts to understand or comprehend the meaning of the written word. Therefore, this study used a hermeneutic phenomenological inquiry to seek out the lived experiences and meaning that parents of students with developmental disabilities ascribed to their involvement in physical education.

**Sampling Strategy**

In qualitative research designs, the general strategy or logic for selecting samples is based upon the decision of relevance to the research question, rather than the representativeness of a whole group or population (Erlandson, Harris, Skipper, & Allen, 1993; Schwandt, 2001). Sampling in qualitative research is, in general, focused on targeting small samples that are purposefully selected to permit an in-depth
understanding of a phenomenon and to maximize the potential for discovering patterns that emerge from the particular context under study (Erlandson et al., 1993). Patton (2002) explained that “the logic and power of purposeful sampling lies in selecting information-rich cases for study in depth” (p. 230). Patton further explained that the meaningfulness and insights generated from qualitative inquiry have more to do with the information-richness of the cases selected and the observational and analytical abilities of the researcher than with sample size. In particular, the recommended sample size for phenomenological studies is between 3 and 10 (Creswell, 1998).

**Selecting Participants**

The appropriateness of the sampling strategy in purposeful sampling should be judged on how well the selected sample will facilitate the answering of the research questions. In that vein, a criterion sampling strategy was employed for this study (Patton, 2002). Criterion sampling involves reviewing and studying the cases that meet the predetermined criterion of importance. In this inquiry, it was parents who had past experiences with involvement in their children’s physical education programs (Patton, 2002). More specifically, the criteria of eligibility for this study were:

1. the parents had children included in a general physical education program
2. the children were between the age of 7 and 18 years old and grades 1 to 12, representing the experiences of the elementary, middle, or high schools
3. the parents had involvement in the IEP process that resulted in a written IEP plan current to the previous school year, including GPE
4. the parents were active members in the schools such as attending school functions or activities on a regular basis (e.g., IEP meeting, PTA conference,
volunteering, observing class, communication, etc.)

5. parents were primary caregivers (e.g., mother, father, grandparent, or legal guardian, etc.).

The age range of the children reflects both elementary and secondary school physical education experiences. In 2008, The State Department of Education published a physical education survey report presenting the number of minutes and classes per week of physical education allocated for students in grades K to 8. Two academic school years –2006-07 and 2007-08 – were included. The average minutes per week were 71.3 (2006-07) and 72.7 (2007-08), and the number of classes per week was 1.8 in both years. Students in grades 6-8 received a slightly higher number of minutes per week (20 minutes) than students in grades 1 to 5. In the case of high school, students were required to take the one-half unit (120 hours) for graduation.

It was informative to listen to the stories of both parents of elementary and secondary school aged children due to the different structure of physical education programs at each level.

**Finding Participants**

The participants were recruited from a large metropolitan area and adjacent suburbs with the support of the *Adapted Recreational Sport Program (ARSP)* at a local university and *Loose the Training Wheels Bike Camp (LTWBC)* held in the university, June 2008. I initially contacted two individuals of ARSP coordinator and LTWBC program organizer in order to obtain their support to secure the families of children with disabilities. I explained the nature of the study and asked for their help. Both contact people agreed to share the recruitment information with their family members by

5 Ohio Laws Chapter 3313.603, retrieved from [http://codes.ohio.gov/orc/3313.603](http://codes.ohio.gov/orc/3313.603)
circulating emails. I also obtained their permission to make study announcements on-site, so I visited adapted gymnastics and adapted aquatics programs to provide a package of study information (i.e., brochure) (Appendix B) and a letter of recruitment (Appendix C). In the LTWBC, I volunteered a week-long camp to build rapport with the families and their children instead of disseminating a package of study information to the families at the site. At the end of last session, I made an announcement that I looked for participants in this study. Six participants originally agreed to participate in this study at the setting, but only four parents responded to later contact.

At first, I started collecting data with four participants and then one of the participants helped me circulate information of the study to a parent group organization for children with “special needs” within her school district. I received three more responses from the organization, so a total number of seven mothers were recruited for this study. In order for me to build rapport, I scheduled a pre-interview meeting with all the participants so that I had a chance to meet with families in their homes. I spent some time (about an hour) with each family talking about their daily lives. At the meeting, I provided them with a package of study information, including a consent form, a participant information form and an interview guide. I directed them to review and fill out the consent form and participant information form at the end of the pre-meeting session. All participants completed the participant information form (Appendix E). The information is summarized in Table 3.1. Information pertaining to children’s school programs and IEP information are found in Table 3.2.
<table>
<thead>
<tr>
<th>Name</th>
<th>Occupation</th>
<th>Paid</th>
<th>Education</th>
<th>Marital Status</th>
<th>Name</th>
<th>Age</th>
<th>Grade</th>
<th>Sex</th>
<th>Siblings &amp; Age</th>
<th>Disability</th>
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<td>Elle</td>
<td>Grant Writer</td>
<td>Part-time</td>
<td>Bachelor's</td>
<td>Married</td>
<td>Matt</td>
<td>8</td>
<td>2</td>
<td>Boy</td>
<td>1B, 12</td>
<td>DS</td>
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<td>Full-time</td>
<td>Bachelor's</td>
<td>Married</td>
<td>Jade</td>
<td>10</td>
<td>4</td>
<td>Girl</td>
<td>3B, 12, 9, 6</td>
<td>DD/ADD</td>
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<td>N/A</td>
<td>College</td>
<td>Married</td>
<td>Chad</td>
<td>10</td>
<td>4</td>
<td>Boy</td>
<td>3B, 24, 23, 8</td>
<td>DS</td>
</tr>
<tr>
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<td>Bachelor's</td>
<td>Married</td>
<td>Alex</td>
<td>12</td>
<td>6</td>
<td>Boy</td>
<td>1B, 10, 1S, 8</td>
<td>DS</td>
</tr>
<tr>
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<td>N/A</td>
<td>College</td>
<td>Married</td>
<td>Iris</td>
<td>13</td>
<td>8</td>
<td>Girl</td>
<td>1S, 11</td>
<td>Autism</td>
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<td>Nate</td>
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<td>Full-time</td>
<td>Bachelor's</td>
<td>Married</td>
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<td></td>
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<tr>
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<td>Full-time</td>
<td>College</td>
<td>Partner</td>
<td>Brad</td>
<td>16</td>
<td>9</td>
<td>Boy</td>
<td>N/A</td>
<td>Autism</td>
</tr>
<tr>
<td>Abby</td>
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<td>N/A</td>
<td>College</td>
<td>Married</td>
<td>Dale</td>
<td>17</td>
<td>11</td>
<td>Boy</td>
<td>3B, 15, 11, 9</td>
<td>Autism/OCD</td>
</tr>
</tbody>
</table>

DS: Down syndrome, ADD: Attention Deficit Disorder, OCD = Obsessive Compulsive Disorder

Table 3.1. Descriptions of Participants and their Children
<table>
<thead>
<tr>
<th>District</th>
<th>Matt</th>
<th>Jade</th>
<th>Chad</th>
<th>Alex</th>
<th>Iris</th>
<th>Brad</th>
<th>Dale</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Greenland City</td>
<td>Harrington City</td>
<td>Jackson City</td>
<td>Northwest City</td>
<td>Northwest City</td>
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<td>Catholic School Private, k-8th</td>
<td>Daniel &amp; Hoffman Public, k-5th</td>
<td>Bethel Elementary Public, K-5th</td>
<td>George Middle Public, 6-8th</td>
<td>George Middle Public, 6-8th</td>
<td>Florence High Public, 9-12th</td>
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<td>Paraprofessional</td>
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<td>Yes (Part-time)</td>
<td>Yes (Full-time)</td>
<td>No</td>
<td>Yes (Full-time)</td>
<td>Yes (Full-time)</td>
<td>Yes (Part-time)</td>
</tr>
<tr>
<td>Para. In PE</td>
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<td>No</td>
<td>Yes (Full-time)</td>
<td>No</td>
<td>Yes</td>
<td>Yes (as needed)</td>
<td>Yes (as needed)</td>
</tr>
<tr>
<td>IEP meetings</td>
<td>4/year</td>
<td>2/year</td>
<td>1/year</td>
<td>1/year</td>
<td>2/year</td>
<td>1-2/year</td>
<td>1-2/year</td>
</tr>
<tr>
<td>IEP members</td>
<td>Parents (Principal Classroom T. (I. S. (Therapist (OT, ST) (sometimes) Reading Tutor PE teacher PT))</td>
<td>Parents (Principal Teachers (OT, ST) (sometimes) principal)</td>
<td>Parents (Principal Teachers (OT, ST) (sometimes) principal)</td>
<td>Parents (Principal Teachers (OT, ST) (sometimes) principal)</td>
<td>Parents (Regular Ed. T. (I. S. (Therapist (OT, ST) (sometimes) MRDD coordinator)</td>
<td>Parents (Principal or Vice-principal Regular Ed. T. (I. S. (Therapist (OT, ST) (sometimes) MRDD Case Worker Transition Coordinator)</td>
<td>Parents (Principal or Vice-principal Regular Ed. T. (I. S. (Therapist (OT, ST) (sometimes) MRDD Case Worker Transition Coordinator)</td>
</tr>
<tr>
<td>IEP attendance</td>
<td>w/ Spouse</td>
<td>Alone</td>
<td>Alone</td>
<td>w/ Spouse</td>
<td>w/ Spouse</td>
<td>Alone</td>
<td>w/ Spouse</td>
</tr>
<tr>
<td>Rate of Involvement</td>
<td>Regularly</td>
<td>Regularly</td>
<td>Regularly</td>
<td>Regularly</td>
<td>Regularly</td>
<td>Regularly</td>
<td>Regularly</td>
</tr>
</tbody>
</table>

Table 3.2. School Information
Six mothers and one couple (both mother and father) of youngsters with
developmental disabilities participated in this study. Four participants had children who
were in elementary schools and three participants had youngsters who were in secondary
schools. There were three boys and one girl in the elementary schools and two boys and
one girl in secondary schools. The average age of children in the elementary schools was
10 years old (ranged from 8 to 12), and the average of the secondary schools adolescent
was 15.3 years (ranged from 13 to 17). Data was collected from June 2008 to November
2008.

Pilot Testing the Interview Guide

The interview guide was developed by consulting research procedures, findings of
the preliminary study (Appendix H) and Seidman’s (1998) guidelines for conducting
phenomenological interviews. The interview questions appear in Appendix F. An
interview guide was used to keep the focus on pertinent questions. In order to capture
parents’ own experiences accurately and to ensure its appropriateness, the interview
guide was pilot tested with two mothers – Lisa and Jenny – who had children with
autism (not included in the data analysis). I taught their children once a week for about
10 months in an adapted aquatics program at a local university so I was very familiar
with Lisa and Jenny and their children. Lisa had a five year old girl and Jenny had a six
year old boy. Lisa completed all three interviews within three weeks, but Jenny finished
only one interview. She withdrew from further interviews due to family issues.

After the pilot interviews with them, I found that the interview questions needed
to be reformulated so that they were more open ended, thus encouraging the participants
to be more detailed in their responses. Also, I needed to improve my interview skills by
posing probing questions rather than immediate move onto the next question. Seidman (1998) suggested that effective interviewers need to have skills of “follow-up” questions on what participants say, asking questions when the context is not clear, avoiding leading questions, keeping away from interrupting the participants when they are talking, keeping the participants focused and ask for supporting details and enduring silence. The skill I needed to strengthen the most was my ability to ask follow-up questions on what participants had said. In the pilot interviews, I tended to move on to the next question too quickly, so I ended up having brief descriptions of their stories. In order to rectify the problems that occurred in the pilot test interviews, I used two specific strategies of (a) a pre-interview session, and (b) a time for silencing so that I do not move quickly.

**Study Procedure**

A brief summary of the study procedures is outlined in Table 3.3. During the phase of ‘meeting and introduction,’ I visited several sites to meet potential participants introducing the overview of the study. In an effort to develop rapport with the participants, I was actively involved in programs that I visited (Loose the Training Wheel Bike Camp, Adapted Gymnastics and Aquatics) and regularly communicated with the parents of children with disabilities. I also scheduled pre-meeting sessions prior to the actual interviews so that the parents would be willing to talk about their experiences (Holstein & Gubrium, 2003). I gained the trust of the study participants through (a) engaging in *Loose the Training Wheel Bike Camp*, (b) sharing personal experiences with the families of children with disabilities, and (c) having time to meet all family members and have casual conversations about our pasts, our interests in physical
activities and physical education, and what we currently do.

In the pre-meeting session, I provided study information in detail. I explained the overview of the study again, including the IRB process, the significance of the study and the methods. I also described how the data would be collected, analyzed and interpreted. Moreover, I highlighted the roles of the participants in the process of data analysis and explained how each step would be completed.

1. Development of the interview guide
2. Piloted interview with two mothers of children with autism
3. Meetings and introduction phase with participants
4. Building Rapport: Pre-Interview Meeting at Participants’ Home
5. First Interview with participants
6. Second Interview with participants and collecting artifacts
7. Third Interview with participants
8. Data analysis/thematic development
9. Data interpretation with participants

Table 3.3. Summary of Data Collection and Interpretation Procedures

Data Generation

This study used multiple types of data sources to capture the parents’ experiences. They were (a) demographic questionnaire; (b) interviews (semi-structured, open-ended), (c) visual artifacts (photographs and video clips), (d) documents (personal emails, memos,
notes sent home, IEP documents, progress report, and report cards) and (e) a researcher's journal (Creswell, 1998; Erandson et al., 1993; Patton, 2002). The combination of several data sources brings multiple perspectives forward and allows the researcher to better understand the essence of the experiences encountered (Erandson et al., 1993).

**Demographic questionnaire**

The researcher used a brief demographic questionnaire (e.g., age, occupation, family members, educational background, school information) to make some sense of the participants' lives and to provide a detail description of them (Appendix E).

**Interviews**

Interviewing is one of the most common and powerful methods that can be used to understand human experience (Fontana & Frey, 1994). Seidman (1998) asserted that “it is a privilege to gather the stories of people through interviewing and to come to understand their experience through their stories” (p. xxi). Qualitative interviewing focuses on understanding others' meaning making (Waren, 2002). Interviews may take a wide variety of forms, ranging from those that are focused or predetermined to those that are very open-ended, where nothing is set ahead of time (Erladson et al., 1993). There are three basic forms of interviewing; these are structured (question focused), semi-structured (content focused), and unstructured (informant focused) (Dunn, 2000). Structured interviewing uses predetermined questions with a limited set of response categories. Semi-structured interviewing uses some degree of predetermined open-ended questions with an expectation of a broad range of responses. Lastly, unstructured
interviewing focuses on personal perspectives and histories, so the questions are completely determined by the interviewee’s responses (Fontana & Frey, 1994; Dunn, 2000). For this study, the primary data source was audio-recorded, in-depth semi-structured interviews.

Typically, the semi-structured interview is guided by a set of basic questions and issues to be explored, but neither the exact wording nor the order of the question is predetermined (Erlandson et al., 1993). A form of semi-structured interview that is consistent with phenomenology permits focused, conversational, and two-way communication to give and receive information (van Manen, 1997). The semi-structured interview initially starts with general questions or topics and the relevant topics are defined and then the possible relationships between these topics and/or issues become the source for more specific questions. Although semi-structured interviews begin with a framework provided by predetermined open-ended questions, more questions can be created over the course of the narrative between the interviewer and the interviewee. Denzin and Lincoln (1994) stated that a draft of the interview guide can be presented to the interviewee ahead of time for the purpose of guidance, so I provided a copy of interview guidelines to all parents in pre-interview session.

The parents in this study took part in a series of three one-on-one, semi-structured interviews lasting approximately 60 to 90 minutes each (Seidman, 1998). Seidman (1998) stated that:

…in-depth, phenomenological interviewing involves conducting a series of three separate interviews with each participant. People’s behavior becomes meaningful and understandable when placed in the context of their lives and the lives of those around them. Without context there is little possibility of exploring the meaning of an experience. (p. 11)
Adhering to Seidman's (1998) model of interviewing, the initial interview was focused on establishing the context of the parents’ experiences (e.g. home, school, and community involvement). During the second interview, the parents were asked to reconstruct the details of their experiences within the contexts where they had occurred. At that time, the significance of artifacts and documents that parents brought to share was also discussed. In the last interview, the parents were asked to reflect on the meaning of the experiences that they described in the two previous interviews.

All participants completed a series of three interviews and the interviews were conducted in their homes over a six month period. I recorded all the interviews using a standard digital recorder and transferred the data to a computer. I transcribed each interview verbatim on the same day to identify patterns and issues that needed clarification (Seidman, 1998).

Before I proceeded to the actual series of interviews with the participants, I had had a pre-meeting session to share her personal background and get to know their families. In the meeting, I told them where I came from, why I came to the United States, what I had done in the past, and why I have had an interest in this particular topic. In doing so, I was able to build rapport with the participants. At the end of the interviews, one of the parents even asked if I could provide training sessions to her daughter. After all the data collection was completed, I was hired as a personal trainer for Iris and provided training sessions in track and swimming six to eight hours per week for about ten months.
Visual Artifacts

Qualitative research often includes photography and/or videography as an information source. Photographs may help in capturing the setting for others as well as in recalling things that have happened (Patton, 2002). That is, it can present specific factual information that can be used in conjunction with other sources. Furthermore, photographs can be used to understand the subjective and to provide descriptive data when it is analyzed (Bogdan & Biklen, 1998).

<table>
<thead>
<tr>
<th>No.</th>
<th>Participant</th>
<th>Time</th>
<th>Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Tara</td>
<td>June-Aug.</td>
<td>1 informal conversation and 3 interviews</td>
</tr>
<tr>
<td>2</td>
<td>Dena</td>
<td>June-Aug.</td>
<td>2 informal conversations and 3 interviews</td>
</tr>
<tr>
<td>3</td>
<td>Abby</td>
<td>July-Aug.</td>
<td>1 informal conversation and 3 interviews</td>
</tr>
<tr>
<td>4</td>
<td>Nora</td>
<td>July-Aug.</td>
<td>1 informal conversation and 3 interviews</td>
</tr>
<tr>
<td>5</td>
<td>Lori &amp; Nate</td>
<td>Aug-Sept.</td>
<td>1 informal conversation and 3 interviews</td>
</tr>
<tr>
<td>6</td>
<td>Elle</td>
<td>June-Sept.</td>
<td>2 informal conversations and 3 interviews</td>
</tr>
<tr>
<td>7</td>
<td>Sara</td>
<td>Oct-Nov.</td>
<td>1 informal conversation and 3 interviews</td>
</tr>
</tbody>
</table>

Table 3.4. Timeline for Interviews (June – November, 2008)

The parents were asked to share photographs that may help explain their thoughts, feelings, and knowledge about their experiences of involvement in their
children's physical education. The photographs would come from such sources as family albums, school outings, or school memory books. The number of photographs the participants brought to the second interview was entirely their decision. The purpose of using photos was to stimulate discussion and verify their experiences (Patton, 2002).

Six parents brought their children’s photos to the interviews. One mother shared video clips posted on YouTube. The parents explained their significance, thereby adding to the textual record. The photos were scanned so that a permanent record was available for data analysis and write up.

**Written Documents**

Documents are a broad range of written and symbolic records and can be categorized as personal, official, and popular culture documents (Erlandson et al., 1993). In particular, documents are such items as personal letters, diaries, memos, works of art, meeting agendas and notes, news releases, IEP documents, and notes sent home. The written materials of information was used to supplement interview data and added to the trustworthiness of the findings (Bogdan & Biklen, 1998). Documents also provide both a historical and contextual dimension to the study (Glesne & Peshkin, 1993). Therefore, the parents were also asked to bring any document related to their involvement in physical education to the second interview. It was also utilized to stimulate further discussion added to the data collected. Copies of all documents were made with the permission of the parents for later reflection.
Researcher’s Journal.

The last form of data source was the researcher’s journal. It is a written account of what the researcher hears, sees, experiences and thinks about the way of collecting and reflecting on the data in a qualitative inquiry (Bogdan & Biklen, 1998). Writing a journal is a way of describing and reflecting on the progress of interviews and/or making observation on the settings and the participant’s behavior.

Journals were written after the interviews. Journaling was kept in both descriptive and reflective manners (Gall, Borg, & Gall, 1996). Each interview was supplemented by the extra remarks recorded in the journals (Bogdan & Biklen, 1998). The researcher recorded what happened during the interviews, including her perceptions of rapport and nonverbal data (e.g., body language, gestures, facial expression, etc.), reflective notes about what was said that day, ideas for further probing with subsequent participants, and her preliminary thoughts about themes emerging from the data. These notes permitted the researcher to conceptually return to the setting during the analysis of the data (Jackson, 1994).

Data Analysis

Data analysis is the process of organizing data, of conjecture and verification, and of correction and modification (Morse, 1994). Qualitative research is a process of systematically searching and arranging the interview transcripts, field notes, and other sources (Bogdan & Biklen, 1998). In particular, phenomenological analysis seeks to grasp and explicate the meaning, structure and essence of the lived experiences or phenomena for a person or group of people (Patton, 2002).
In order to analyze the meaning, structure and essence of the participants’ experiences, van Manen’s (1997) thematic analysis was utilized. Thematic analysis is defined as the common structures of the particular experiences under study and the primary mechanism by which understanding is achieved (Morse, 1994). Therefore, the meaning and experiences of parental involvement in physical education was reflected on by analyzing the structural or thematic aspects of lived experiences of the parents. As the first step, the researcher adopted a holistic approach read all of the transcripts from eight parents (21 interviews) to be familiar with their stories and understand the data. In the process of reading, I kept in mind the question, “How do these transcripts speak for the lived experiences and the meaning of parental involvement in physical education?” I jotted down notes on the side of the transcripts. A second step was to analyze the data utilizing a highlighting approach. I read the transcripts over again and highlighted statements or phrases that seemed to stand out or were significant to the phenomenon of parental involvement. During the second step, I also added labels and structural descriptions to the highlighted statements or phrases for further discussion. Finally, I used a detailed reading approach to examine every sentence or sentence cluster to generate thematic statements or phrases. By way of reading each transcript repetitively, more thoughtful and richer descriptions of the phenomenon emerged. An outline of the data analysis steps is summarized in Table 3.5.
1. The interviews were transcribed verbatim.
2. The transcribed interviews were read and reread by the researcher to obtain a broad understanding of the findings.
3. After the text was read through, the researcher organized it based on the description of experiences and then labeled each. And then she looked for statements and phrases of importance that spoke directly to the research questions.
4. The data were sorted by categorizing, coding, and highlighting in line with their similarities (e.g., perceptions, types of involvement)
5. Grouped and organized specific words and phrases into preliminary themes.
6. Inspected these meanings for what they revealed about the phenomenon being studied.
7. Re-organized the data into themes with a description of each theme.
8. Shared the themes and thematic descriptions with study participants to gain a deeper understanding of the meaning from their perspectives.
9. Re-structured the themes and thematic descriptions from the parents' suggestions.

Table 3.5. Summary of Data Analysis Procedure

---

Data analysis began on the very same day of the first interview. After I had completed each interview, I sat down in a quiet place to write down a journal about the interview. Then I transcribed the interview and did initial analysis while transcribing the data. Further probing questions and the emerging themes were added on the interview transcripts so the parents were able to see the comments that I made when I later sent it to them. I sent out each interview transcript to the participants two days after each interview was conducted. Also, after completing all three interviews, I copied all the
transcripts to the CD with the audio files and mailed them to the parents for member checks, which is a process to verify transcripts for accuracy. All parents, except Nora, completed and made changes to the transcripts to ensure clarity to what they meant to say.

**Trustworthiness of Qualitative Research**

The goal of qualitative research is not to produce generalization but rather generate in-depth understandings of particular phenomena (Leininger, 1994). Research rigor should be evaluated using different criteria from the positivist constructors of internal and external validity, reliability, and objectivity (Lincoln & Guba, 1985). According to Lincoln and Guba (1985), the trust value of qualitative research can be developed through attention to credibility (or verification), applicability through transferability, consistency through dependability (or validation), and neutrality through confirmability. The quality and value of this research was assessed by these established trustworthiness criteria.

Qualitative data should be triangulated as a combination of several data sources (e.g., interview, observation, documents) to enhance the credibility of the inquiry (Kuzel & Like, 1991). Triangulation refers to an “attempt to arrive at the same meaning by at least three different independent approaches” (Johnson, 1992, p. 90). It can take place several ways, including methodological triangulation (e.g., interviews, observation, documents, and visual materials), data triangulation (e.g., interview respondents), researcher triangulation (e.g., single or multiple researchers), and theoretical triangulation (use of multiple perspectives to interpret a single set of data) (Janesick, 1994; Lincoln & Guba, 1985). Within this study, the researcher adopted methodological
(face-to-face interviews, visual artifacts, documents, and researcher’s journals), data
(mothers and a father who have daughters and sons, elementary and secondary level)
and researcher triangulation. My academic advisor and I collaborated on the analysis
and interpretation of the data. The criteria of trustworthiness utilized in this study are
summarized in Table 3.6.

<table>
<thead>
<tr>
<th>Trustworthiness Criteria</th>
<th>Application to the Preliminary Study</th>
</tr>
</thead>
</table>
| **Credibility or Verification** | Data Triangulation  
  * Parents of sons and daughters  
  * Parents of elementary, middle, and high school level children  
  Purposive Sampling  
  Researcher’s Credibility |
| **Transferability** | Thick Description  
  * Participants’ demographic information  
  * Description of schools and PE programs  
  Purposeful Criterion Sampling |
| **Dependability or Validation** | Multiple Methods  
  * Interviews, visual artifacts, documents, and researcher’s journals  
  Member Check  
  * Interview Transcripts  
  * Summary of thematic analysis  
  Audit Trail |
| **Confirmability** | Audit Trail  
  Researcher Triangulation  
  * Investigator and investigator’s advisor |

Table 3.6. Criteria for Trustworthiness
Credibility (or verification) refers to the “truth value” of the findings and the techniques that are reflected in decisions made around the research design (Meadow & Morse, 2001). Credibility has been addressed within the design of this study in the following ways:

- Data triangulation was used. The interviews of parents of sons and daughters of elementary and secondary school age were returned to repeatedly.

- Careful purposive sampling was undertaken. By working diligently to ensure that the participants meet all of the stated criteria and that they were rich sources of information as ascertained with the help of the recruiting agency, credibility was enhanced.

- In qualitative research, the researcher is the primary instrument for the data collection and analysis. As a former physical education teacher for children with disabilities and now an APE teacher educator, I had a strong background in inclusive physical education. I frequently communicated with the parents of children with disabilities about physical education programs and their children's performance. Although I was not a mother myself, I tried to interpret the phenomenon from the parents' viewpoints.

Transferability (or applicability) refers to whether particular findings from a qualitative study can be transferred to another similar context or situation and still preserve the particular meanings, interpretations, and inferences from the completed study (Leininger, 1994). Even though qualitative research cannot claim empirical generalization, naturalistic transferability can appear through the proper use of thick description to dispel the typicality of the sample (Lincoln & Guba, 1985; Mason, 1997).
Transferability was established in the following ways:

- A description of each family setting was undertaken to provide context to the experience. Such descriptions strive to state everything that the reader may need to know in order to understand the findings (Erlandson et al., 1993). I provided a detailed description of the participants. Along with the information of study participants, information on the children's characteristics, schools, physical education programs and community sports programs were also gathered. This information provided a foundation for recognizable congruence of these parents' experiences within other contexts (Denzin & Lincoln, 2000). Background information is summarized for each family in Table 3.5 and 3.6. It is also provided in the results section.

- A purposive criterion sampling was undertaken. Recruiting a group of participants based on specific criterion facilitates naturalistic (analytical) generalizations or the degree to which contexts are similar (Lincoln & Guba, 1985).

- The transferability of the findings beyond the experiences described by the parents of this study was also enhanced by using participants' quotes to illustrate the themes.

*Dependability* (or validation) means a study’s consistency or the soundness and accuracy of the findings (Erlandson et al., 1993). The researcher must provide evidence of an external check on the decision making process conducted throughout the design of the study and its implementation so as to provide the verification of dependability (Meadow & Morse, 2001).
• In order to ensure the validation of the findings, multiple methods were utilized. That is, the interview information was supported by other data sources such as visual artifacts, documents and the researcher’s journals. Multiple sources were applied to enrich the study, provide data to inform the question, and perform thorough and complete analysis (Meadow & Morse, 2001).

• An audit trail, which is a written record of the research process, was completed (Meadow & Morse, 2001). The written records include the researcher’s decisions, choices, and insights. The audit trail is a “technique that permits research validation by allowing another researcher to follow the cognitive development of a project as it developed” (Morse, 1994, p. 24). Throughout the research process, the researcher made entries into a journal associated with descriptions of research settings and procedures, such as recruitment, interview dates, and notes that information sent out to the study participants. All methodological decisions made throughout the study were recorded. Analytical notes were made to provide a record of thought processes of the researcher in sorting and categorizing data and in conceptualizing patterns that emerge during analysis.

• Member checks were completed. All participants were asked to confirm or correct the reconstruction of their perspectives and experiences (Lincoln & Guba, 1985). Member checks are an opportunity to share opinions, reactions, and descriptions and for the researcher to examine the reflection of participants on the work done by the researcher as a source of information on the topic (Meadow & Morse, 2001). In addition, it is imperative that both data and interpretations obtained be verified by study participants because the findings
have individually and collectively been constructed by persons within the context of the study. From this study, the member checking was completed in two phases. After the interview data were transcribed, I sent a copy of the transcripts to the research participants via email and mailed them out with the audio files. They were asked to review the transcripts for accuracy and send any changes back. The mailed out information was followed up with a phone call and email. All participants responded with changes except for one participant (Nora). I tried to follow-up with Nora via phone and email several times, but she was unable to respond. In the second phase of the member checks, the result of the analysis was also emailed to the participants. A cover letter and summary of the preliminary themes and their description, including a reply form, was sent via email (Appendix G). Six participants returned the forms and indicated that their experiences were reflected in the thematic summaries.

*Confirmability* was identified as the objectivity of the data (Lincoln & Guba, 1985). It is concerned with establishing the fact that the data and interpretations of an inquiry were not merely a creation of the researcher's imagination. Along with the techniques of methodological and data triangulation, confirmability was established by the use of multiple investigators i.e. the researcher, study participants, and researcher's advisor. The researcher's dissertation committee had reviewed the research proposal prior to the data collection and provided guidance throughout the research process.
Chapter 4: Findings

Introduction

The purpose of this study was to explore the meaning that parents of youngsters with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers. More specifically, the study sought to describe the lived experiences of parents’ involvement in their children’s physical education programs and interactions with GPE teachers in order to understand the meaning of parental involvement. The findings of this study are written in a descriptive narration format.

This chapter consists of two main sections. First, the experiences of each participant are briefly summarized to provide a comprehensive understanding of the phenomenon of parental involvement. Second, the experiences of each participant are articulated by the themes. Because excerpts from the participants’ narratives were used to illustrate the findings, the initial parts have been edited by deleting superfluous words, such as “um” and “you know”, and repeated words or phrases were also removed for ease of reading and understanding. In order to ensure the confidentiality and anonymity of participants, pseudonyms were used for all participants and school names. Three dots indicate that the participants paused during the conversation before continuing. Four dots denote that the quotations were combined from different places in the transcripts.
Meeting the Participants

Elle, mother of 8-year-old Matt with Down syndrome

Elle is a 45 year old, white, mother of two children. She was the organizer of the Bike Camp held at a local university at the time when I met her. I was introduced to her by a participant from the pilot interview. Elle was managing the Bike Camp as a part of her work at the Down Syndrome Association (DSA). Elle placed a high value on her son’s participation in physical activities. Because of Matt’s disability, Down syndrome, she was concerned about his development in gross motor skills and physical fitness. She wanted to be involved in sharing her story so that other families could obtain resourceful information with regard to physical education. Elle said, “I always feel it [physical education] is very important to participate in things like [the research], so my child and other children with similar situations can benefit in the long term form the type of research that you’re doing.”

Elle lives in a suburban area. There were four members in Elle’s family – Elle, Tim, and their two sons. Michael was a 12-year old boy attending a middle school. Matt is an 8-year old boy with Down syndrome who attends Lawson Elementary School in Greenland City District. Elle had been married for 18 years. She is a homemaker, but she has also worked as a freelance grant writer for a non-profit organization. Before Matthew was born, she was involved in working with an organization called Jesuit Volunteer Corp (domestic violence victims), social services homeless shelter, and the Community Shelter Board. She holds a bachelor’s degree in Sociology and English and studied psychology as a minor. Tim is an information technologist. Tim also earned a Bachelor’s in Biology and a Master’s in Business Administration.
With regard to Matt’s education, Elle is actively involved in becoming a parent volunteer in school events, assisting class instruction and being a member on the IEP team and the parent-teacher association (PTA). She even joined and became a committee member in a local community organization (DSA). Matt was a boy who preferred to stay inside playing with toys or listening to music rather than to be outside running around. Since he loved music and theater, Elle often tried to create an environment where he could enjoy music while playing all activities.

Matt has attended Lawson Elementary School for three years. He spent two years in kindergarten at the same school. The first year was a half-day kindergarten and then a full-day kindergarten in his second year at that school. Matt attended GPE classes twice a week, and his teacher assistant accompanied him. He also had received adapted physical education (APE) services from his GPE teacher once a week for two years, and then it was removed in his third year. In the first year of APE services, neither parents nor the GPE teacher had ideas as to what things were to be provided. His GPE teacher provided APE services as a pull-out session, by consulting with the physical therapist because Greenland City District did not have personnel for APE. Therefore, the physical therapist determined whether or not he should receive APE service. At the time of interviewing, Matt had no APE service in school, although the parents addressed the need for Matt, the IEP team perceived that Matt achieved the APE goals in previous year. Elle explained her discussion of APE goals in the IEP meeting:

I would say this past meeting we talked about that a great deal because he did have APE goals last year, and they felt that he met those goals. They felt he would have no functional limitations that would keep him from participating fully in school. My argument was he has to maintain those
goals next year due to his low muscle tone. He won’t maintain that strong musculature if we don’t continue to provide the APE service, so we talked about that. (Interview #3)

**Dena, mother of 10-year-old Chad with Down syndrome**

Dena is a 51 year old, white, stay-home mother since her retirement. I met her at the Bike Camp Event held at a local university. She was interested in this study when I made an announcement that I was for searching potential research participants in Bike Camp. She immediately approached me and talked about her children and their physical education programs in school. We had a conversation for over an hour at the site.

Dena’s family lives in a suburban area. Her household is a two-parent family, including her husband and four sons. Her husband, Adam, works in a company as a production supervisor, full-time, so she is the one who is primarily involved in her children’s education and school. She has two step-sons, ages 23 and 24, along with two younger children, Chad and Charlie. Currently, one of her step-sons lives with the family. Chad is a 10 year-old boy with Down syndrome. Charlie is an 8 year-old boy with the diagnosis of PDD/NOS [Pervasive Development Disorders/Not Otherwise Specified]. Dena retired in 2006, so she is now actively involved in her children’s education by means of observing classes, volunteering in school, and attending meetings. Dena seems to be a very involved parent in her children’s education. She also places a high value on participating in physical activity. She said, “I was always very athletic growing up, and that was my favorite part of the school year, so I’ve always considered it to be important. For me, it was really important growing up just because I enjoyed it so much.” She enrolled her children in various sports activities.
Her two youngest children, Chad and Charlie, attend Hoffman elementary school in Jackson City School District. Chad was transferred from Daniel Elementary School in February 2008 because there was a conflict of interest between home and school about Chad’s behaviors. Chad participated in GPE in both schools twice a week. He also received APE services during his kindergarten and first grade in Daniel Elementary School as a pull-out session. While at Hoffman, because of his behavioral issues, he needed to be in a self-contained class for students with multiple disabilities, so he attended an APE program once a week along with GPE classes.

Chad is a physically active boy in that he has been a member in various sports programs offered by the community, such as the baseball league, the Nazarene Church Basketball and the Special Olympics. He participated in two sports in each season throughout the year. Dena encouraged him to engage in all different types of activities year round, so he can be physically active and able to interact with people. The interviews were conducted during the summer, but her children had a well-organized daily schedule (e.g., academic and therapy sessions in the morning, social events or sports participation in the afternoon). Dena explained that she could keep her children in various programs because her children were supported by residential support program (Medicaid Waiver Program) from a local county board of Developmental Disabilities. This program allowed her to hire people to come to her home and work with her children.

**Sara, mother of 10-year-old Jade with Developmental Delay**

Sara is a 42 year old, white, working mother of four children. She is also one of the participants whom I met in the Bike Camp. When she reviewed the announcement,
she thought she met the study’s criteria and wanted to help. She said, “I feel if I had information that might like help the researcher, anything that would help the children or the people who are going through this type of situations, I’m certainly willing to do that.”

Sara’s family lives in a suburban area. Her household is a two-parent family, including her husband, Henry, one daughter and three sons. Henry is a special education teacher in a public high school. Their oldest child is James, a 12 year old boy (7th grade). Jade is a 10 year old girl (4th grade). John is a 9 year old boy (3rd grade) and Joseph is a 6 year old boy (kindergarten). All of her children attend a private catholic school. Jade is the one who had special needs. Jade was diagnosed within significant developmental delay and had an attention deficit disorder (ADD). Jade is a highly active child as she participates in a variety of sport and activity programs, such as swimming, T-ball/Coach Pitch, soccer (2 years), volleyball, gymnastics, and cheerleading.

Jade’s school is located in Harington City School District. Jade attends GPE class at school but have not had APE services. Sara believed that Jade was capable of participating in GPE class. She received part-time teacher aide (TA) support in school, but she participated in GPE independently. Practicing their religious faith was a priority for Sara and Henry, so all of their children went to a private catholic school. St. Thomas school includes Kindergarten to 8th Grade, so all of her children attend the same school. This seems to help Sara stay easily involved in her children’s education at school. Additionally, she is an active member in the church, which associates with the school, so she has built a close relationship with the school and teachers.
Sara communicated with teachers via telephone and email as well as in-person. There were two formal IEP meetings held per year and she had many informal meetings. In Jade’ IEP meetings, typically several personnel and professionals attended (i.e., special education teacher, classroom teacher, current and future therapists, mother alone and principal). Jade’s father, however, did not attend the meetings due to time conflicts.

**Tara, mother of 12-year-old Alex with Down syndrome**

Tara is a 43-year old, white, working mother of three children. She got the study announcement from the Bike Camp at a local university. She felt excited when she saw this announcement. She explained that this was the first time she saw anyone doing a study relating to physical education, so she felt that she could offer valuable information.

Tara is a project manager and her husband, Tom, is a system engineer. Tara has two sons and one daughter. Her first son, Alex, is a 12 year old boy with Down syndrome. Alex attended Bethel Elementary School located in Northwest City School District throughout his years of Kindergarten to 5th grade. He graduated from that school in June 2008 and anticipated going to George Middle School in 2009-2010 academic school year. Alex participated in GPE during his elementary school years without the assistance of a teacher assistant. GPE class was provided once or twice a week depending on the school schedule. In addition, Alex had received APE services since he was in first grade. It was a pull-out, one-on-one session for about 30-minutes per week during his first and second grade years. Since third grade, the APE service was switched to a consultative basis provided once a month.

Tara is a big proponent for inclusion, so Alex has been educated in an inclusive setting. Since the age of five, Alex has participated in a variety of inclusive community activities.
programs such as kayaking, water skiing, dance, soccer, baseball, swimming, summer camp and basketball. She stated:

I feel that having him involved in the regular education setting has made the other kids more aware, the other kids’ parents more aware of kids with special needs. I think it just raised such an awareness of the special needs population within the community that it’s like they’re not going to go away. They’re here and they can be productive members of society just like everyone else. That’s always been something that is been very important to me. (Interview #1)

Alex has been included in GPE since kindergarten. Tara considered it critical for his overall development, especially building appropriate social behaviors. Tara explained:

I think it has extremely been beneficial to have him in the regular PE class. Knowing that he does delays, does need a little extra help, it was a perfect balance to have the APE teacher in there even if it were once a month. She could’ve given her guidance if she saw something that he really needs to work on. She could tell the PE teacher. Peer modeling has been good because he can easily look at the kids next to him and say, ‘oh, that’s how you do it.’ It was much better I think. (Interview #3)

Tara involved herself in Alex’s school regularly. She always tried to communicate with teachers and school staff through email and phone calls. Besides, she initiated scheduling of monthly meetings with the teachers and other professionals i.e., IEP members and attended different types of meetings (e.g. parent-teacher conference, the IEP meeting). She stated:

I have always been a working parent, so I am not one of those parents that are always in school volunteering, but I do take a lot of vacation days to go in participating when the kids have field trips or super game days or different things. I also have to split that up amongst three kids but as far as the involvement with Alex, I mean he’s the most we’re involved with regarding the education. (Interview #1)
Lori and Nate, parents of 13-year-old Iris with Autism

Lori is a 44-year old, white, mother of two children. She received research information from Nora, a mother of a 16-year-old Brad with Autism. After she reviewed the information, she also thought that her experiences could help other families who have children with disabilities:

Our daughter has been doing in regular physical education and APE for a long time. One of my friends, who also had a son with autism, sent me an email, so I thought that I’d like to do that stuff because I think it’s an important research to make it better for these kids. (Interview #1)

Lori lives in a suburban area with her husband, Nate, and two daughters. Lori is a home maker and Nate is a software engineer. Their oldest daughter, Iris, was a 13 year old girl with autism and the youngest child, Erin, is an 11 year old girl. Iris just completed her 7th grade program at George Middle School located in Northwest City School District. Erin finished 5th grade at Brown Elementary school.

Lori and Nate believed Iris to have quite severe condition due to her language barriers. Iris was diagnosed as having autism and she was non-verbal, so the parents used an augmentative communication device and hand signs to interact with their child. Iris attended in GPE class since Kindergarten. She received APE services once a week during elementary years. She had a full-time teaching assistant (TA) to support her in school, including physical education. Iris is also a member of the school track team in her middle school. She practices and competes in cross-country events with her peers without disabilities in her school. Lori is the primary caregiver with regard to Iris’s education, so she communicates with her teachers via email and phone on a regular basis.
As a part of her educational programs, Iris worked in a day-care center and volunteered at a local library during the summer. In school, she also involved in a work-study program through a high school in Northwest City School District, so she went to a copy center for work. Lori also enrolled Iris in a residential support program (Medicaid Waiver Program) provided from a local county board of Developmental Disabilities, so Iris could participate in additional learning opportunities—from academic to life skills—at home.

**Nora, mother of 16-year-old Brad with Autism**

Nora is a 40-year old, white, working mother of one child with autism. She responded to the research announcement advertised to the group of special education parent organization within the Northwest City District. She was an energetic and supportive person. She expressed that she actively involved in her son's education in school and home. She viewed physical education to be a valuable program for Brad:

> It excited me just because the fact that I think that the physical is very, very important for all of us, especially for my son with everything. He's been involved with…being included in school and physical education. Some of the test we've done as extracurricular activities that were related to the physical education, and then he's very involved with the Special Olympics. So to me, I thought that was something that we'd like to contribute to. (Interview #1)

Nora is a real estate broker and has been a working, single mother for years. She and her former husband divorced when Brad was about two years old. About five years ago, she became engaged and at the time of this study, lives with her fiancé and Brad. Brad is a 16 year old boy with autism, but he is very social. He also appears to have obsessive compulsive behaviors of eating pen tops and paper clips and throwing toilet
tissue into the toilet. He attended George Middle school located in the Northwest City
School District and went to David High School within the same district in a 2008-2009
academic year. She explained that Brad participated in GPE throughout all school years.
Brad always had a teaching assistant in his GPE program. During the years of middle
school, Brad had a male assistant, which Nora felt to be appropriate. Brad also joined the
school track team when he was in eighth grade. Brad has also participated in Special
Olympics Programs (swimming, track & field, power lifting) regularly since 2003. Nora
believed that being a part of the sports team could provide Brad an opportunity to
interact with his peers:

From a social perspective, track is the one. I mean these kids... they
socialize in school, but it's the after school activities when you really get
to know everyone. That would've been pretty neat for him to have been a
part of that whole team, not just one track meet and showing up. I mean
he still wants to meet. That could've been pretty neat, and I think that
they got a really good opportunity with the school system to make a
difference to show. I think with the track program, it was really neat to see.
I think that the kids did compliment to the track program. To me it was
really inspirational. I think, to the other kids, it was inspirational as well.
(Interview #2)

Nora also provided educational programs to Brad at home. She also obtained
residential supports program (Medicaid Waiver Program) from a local county Board of
Developmental Disabilities for Brad, so she could hire a group of people to teach Brad at
home developing his skills (e.g., life, educational, and behavioral skills). Nora seemed to
be a very involved parent. She made an effort to seek out better programs for her child.
She was continuously doing research and communicating with school personnel about
educational opportunities.
Abby, mother of 17-year-old Dale with Asperger’s syndrome

Abby responded to the email announcement for seeking parent participants in this study circulated through a Northwest Special Education Parent Group. Tara sent out an email to the group with recruiting information. Abby responded to the research announcement and expressed her interest in joining this project. Prior to the actual series of interviews, we communicated via email several times and then made a schedule to discuss about her participation in this study.

Abby is a 44 year old, white, mother of four children. Her household is a two-parent family, and they have four sons. Dale is her first son, age 17, who had Asperger’s syndrome and obsessive compulsive disorder. Her second son is Dennis, age 15. Jacob is 11 years old. Joseph is 9 years old. Her husband worked full-time. She was a stay at home mother, so she is the primary caregiver for her children.

Dale received his diagnosis of Asperger’s syndrome at age of 7. He seemed different in terms of behaviors and development, so Abby took him out of the preschool and did not send him back to school until third grade. Abby thought that it would be beneficial for him to learn in a quiet environment, so he was homeschooled. During the period of homeschooling, Dale’s physical education program was completed by taking programs in a local community recreational center. Dale returned to school when he was 10 years old. Since 3rd grade, Dale has participated in GPE class. He received a teaching assistant’s support when it was necessary. Dale recently completed his GPE requirements from high school, so he did not need to participate in GPE anymore. Along with GPE program, he received APE services as well. During his middle and high school years, he joined APE field trips as a part of the APE service. The Northwest City School district
has a program called APE field trips, which are physical activity programs practiced in a community setting to design for secondary level students with disabilities. All students with disabilities within the school district could join the APE field trips, such as bowling, swimming, horseback riding, golfing, skiing and skating. Dale participated in a variety of sport programs in inclusive community settings as well (e.g., karate, swimming, teen institute as a part of after school activities).

Abby once changed Dale’s school when he was in 8th grade because he started showing some negative behavioral problems in school. In his first year of middle school, he attended general education classes all the time (i.e. 100%), so he lost his attention and started to show inappropriate behaviors. Abby thought it was not appropriate for his learning, so they decided to switch his school where he could receive a resource room time (30%), and later his behaviors improved.

Abby was an active participant in Dale’s education. She joined a parent-teacher organization and became a committee member in the special education parent group organization in the school district. She explained that she participated in his education and school regularly by communicating with his teachers and intervention specialist via phone and email.

**Synthesizing Parents’ Experiences**

Three recurrent themes emerged from the thematic analysis of the meaning parents ascribed to their involvement experiences: *advocacy, involvement and positive but superficial relationships*. These main themes are supported by subthemes that further captured the essence of the experiences of the parents of students with developmental disabilities (Table 4. 1.).
Advocacy captures the essence of the parents’ understanding of their involvement in their children’s education, including physical education. Parents repeatedly emphasized the importance of being involved in their children's education in order for them to succeed. Because their children have special needs, these parents perceived that they should be an advocate for their children to ensure that the educational programs and supports were appropriately placed for their children in school. The parents also recognized that they had legal rights and responsibilities to participate actively in their children’s education (e.g., IEP meeting) for understanding their children’s learning and sharing their children’s characteristics and needs with teachers.

Involvement exposes the experiences of the parents and how precisely they participated in their children's physical education. Their involvement was not just limited to the school setting, but it was continued in both home and community settings. In school, communication was the most common approach that the parents used such as IEP meetings, parent-teacher conferences, informal face-to-face conversations, phone, or email. The parents took multiple roles, such as coordinators, organizers, motivators, teachers, evaluators and volunteers to facilitate their children's development. The parents also expressed that they continuously sought different opportunities in the community to supplement their children's learning in physical education.

The third theme, positive but superficial relationships, reveals the contradiction between parents’ beliefs and their behaviors interacting with GPE teachers. All parents reflected having a close relationship with teachers as essential in terms of supporting their children’s education. However, their interactions with GPE teachers were not active. In addition, they believed that each member has “different areas of expertise” –
understanding of students and content knowledge – hence parents and teachers must share their knowledge with each other. Collaborative partnerships were identified as a way of maximizing children’s development. Parents also believed that the line of communication between parents and GPE teachers must be open and both parties must talk to one another in order to make a team effort succeed. Nevertheless, the experiences of interaction with the GPE teachers were low. Parents tended to rely on other professionals, such as classroom teachers, special education, and adapted physical education teacher, when available, for gathering information on their children’s progress in physical education because they perceived that others had more interactions with their children.

Each of the three themes and its respective subthemes were presented in detail, using photographs and direct quotes to illustrate their meaning.

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<th>THEME</th>
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<td>b. The more involved I am, The higher they set the bar</td>
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<td>Involvement</td>
<td>a. Understanding big picture</td>
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<td>b. Becoming a supporter for my child, teachers, and school</td>
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<td>Positive but superficial relationships</td>
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Table 4.1. Summary of Thematic Analysis
“If you’re not advocating for your child, no one is going to do. What is going to be a better advocate than myself?”

Dena, mother of a 10-year-old Chad with Down syndrome

Advocacy

The parents ascribed being involved in their children's education to that of becoming representatives on behalf of their children. They sensed that they had responsibilities for their children's success and development. The parents also felt that they could help schools and teachers better understand their children's capabilities associated with learning as well as their needs. Abby, mother of 17-year-old Dale with Autism mentioned the importance of her role in Dale’s education:

I feel my role is to help educate the teachers on Dale’s disability. A lot of teachers have heard of autism, but it’s such a big spectrum. So in the beginning of each quarter, he has different teachers, and actually Dale and I both would go in and his intervention specialist would go in and sit down, and Dale would tell them himself some of the challenges he has with his autism, but then also I would explain that he also has a lot of good gifts and talents that he can use so I think it's an advocate for Dale (Interview #1).

The parents wanted to help their children to get a proper education and support so that their children would grow up as active citizens in society. In addition, the parents believed that they had to be involved in their children's education in order to facilitate their children's learning in various areas, such as academics, social skills and physical well-being. Elle, mother of 8-year-old Matt with Down syndrome, said:

Since Matt isn’t big enough or articulates [well] enough at this point to speak for himself, that’s my job to be his advocate and try to make sure that the goal of his overall educational framework is something that
makes sense for him and will help him to achieve what we know he’s capable of achieving (Interview #3).

**To Ensure Children’s Success in school.** Parents described parental involvement as making sure that their children met the educational goals established for them. They believed that their children were entitled to receive appropriate support and service programs in order to meet their needs throughout the school year. Additionally, they considered that it was their job to make it happen.

Lori, a mother of 13-year old Iris with autism, spoke about the value of parental involvement:

Oh, it’s totally important. I really think that kids who don’t have the parental involvement, especially kids with disabilities. They fall to the crack, and it’s a hard situation because the schools are overwhelmed. They don’t have enough staffs, and they don’t have the financial resources, so I think if you’re a parent who wants your child’s right to be met, you need to make sure that your child is receiving everything that should be getting, so I think it’s vital and important. (Interview #1)

Sara, mother of 10-year-old Jade who had developmental delay, rated her involvement in Jade’s education as being high. She believed that parents should stand up for their children to help with their success in school:

If you don’t fight for them, nobody else is right to do so they [children] don’t achieve. (Interview #1) This is her life and what does or doesn’t happen to her now is going to have a major impact when she’s grown. I have to make sure that she gets everything she needs now because she’s building the foundation so when she is grown, she can do the thing she needs to do so it’s critical that I’m part of that process to make sure they’re doing what Kira needs. (Interview #3)

She also explained how her involvement was important in Jade’s life in school:

I think it’s important for a parent to have an involvement. It taught me that I’m much more of an advocate…definitely getting involved with the
advocacy and support to make sure that they have what they need in any of the program at the school. (Interview #2)

Likewise, Elle, mother of 8-year-old Matt with Down syndrome, stated the importance of parental involvement for the success of her child. She further explained:

It [parental involvement] is very important. Our kids are there. How many hours a day? These are the people that are shaping them. I want to know about those people, and I want to see what the environment is like at school, and I want to contribute to it as much as I can. I think it’s really, always important for parents to know what’s going on with their kids and to be present to help when the opportunities arise or to guide the people who are working with my children so that I guess they’re covering what needs to be covered in the instance of my younger son and so that he’s getting what he needs. (Interview #1)

The parents also explained the importance of monitoring the educational programs that their children received because these were directly connected with their success in school. Tara, mother of 12-year-old Alex who had Down syndrome, spoke about her experiences in the IEP meeting while Alex was in kindergarten. Alex’s special education teacher attended the meeting with no preparation with respect to his educational programs and services. Tara remembered it as a very unhappy and frustrating time and felt that she had to prepare more:

Ever since he was in kindergarten, we had a horrible experience when we went to the IEP meeting. We really can’t rely on the school because if we wouldn’t have been involved, if we hadn’t come prepared, it would have been a bigger mess to deal with. (Interview #1)

According to Dena, mother of 10-year-old Chad with Down syndrome, her child got better support when she started to engage in school:

You have to stay on them because they can get lost in the process. There are so many kids and so many needs that the squeaky will get the grease
basically. So when you’re there or when you’re making your presence known, your child gets what he needs or she needs. That’s what I’ve learned from since I retired. When you are there, thing’s happened. When they can physically see you, things happen. (Interview #2)

Lori, mother of 13-year-old Iris who had autism, also said that she constantly checked things out in terms of what school was doing for her: “I just have always made sure that they’re doing what they’re supposed to be doing.” (Interview #2)

The parents also tried to facilitate their children’s success in learning not only in school settings but also in the home settings. They constantly searched for resources in support of their children. They could gain an access to local county support programs for individuals with disabilities. Applying to the residential support program (Medicaid Waiver Program) seemed to be a huge support for the families who have children with disabilities. Three children—Chad, Iris, and Brad—enrolled in the program of the residential support program, and Jade was on the waiting list at the time of interviews.

Lori, mother of 13-year-old Iris who had autism, spoke about Iris’s home program of the last nine years. She wanted to provide a supplementary education program for Iris at home so that Iris could continue with building her skills. The residential support program that she got from the local county helped her to hire specialists for Iris, such as a therapist, behavior analyst, special education specialist and adapted physical educator:

We have Medicaid waiver for her and that provides funding to help with her home maker personal care. (Interview#2). The first thing I would do when I moved to a place is I would get her involved in the county funding. I did that right away, got her on Medicaid Waiver list, and got her on the residential waiting list….I started hiring people for home program. I went into the school, primarily the schools where I get people who are
interested in working with these kids, and it’s a good extra income. It can be done right after school, so I would go into the school and hire a few people right away, and they started working in our home program and then at that time we didn’t have funding, we were paying out of our pocket. (Interview #1)

Dena, the mother of 10-year-old Chad with Down syndrome, also explained that her children were included in the residential support program, so she could create additional educational programs for Chad and Charlie at home:

I got Chad on a waiver. They [county] allocate you to have a case manager and they’ll look at your needs or Chad’s needs, and then they allocate money for a year. You could either go through the agency or hire your own providers. Charlie, I’ve got him on IO [individual option] waiver, so I was able to have people come into the home and to work with him do ABA [applied behavior analysis]. (Interview #3)

Nora, mother of 16-year-old Brad who had autism, stated that she recently got enrolled Brad in the Medicaid waiver program: “We just got a waiver after 15 years. I have to say that is absolutely huge difference where he is able to participate in all of these things. (Interview #1) She further explained about the program how she got the service:

When we found that he had special needs, I did have to go on public assistance a couple of times for very brief periods. I have my first meeting with a lady in a local agency. She mentioned a couple of waivers that I could get, and I was like ‘I’m not going to go on welfare because I’m a single mom. I’m not going to be one of those. I don’t need that.’ I wish I had. I wasn’t educated enough. What this waiver is not income dependent. It is Medicaid program. He’ll get regardless of what I make. It doesn’t go to my pocket. It is to give these kids the services that they need…The waiver is what pays for these girls and guys [individual provider] to come in to help me out to work with Brad. (Interview #2)

Sara, mother of 10-year-old Jade, also constantly sought supporting services for Jade from a local agency for individuals with developmental disabilities.
Another effort made by the parents to advocate for their children’s success was that they became actively involved in networking with the local community including school administrators, teachers and the other parent groups. Tara, mother of 12-year-old Alex with Down syndrome, explained how she became involved in a parent group organization within the school district:

It is actually a group that was formed a couple of years ago when there was a huge ordeal amongst the superintendent, special education director, and the treasurer....special education parents received a letter on Saturday stating on Tuesday the current special education director is going to be moved to a different position, non-special education related and they were going to fill out that with principals from the different school. Everyone felt like we were just being given this very last minute....It’s just kind of got the parents together, communicating. There is an email set to go out. That’s really brought all parents together. Now they’re a more formal group. They have positions where they meet with on the board, and they meet with a school district special education director. It’s called special education advancement council (SEAC). It’s become more formally developed. They have a really good relationship with the school, and they put on different things, such as a night about summer camps. They had a whole thing of camps one night from 6 to 9 out one of the schools. They had people from all over…person had kind of like little booth set up, and you could go and clock information on different camps. (Interview #1)

She also spoke to the necessity of networking with community:

I see myself continuing to research what physical education type of activities are out there and available. Constant networking and looking for things that are available and continuing to push him into…encourage him to try different activities…just researching and constant looking for different things and asking to other people… (Interview #3)

Abby, mother of 17-year-old Dale with Asperger’s syndrome was a committee member in a parent organization group of special education in the school district. She explained that it was a support and advocate group to help families who have children with
disabilities within the district and to spread an increasing awareness of disability with the community:

The goal of the committee is to increase the communication between parents and administrators and to increase awareness within the community of special needs kids have and also to help increase funding or special needs equipment or education. We haven't accomplished all that yet but those are some of our goals and then just to increase the advocacy for not just our kids but all kids with disabilities. (Interview #2)

Sara, the mother of 10-year-old Jade, is involved in the school special education programs. She seemed to play a role as a bridge between two programs: the early intervention program and elementary education, where Jade was placed in her early years:

We had gotten a new principal, and he was interested in starting a program to support children with special needs in the Catholic school. I became very active in the program called S.P.I.C.E. (Special People In Catholic Education). The year Jade was schedule to go Kindergarten. They [school] had hired a special education teacher so in order to make the adjustment as smooth as possible, the kindergarten teacher from the school went to a local program [Jade's class in MRDD] to observe Jade...her teacher from a local program went to school to the kindergarten classroom to observe. Then they talked about how to make the transition, so that was really great that they were both willing to meet and that made a big difference in the change and the adjustment for Jade....Our role with her in the certain respect to the same as the other children is to make sure that they have everything that they need to exceed to the fullest extent of their abilities. (Interview #1)

Elle's involvement was not limited to the school setting. Elle, mother of 8-year-old Matt with Down syndrome, said that she has been a committee member in the Down Syndrome Association:
I'm on the board as the age representative for kids’ age 6 to 12. I’m supposed to plan activities for that age group. I came on the board last winter and started planning the bike camp, and so far [it] is the only thing I've planned for them. (Interview #2)

Elle also stated that her experience in joining the Down Syndrome Association was an opportunity to learn what Down syndrome is and to get the support that she needed:

When Matt was one and a half, I heard that somebody was planning a Buddy Walk, and I really wanted to be involved in that event. I’d heard about Buddy Walk, and I thought it was a great event and a very cool way for other people to get to know a little bit more about Down syndrome. So I volunteered on the Buddy Walk committee for five years, and that was how I got to know more about the association and what they do for folks. For me, it's been helpful getting to know other moms, first through the buddy walk committee and now through my work on the board. That’s where I’ve gotten my support. They have this great new parent meeting that people go to from the time their child is born, or sometimes before their child is born, until their child’s three. They provide great speakers, and a lot of information about medical stuff and therapies, and I know a lot of people really get a lot out of that. But I never attended those. I should have I’m sure, but when Matt was really tiny my fear at that point was that I didn't want to go sit around in a room full of people whining. In fact, that’s not at all what they do. It would’ve been very beneficial for me to go. (Interview #2)

Dena, the mother of 10-year-old Chad with Down syndrome, also shared a photo taken as a family activity in the community. She explained that she and her family often joined Buddy Walk organized by Down syndrome Association to advocate disability awareness.
The More Involved I am, The Higher They Set the Bar. The parents gave meaning to how important it was for them to be involved in their children’s education in school. They sensed that they would not be able to persuade teachers to have high expectations of their children without their involvement in the school, such as attending meetings and communicating with the teachers. It would eventually affect their children’s development and success in school.

Lori, mother of 13-year-old Iris, felt that teachers did not have high expectations of her daughter because of her autism and inability to speak. She felt that Iris could fail in school if teachers did not set the bar higher, and that was why she was actively
involved in Iris’s educational programs:

I think it's important to let the school know that you're an involved parent, and you're watching because I think that these kids have a tendency to fall through the cracks. I think if we don’t set the bar high enough for them, I mean she can run in 9 minute a mile, but if she starts complaining, and the person running with her isn’t insisting that she can go little bit longer “come on you can do it, you can do it” by modeling that for her, she's going to stop. I think, in all aspects of her life, we’ve always set the bar high for her, and she meets it sometimes, and she doesn’t meet it other times. For the most part, we have insisted that the bar be set high for her. (Interview #1)

She also stated that without parents being involved, Iris might not be able to engage in activities with her peers without disabilities.

I mean I pretty much fought for everything. I mean I know her rights. I know what she’s entitled to. The programming that she has…insisting on her being involved with the typically developing children really comes from the parents being involved (Interview #1).

Elle, mother of 8-year-old Matt with Down syndrome, also stated that a child’s success was indeed related to the teacher's expectation of the student. Elle believed that Matt would perform better when he had higher expectations:

It’s really important to have high expectations because Matt rises to your expectations. When teachers have low expectations, that’s where he is, but once you push him to do more and when you expect more, he does well….Through involvement, you’re also indicating to the school staff and administrators that you value what happens in the school and how they invest your child’s success. (Interview #2)

Parents also continuously emphasized the impact of their presence in school. Tara, mother of 12-year-old Alex with Down syndrome, stated:

It’s important because I feel like if you don’t stay on top of things, you’re just going to be one of those kids that get the minimum….They [school]
don’t have experiences with the kids with special needs. So I feel like we’ve paved the way a lot for him to be there because he wasn’t supposed to go that school when he started. (Interview #1)

Nora, mother of 16-year-old Brad with Autism, thought that Brad’s learning experiences in middle school year were not successful because she was not involved in his program as much as she is now: “Brad wasn’t able to learn last two years and I failed. And it’s my fault because I wasn’t there. I didn’t set that up and go.” Dena, mother of 10-year-old Chad with Down syndrome, also explained that educational services for children with disabilities seemed to be provided appropriately only if parents closely monitored them: “When you’re making your presence known, your child gets what he needs or she needs. I’ve learned when you are there, things happen.” Sara, mother of 10-year-old Jade with developmental delay, further explained the role of parents in monitoring the teachers. She stated:

It’s critical that I’m part of that process to make sure they’re doing what Jade needs. I can’t sit back and expect these people. If I don’t keep [an eye] on them or let them know I’m paying attention, they’re not going to do it not because they’re being malicious but because they have many other things to do. (Interview #3)
“The definition of parental involvement would be that parent being a part of the child’s life, activities, sports, education, or whatever things are important to that child.”

Nora, mother of 15-year-old Brad with autism (Interview #3)

“…being aware of what’s going on in all aspects of her life, her school, her PE class, what’s going on at the YMCA, whom she’s interacting with, whom she’s around…I want to know what they’re doing in school. I want to know what's happening when they're at their sport activities.”

Sara, mother of 10-year-old Jade with developmental delay (Interview #3)

**Involvement**

The parents perceived themselves as agents for their children. Considering that their children have special needs, they felt that they have to play a vital role in their children's education so that their children would receive the proper education and training that they need. The parents were actively involved in their children's education not only in school settings but also in the community and even in home settings. The second theme captured the experiences of how the parents are involved in their children's education and physical education, and what roles they played as an agent for their children.
**Understanding the Big Picture.** The first subtheme illustrates how parents participate in their children's school and educational programs. The parents’ main interests were to oversee and understand the things happening around their children's lives, especially learning in school. The parents expressed that they wanted to facilitate their children's learning to promote overall development. Since their children had special needs, a lot of support was needed to achieve their educational goals properly. Thus, the parents used various approaches including verbal and written communication (i.e., telephone, email, face-to-face meetings, IEP meetings, communication notebooks, and newsletters) and observation, to obtain a complete picture of their children’s educational programs, class participation, and performance.

The major form of parental involvement was to attend IEP meetings that were helped once or twice a year on average. All of the parents in this study were actively involved in the IEP meetings. They expressed that it was an opportunity for them to look over the entire educational program in school. Furthermore, they were able to support the school personnel determining programs and services to meet their children's needs. Abby, mother of 17-year-old Dale, stated that the IEP meeting was a place she could obtain information about Dale’s school program and performance, such as what he had and what he needed for successful participation and his learning in school. Abby stated:

> Usually at the IEP meeting, especially in elementary years, almost everyone would come, so I felt like we had a good understanding what Dale needed….Our IEP meeting is pretty much to bring everybody together, so they can hear what Dale’s done in the last year and things we’re going to work on. (Interview #2)
Sara, mother of 12-year-old Jade who had a developmental delay, explained that she always participated in her daughter’s IEP and made an effort to ensure that Jade got achievable program goals and objectives:

When we go through them, I always go to all of them always. One is making sure [that] the goal is very specific, and it is very measurable, and those sometimes can be very hard to really put down on a piece of paper and also to ensure that it’s achievable, but it’s not easy. (Interview #2)

According to Nora, mother of 16-year-old Brad with autism, the IEP meeting was a process for goal setting. She felt that this is a place where she can review her son’s performance and contribute to set up new goals for Brad:

IEP meeting…once a year or you can have it more than once. We basically all go over what his goals will be for the next year both short term and long term. It’s just basically goal setting process. I’ve always been there. I’ve always contributed. I brought up certain things that I thought important to him. They were very open to listening to my suggestions, and usually I have them pretty much work with me on that. (Interview #1)

Lori and Nate, parents of 13-year-old Iris with autism, also perceived that the IEP meeting was the place where they could review what was going on and help the team members develop the best practices for Iris:

Usually, at the IEP meeting, we were there. Nate and I go. We have this regular education teacher and special education teacher, and there’s always an administrator. Sometimes the speech therapist is there or occupation therapist is there. Related services are there. We just sit around the table and everybody talks about what would be best for Iris. We’ve already received the draft of IEP, so there’s no surprise….it gives the opportunity to talk about everything we were going to do. (Interview #3)
In the IEP meeting, physical education programming was also one of components that the parents discussed with the IEP members. Tara, mother of 12-year-old Alex with Down syndrome, explained that Alex’s APE teacher shared his PE program. The APE teacher attended the IEP meeting and provided information on Alex’s needs and progress, although the GPE teacher had a primary function of teaching PE for Alex:

We probably spend about 20 minutes on the APE portion. She [APE teacher] talks from the PE. Regular PE teacher, she’s not there. From her perspective being in the PE class, 20 to 30 minutes…how he does in the regular PE class as well as his goals for APE. It really just consults for her to see Alex. She goes in once a month when he had a gym. [APE teacher] gave us status and where he was at and what is to be expected the next year…Now he’s going to go middle school, so he won’t have her anymore, but she knows what they do in the middle school level, so we talked about a little bit. (Interview #2)

Lori, mother of 13-year-old Iris who has autism, was highly valued in the physical education program. She believed that her child needed to participate in physical activity programs regularly in terms of keeping her healthy. In addition to the physical education program, she wanted Iris to have additional opportunities in physical activity programs, so she ensured that it was part of her IEP plan:

We always do it [discuss PE] in our IEP time. For our daughter, we have it implemented in her IEP that we want physical activity 30 minutes a day no matter what. Even if she doesn’t have PE, I want her to have physical activity every single day because I think that’s really important not only for sensory but also for her physical well-being….We have it written in her IEP that we want her to participate in PE year round, primarily for the physical part of being involved with having physical exercise. It’s important for her to get 30 minutes of constant exercise per day. She might not be always getting that in PE because they stand and start and stop so we take care of a lot of that at home, but we do have it written in
her IEP that she’s to get 30 minutes of physical activity every day. (Interview #1)

Another way of experiencing involvement was to have one-on-one or group meetings with teachers and other professionals (i.e., therapists, APE teacher). The parents also attended informal meetings with the teachers or the IEP team members to receive updates for their children’s performance and participation in school (e.g., monthly meeting, quarterly meeting, parent-teacher conference, phone conversation).

Abby, mother of 17-year-old Dale who has autism, had meetings regularly with teachers and therapists. She felt that talking with the teachers directly was the best way to understand Dale’s development:

We’ve always had positive meetings as far as what Dale’s abilities were. People were very open and clear about what he needed. Having the APE, I think, that again when other people are sharing, other professionals are sharing their perspectives on Dale’s needs and skill level, it helps everybody be aware of the whole picture so that they have an understanding of, like the APE teacher, not just working on skills for physical but also understanding that the whole process of processing the information and communicating where he has trouble with so that they could understand better to help him and that situation in the APE or in the PE setting. (Interview #2)

Tara, mother of 12-year-old Alex who had Down syndrome, initiated setting up monthly meetings with the teachers and other professionals, so she could get updates on Alex’s performance on a regular basis. She thought that the annual IEP meeting provided little information about her child’s performance and progress because it was only held once a year:

We would set that up each month, so once we started it, then at the end of the meeting, we planned for the next one. What it was for myself and
my husband to get together with school and anyone that wanted to participate to talk about what’s going on, since last meeting, with things been good or things been not so good, what things are coming up, what projects are coming up, so we could be prepared, we could help give input to the teachers. Primarily who were at those meetings were the regular education teacher and the intervention specialist. And then at times other people like speech therapist who was in the building, and she saw us meeting and she stopped in to give her feedback instead of waiting until the IEP meeting a year later because it was always in May [IEP meeting]… it [monthly meeting] was really to alleviate being surprised at the IEP meeting and to open up the dialogue between us and the school and whoever wanted to attend. Like the APE teacher, if she had a concern, we would’ve said, ‘Okay, we’re meeting next Tuesday at 8:00am up in Mr. M’s room. Come in over if you want to talk about that.’ (Interview #2)

Elle, mother of 8-year-old Matt with Down syndrome, had quarterly meetings with school personnel and professionals:

We did have a quarterly meeting with the IEP team. The quarterly meetings are much smaller than the IEP meetings and obviously much shorter. We asked for an opportunity to get together and kind of hear updates from everybody about how he’s doing. We usually get together during the lunch period, so it would be the classroom teacher and usually the principal kind of comes in and out as he can. The classroom aide came to one of them and the speech therapist and the occupational therapist are pretty good about brief comments so it was just a very brief update on how he’s doing in OT, speech, and in the classroom. I think that the PE teacher came too, maybe two of those and gave us updates then. (Interview #1)

She also attended the parent-teacher conference every time so she could have another opportunity to obtain information on her child, particularly in the classroom settings:

The formal conferences are four times a year. We always do the parent-teacher conference for Matt. I think it’s very, very valuable to have another opportunity to be in the classroom and hear from the teacher. The parent-teacher conference gives us more feedback about ‘here’s what he is writing about these days. This is his writing journal. Here’s a book report
that he did. Here’s what he is working on in math,’ so we get to actually see what he’s doing on a day-to-day basis, more of a bigger picture that we were aware of in that quarterly IEP meeting. (Interview #3)

Sara, mother of 12-year-old Jade with developmental delay, also described her experiences in the meetings that she had participated in:

Sometimes they would send home notes saying either conference requested or not needed at this time. Mostly they have put ‘not needed at this time’. I always go because I want to talk to the teacher about my children, just to get a sense of what’s going on. They may not have any bad issues, but it’s nice to hear good things or sometimes they may have an issue, but it’s not something that teacher’s going to write down…. (Interview #2) I can ask for the conference with anyone I want to from PE to music to art to the classroom. I can ask for conference with every person on the staff if I wanted, so I picked ones I feel I need to have a discussion with. Of course, he was available during that time, and if I feel that I need to sit down with music teacher, I would’ve sat down with her too. The reason I made a point sit down with him [PE teacher] this time was because we’re doing the study. I wanted to mention it to him see what his comments would be. Otherwise, I probably wouldn’t feel the need to meet with him. (Interview #3)

She also explained that she gathered physical education information through face-to-face conversations with teachers:

At the school [for PE], I would say more conversation. At the meeting, we all go through together, and we make some changes during the meeting, talk about what might work, what might not work, where we are, where we want to be, what’s going to be coming up the fall, the next year, but mostly I guess it’s just actively participating in that meeting, and then again, I talked to them whenever I might talk to them 2 or 3 times a week and not talk them for three weeks. It’s just all depends on what’s going on. (Interview #2)
Along with formal and informal meetings at school, verbal and written communication (e.g., email and notebook) was also used by the parents. Email was the most common mode of communication between parents and teachers. Tara, mother of 12-year-old Alex with Down syndrome, had a full-time job, so she frequently used email as a way of communication with Alex's teachers:

A lot of communication we did through email though with the specialist teacher. I mean Alex did crossing bar in 5th grade. It's like something that only 5th graders can do, just talking about that we were just email. It was the easiest, probably the easiest form of communication (Interview #2).

She further explained:

We, a lot of times, emailed just because of my work schedule. Email is the best way of getting hold of me. Cell phone, obviously if they needed me right away. We also had a communication notebook that was the paraprofessionals could write in. Anybody could write in it, but the regular education teachers always seemed to want to email. The intervention specialist always wanted to email, but occasionally, if he were in the classroom, he would write in the notebook so it just depended on everybody's preference….We weren't looking for details to be written in there. We were looking for high level things that we could talk to him about and communicate with [at home]….I found one of his APE from last year sent me an email and said, 'He did great. He really knows how to throw the football.' Just little things that make us feel good that we were on the right track teaching him the basics, different sports, and different skills….She [physical education teacher] sent a schedule like monthly newsletter that kind of gave us a synopsis what they've worked on what month, which is very helpful….She sent out the sheet that would tell [class] schedule like they have ABCD from Monday started A and then Monday and Friday you have gym on A-day. (Interview #1)

Sara, mother of 12-year-old Jade with developmental delay, stated that she received quarterly reports from the school explaining her progress:

Jade also gets report in the same envelope from the special education teacher and then I monitor that and see but really that's coming straight
It’s like her quarterly review. Is she meeting the standard? Is she on the mark? Is she progressing to where we expect her to meet, what we set the goal to meet and if she is again way off of it, do we need to adjust it? Do we think she’s going to get it? If I see something that stands out to me that I would make the point talk to the teacher, the special education teacher, but most of the time, it’s more okay. It seems on target. She’s doing okay. We’re good. (Interview #2)

Dena, mother of 10-year-old Chad with Down syndrome, also explained that she received written information about Chad’s performance and progress throughout the academic school years:

I think I get quarterly progress reports for all topics and goals in the IEP. They should send it home quarterly. I think it comes home with the report cards because we get those like every nine. I get it four times a year, and progress reports come home with the report cards. (Interview #3)

She also said that she received physical education reports from the GPE teacher, not from the APE teacher that showed a physical education report. She felt that she had limited access to the GPE program:

This is the physical education progress report for the end of the year for 2007-2008. That actually says second semester. Maybe I only get that twice a year, maybe after the break a half of the year, and then at the end of the school year….Sometimes I ask for stuff, but they didn’t send it to me. This one is from regular PE teacher at Daniel [elementary school]. I didn’t get anything from adapted PE teacher. They didn’t send me anything at the end of the year. (Interview #2)
Physical Education Assessment

Public School
Elementary School
2007-2008/ 2nd Semester

Physical Education Teacher:

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<tr>
<th></th>
<th>Experiencing Difficulty</th>
<th>Usually meets Expectations</th>
<th>Meets/Exceeds Expectations</th>
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<tr>
<td>Follows classroom and Game Rules</td>
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<tr>
<td>Respects and cooperates with others</td>
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<td>Respects equipment</td>
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<td>Listens and follows directions</td>
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<tr>
<td>Shows positive attitude and effort</td>
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<tr>
<td>Prepare for class (clothing, shoes)</td>
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Figure 4.2. Physical Education Progress Report – Chad

Elle, mother of 8-year-old Matt with Down syndrome, also explained that the school sent a progress report home:

I brought the materials from the end of the last school year, and it includes his report card with teacher’s comments on there. They’re always fun to read. There’s also a progress report from the physical therapist who consults with the school district about how he did meeting his IEP goals, just in the area of physical therapy for adapted physical education. There is the whole IEP progress report that shows each of the goals that were on his IEP last year and then progress for each quarter of the year. (Interview #3)
Besides verbal and written communication, observation was the most common way for parents to become involved in their children’s education. The school often invites the parents to come and see students’ performances or parents just visited the school to observe class or come along field trips. Abby, mother of 17-year old Dale, often went along with Dale in his APE field trips to see what his performance was like or she attended his physical education class program:

When he went on APE field trips, I would come to the most of those to observe his interaction with other kids and with the teachers; how he was doing with whatever their activity was…. [In elementary physical education] the teacher invited me to come and watch the final production. (Interview #1)

Lori, mother of 13-year-old Iris with autism, stated:

I usually go and observe PE a couple of times just to see how it’s going, but I primarily go there to make sure that she’s not standing on the sidelines, and if it’s something that they can modify, then they should be modifying it. (Interview #1)

Tara, mother of 12-year-old Alex with Down syndrome, explained that she was invited to school by the GPE teacher at the end of the school year when Alex was in 5th grade. There was a Gym Show prepared by the students, so all parents were invited to come and watch. She had a chance to see how Alex participated in physical education with his peers:

The acrobatic sport routine and the gymnastics…it was like on that flyer. You get about half the parents that would come, and then the obstacle course we watch them, and then after that sibling could go up, and parents could go and try to do different things with their kids, and they have super games at the end of the year. Parents can come. We tried to go on those things. (Interview #2)
Dena, mother of 10 year-old John with Down syndrome, also attended her child’s school to see his performance in physical education. She shared photos she took in school:

“They have like fun activities at the end of the school year. It’s called Fun Day. There is a couple of pictures in there of Chad doing some activities.” (Interview #2)

Figure 4.3. Chad participating in an activity in School Fun Day
Becoming a Supporter for My Child, Teachers, and School. The parents were very eager to help their children, teachers, and schools. They believed that they must play a role to support their children’s learning, and it helps their children’s development as well as the teachers’ understanding of their children. Nora, mother of 15-year-old Brad with autism, explained why she participated in Brad’s education:

I’ve got to help them out, but the thing is that these teachers aren’t trained in special needs. They’re not specifically trained in autism. They’ve got kids that all over the board, so you need the parent to come in and say, ‘this is what my child’s like. That is what I help you out. This is what we want.’ (Interview #3)

Tara, mother of 12-year-old Alex with Down syndrome, shared information with the teachers to help them understand Alex’s disability:
I think it is important for the gym [PE] teacher to have high expectations of Alex, understand what Down syndrome is, understand he has low muscle tone, and understand he won’t be able to do everything that the other kids are doing. I thought it was important to communicate all that up front. I even gave a book to the regular education teacher about Down syndrome being mainstreamed into the classroom. (Interview #1)

Several parents even organized educational programs for their children to extend their learning at home. The scope of educational programs was varied, including therapy, tutoring, life and leisure skills, exercise training, and sport participation. Nora, mother of 15-year-old Brad with autism, explained that Brad was in a residential support program (Medicaid Waiver Program) supervised by the local county board of developmental disabilities, so she was able to hire a group of people to teach Brad at home or take him to the community for his learning:

That’s something that I just started recently as of April 1st where we have a team that comes in. I put together literally. We have individual goals that we work on for Brad everything from life skills to educational skills. Behavioral skills were just started. They will also work with him on some of physical education. (Interview #2)

According to Lori, mother of 13-year-old Iris with autism, a home program was also provided:

We’re currently doing a home program. We used applied verbal behavior to teach her a lot [functional skills]. When she got older, we decided to try natural environment teaching using applied behavior analysis, which was what we have been using the whole time but then we saw she might not talk so we started teaching her sign. She has a little hand held computer that she can talk with…part of what we have done over the years is to try to help her [because] socially she’s pretty immature and socially deficit….We have Medicaid waiver for her and that provides funding to help with her home maker personal care…. (Interview #1)
Dena’s son, Chad, a 10-year-old boy with Down syndrome, was also in a residential support program managed by the local county board, so he had several home service providers to help him with additional educational learning opportunities (e.g., academic subject tutoring, shopping and community activities, Special Olympics). The parents seemed to be actively engaged in seeking out learning opportunities for their children at home.

In order to support their children actively, the parents either volunteered to help out both teachers and their children in the school (e.g., PE activities in classroom or School Field Events) or in organized home programs to supplement the education that their children were getting from the school. Elle, mother of 8-year-old Matt with Down syndrome, stated that she was a classroom assistant while Matt was in kindergarten and 1st grade:

I spent time in the classroom volunteering every other week for a couple of hours, helping with the academic work they do in ‘centers’. That’s when they have four different tables set-up. One is a math activity and one is a reading activity, and then one’s usually a game and one might be a silent reading or something like that. The kids cycled through those, and often parents go in and help out with one of the centers, so I’d do that for a couple of hours. (Interview #2)

Dena, mother of 10-year-old Chad with Down syndrome, also stated that she often volunteered in Chad’s school whenever she had time to go:

I volunteered…at the beginning of the year, they[School] sent out a list of all the activities that are going on or fundraisers and then asked for volunteers, and you sign up for whatever areas you’d like to volunteer. They give you all the dates, which was nice, that all these activities that are going to take place, so you can go through your calendar and see when you’re going to be available and see what you want and when you’re available to volunteer for, so that’s what I just basically do any type
of, anything that involves my kids or fundraising for the school. They have like a climbing wall, which I wasn’t able to do this year just because of the dates and certain situations, other than that like maybe field trip or two. I might sign him to go on, but basically I don’t. They don’t ask you to be in the classroom like for regular physical education or even adapted PE unless they need help from parents....I did last year volunteer for the climbing wall in his school. They have zip lining, climbing wall and I volunteered. I was in regular PE class. It’s Daniel elementary school. This past school year I did volunteer for that just because I knew he asked me to be there, so I was. (Interview #2)

Tara, mother of 12-year-old Alex with Down syndrome, also stated that she participated in a fun day event for 5th graders this year and volunteered at the school:

He was 5th grade this year, and I volunteered for the 5th grade fun day. That was over at Sports Ohio, and they did volleyball, kickball, dodge ball, so I spent a whole day doing a type of thing for the class parties. I always tried to go to those and take a vacation day or a part of day-off to go. I’ve gone into help in the classroom in different things. The gym teachers were always looking for volunteers for the Super game (Interview #1)

Abby, mother of 17-year-old Dale with Asperger’s syndrome often went to school and assisted in games and activities played during a field day:

To physical education, I wasn’t involved in a lot. The only thing I can think of is as far as myself being involved would be like during the field days, which was only once a year at the end of the year, that I would volunteer and again now that would just be helping run certain games for the PE teacher but not really working directly with the kids or Dale. (Interview #3)

According to Lori, mother of 13-year-old Iris with Autism, the biggest concern for Iris in school was her interaction with teachers and her peers without disabilities because she was nonverbal. Her inability to speak often created inappropriate behavioral issues, such as screaming and hurting herself. Lori found that the teacher had a difficult time in managing
Iris’s inappropriate behaviors in schools due to her inability to communicate with teachers.

Lori expressed that she needed to go to school and support the teachers in dealing with her inappropriate behavioral issues:

When we first move, I would go to school a lot. I would write out what signs she had or what she was doing at her former school and how. I could either stand there or go in myself helping them. When she’s frustrated, you can’t figure out what’s wrong with her because she’s having inability to speak, so it’s hard when you’re new. You’re not used to her so just going in helping, supporting them….I just went in, and they were always seemed very receptive to me being in there and observing what she was doing, and I would just go in and observe and ask if I could do help them with….If it’s a new teacher, I’d usually like to go because it’s hard she doesn’t have a vocal language so she can’t express herself. If she’s getting mad, you got to be able to try to figure out ‘why is she getting mad? Why is she doing the things she’s doing in,’ so I think that for her, for them, for their comfort, for them to be really comfortable working with her. I felt like it was important for me to go and help to try figuring out some other things because she doesn’t have vocal language. (Interview #3)

In addition to providing direct assistance in classes, the parents also played a role at the organizational level, such as being a member of the parent-teacher organization or an advocacy group for special needs children within the school or school district.

Elle, mother of 8-year-old Matt with Down syndrome, said that she volunteered a lot in school when her two boys were in the same school (i.e. elementary school). She was a member in the parent-teacher organization (PTO) and just wanted to help them in whatever they needed from the parents:

I don’t do a whole lot right now. I don’t hold a formal position. In the past, I was the chair person for the school directory that comes out every year with all the phone numbers in it. I did that for three years, and I volunteer for the book fairs in fall and spring. Since I’ve got my boys at two different schools, I tried to do that at both schools, but I’m not always able to do other things. There are little things like the Election Day bake sale and
other little fundraisers for the school. I don’t want to take on a big role in the PTO right now. (Interview #3)

Abby, mother of 17-year-old Dale with Asperger’s syndrome, was an active member in supporting all parties not only of her child but also teachers, administrators, other students, and even other families:

As far as the high school level, I volunteered…they [school] have staff meetings after school so helping with the food, giving the teachers snack and being there help serving. You automatically have teachers come up and say, ‘Hey, Dale’s doing a great job in this class’ or ‘we’ve really seen a lot of growth in this area’ so just being around the school and then also I love to bake and cook. Dale’s freshman year, once a month, we would have luncheon where they would have social skills, so I would go in and provide food for their luncheon for a group of kids, and they were worked on social skills, so there again gave me the opportunity to observe some of the interactions and talk to the teacher. I’m also on a committee for at the high school of the PTO. They call it ‘sunshine’. It can be a birthday helping celebrate birthdays, or if there’s a tragedy on death in the family for one of the teachers… providing food for that. I’m also on a committee for the [school] district. It’s a parent committee that we’ve started for special education. It includes administrators, parents, teachers, anyone within the school system can be involved but again it’s just a positive advocacy group between parents and administration pretty much to work together….We put on summer fair this year and brought in organizations, camps, and different therapy groups that they could set up the booth, and then we gave information out. We invited parents from, actually several different school districts, came out, and we’re able to get information about special programs supporting their kids for the summer. We helped parent education nights between the administration and parents of saying “okay, Northwest City has this program for peer collaboration, and this is what it means, this is how we’ll provide that service” So a lot of that is just educating the parents in the district. That’s been very positive. I’m the treasure in that group, so we’ve working on that for several years. (Interview #1)
Keeping My Child Active. The parents all recognized the importance of participation in physical activity programs in their children’s lives in terms of promoting their children’s overall development, such as physical skill development, healthy bodies, and socialization. Furthermore, they highlighted that their children needed to have daily participation in physical activity programs to reduce secondary health risks of obesity and to improve their physical fitness. All the children have participated in a variety of programs, such as Special Olympics, local community sport league, after school activities joining sport team, and the parents even created family recreational physical activities for their children. Parental involvement in physical activity programs was more active and direct than school physical education program.

Lori and Nate, parents of 13-year-old Iris with autism, were intensely concerned about Iris’s overall health. They felt that children with autism had a higher chance of becoming obese, so they wanted Iris to be physically active. Iris participated in various physical activity programs:

I think physical education is really important because I think kids with disabilities become adults with disabilities who are not healthy. If she eats well and exercises regularly, which I think she will maintain her overall well-being. We’re big proponents to that [physical activities] because the research has shown a lot of children, adults with autism are overweight, and that’s one of my biggest fears, so I want her to be healthy. I think physical exercises are hugely important, especially for children with disabilities, because they have a tendency to watch a lot of TV, and they have a tendency to get overweight….That’s [PA] a part of her living skill. She works out almost every day except for Saturday and Sunday. (Interview #2)

Tara, mother of 12-year-old Alex with Down syndrome, also was concerned about Alex’s health because of his disability. She said,
We’ve always tried to get him involved in as many activities as possible. Just because kids with Down syndrome, especially, he has shorter stature and tends to get heavier if they have the lack of physical activities. Even though his stamina isn’t as great as a typical child, we’re happy if he tries his best to each activity and gets some little activity out of there. We were happy with that. (Interview #1)

Elle, mother of 8-year-old Matt with Down syndrome, also had concerns about his physical health and the role of physical education program for him:

I think physical education is very important. Because of his diagnosis, he’s always going to struggle with issues of strength and endurance, and that’s going to affect everything about him. I noticed at the end of last school year when he had to build up to the level of endurance. He was much more capable of keeping up with his peers on the playground, playing with kids after school, and attending things outside of school like the bike camp. I feel like the more confidence he gets at school, the more he’s able to do things in the gym class. The better it is for him, the more likely it is for him to carry over the skills that he learns in gym and also the confidence that he gets into his day-to-day activities. (Interview #1)

She further explained:

I feel like physical education is so important to maintain endurance and stamina in order to be successful in every other area of school. This year I don’t know if he’ll be getting what he needs to maintain endurance and stamina, but it helps him meet his goals whereas for other kids, it’s fun and to stay healthy, and obviously that drives a lot of who you are as a person and how you form in school, but for him, it’s almost more vitally important because he’s going to have many more health issues due to his genetic make-up. He’s more prone to become overweight because of his low muscle tone, so I feel like he could have physical education five days a week, and I would be really happy. (Interview #2)

Sara, mother of 10-year-old Jade with developmental delay, spoke of the benefits of physical activities for children with disabilities:
It’s important for the children to be active, just number one physical exercise. Also it works self-confidence, development of working with others cooperating on a team, putting for their best efforts, and learning good sportsmanship. A lot of their friends are involved, so it’s definitely a very social matter, not just for the kids, it’s for the parents. I’m teased my husband because he likes to go to the practices because he’s out socializing with all the dads. Some are the moms there too, but the parents are always at the practice all the time. The kids are practicing that parents are all lined up here, so it’s a lot of social interaction too, and that’s just where we are with our lives. (Interview #3)

In addition, she believed that the physical education program was primarily for Jade to develop her motor skills, coordination, and social skills:

It’s very important that she’s involved. I mean it is coordination and muscle development. It [physical activity] really teaches you to interact with the people and helps you coordinate. It’s hand-eye coordination. It’s multi-tasking. It’s just so many things that I don’t even know that I could list them all. They need to be active because it’s healthy for them but again it’s so much more. It’s the interaction. Jade’s playing but she’s also learning in a certain aspect. Riding a bike is a huge self-esteem, balance, hand-eye coordination and spatial. (Interview #2)

Dena, mother of 10-year-old Chad with Down syndrome, also mentioned the importance of socialization as well as his physical health:

I just feel that it’s important because they need a lot of socialization with other peers. I like to keep him active. He does have a high risk for hyperthyroidism so he gains weight. I mean he gained 20 pounds from his 9-year-old check-up to his 10-year-old check-up. Even though he’s grown, it’s not at the same rate. I mean he didn’t grow enough to justify 20 pounds, so I just want to keep him to be healthy. I feel like the physical activity keeps him to be going, keeps him to be healthy, and keeps him to be involved with the other kids and the community. I think it’s really important. It is coordination, health, and socialization. (Interview #2)
Nora, mother of 15-year-old Brad with autism, also spoke about the benefits of physical activity. She perceived that engaging in various sport activities was a way of developing physical fitness and increasing socialization:

I don’t expect him to be an athlete or suddenly go to the Olympics. I want him to enjoy athletics and be able to participate with other kids in those, and I think that physical fitness is extremely important to everyone. I think that the older he gets, if he picks up that tool to work it out, I think it helps him focus a lot better. I just think it’s an asset for him to be…He’s a skinny kid. I’m constantly trying to put weight on him, and that helps well. (Interview #2)

Because the parents all perceived physical activity as one of avenues for promoting their children’s development in the aspects of socialization and physical health, all of their children had participated in various physical activities and sport programs (e.g., Special Olympics, local community sport league, after school sport programs). According to Nate, father of 13-year-old Iris with autism, they sought out programs for Iris and helped her engage in various physical activity programs throughout the year:

We’re always looking for opportunities for her to do something to keep herself in physical shape. There’s cross country. There’s a track. Cross country has been a really good program for her. Either one of us or one of our provider tried to run with her few times a week just to keep her in shape. Soccer, we put her in a soccer program so that she has the physical exercise. In the winter, provider will take her to the recreational center and run the tracks, run the treadmill or something like that on a regular basis. (Interview #2)

Lori, mother of 13-year-old Iris with autism, provided photos taken during a cross-country competition and also spoke more about the programs:
Cross-country is through school. It’s absolutely wonderful. Last year when cross-country came up, I contacted the coach, and I said, “If Iris were supported, would you be willing to have her in your team?”, and she was totally receptive, so the school supports her, and I send her provider, Medicaid provider. Last year was kind of our year to try to figure it out and see if Iris would enjoy running and try to get her physically active. The coolest thing is that to watch the kids cheer her on and be interactive with her, and it’s really gotten them more comfortable with her running cross-country, so it’s been great…..They run about 2 miles that’s the meet. It’s very cool. She’s really doing well. We’re very pleased. (Interview #1)

Figure 4.5. Iris in Cross-country School Competition

Lori also stated that Iris had participated in various activities, such as kayaking, skiing, skating, and swimming in the community.
Nora, mother of 15-year-old Brad with autism, talked about both integrated and segregated sport programs where Brad participated:

I got him involved in Special Olympics, Swimming. About 2003, that would’ve made him 11, and he started a swimming program. He already knew how to swim, but it’s literally an hour, two days a week for about four months out of the year where they swam back and forth and then have competitions. Everybody gets a medal. It’s really been great for both him and me socially as well as physically. He still has struggled, is challenged with moving both some of the limbs in different times. If there were underwater swimming contest, he would come in first. He’s great under water swim. He’s very strong swimmer, but when you tried to put the arms and legs kicking together, it’s challenging for him. And then we progressed the last two years. The coach over there is another huge support. I know that this is all about including children, and I think it’s so important they’re included socially. From there, over the last five years, he’s slowly progressed into swimming, track, power-lifting. (Interview #1)
Nora felt that she was not different from anybody else when she watched Brad’s performance in sport and physical activities: “We’re doing the track. We’re doing all these different [activities] we know. We’ve slowly progressed to the more, more into activities. It just really feels normal. It’s great to see him progressing and accomplishing things.” Dena, mother of 10-year-old Chad with Down syndrome, stressed the importance of Chad being included in inclusive sport programs in that the programs provide the opportunity for him to recognize what his peers do:

I felt it was important for him to be included in typical leagues and to know what he should be doing and to have good role models and peer models. Special Olympics is great, but there are such a variety of ages in Special Olympics. Chad’s not just competing with a 10-year-old. He’s competing with 13 years old in those categories….I just feel it was really important to have him included with the typical kids because I mean he loved it. (Interview #1)

She further described his sport experiences with photos taken in his competition.

This is his basketball. He was in the Nazarene Church Basketball league. It’s through in Jackson City. That’s sponsored in every year, and this is a really good league. They teach him not only basketball aspects but things that skills of good sports for like contacting things like that. This is another [one] where he’s shooting the basket in the same league. (Interview #2)
Figure 4.7. Chad’s in Nazarene Basketball Team 1

Figure 4.8. Chad’s in Nazarene Basketball Team 2
Tara, mother of 12-year-old Alex with Down syndrome, explained that Alex participated in various sport activities, such as kayaking, water skiing, dance, soccer, baseball, swimming, and summer camp in an inclusive setting. She believed that it was not only beneficial to Alex but also to the community, other families, and his peers without disabilities to see how children with disabilities do.

Since he was age five…four he wasn’t even five, we were interested in and tried him to be exposed to all sports. We had him on a soccer team even before five. I think it was Top Soccer, kids with special needs, and then baseball we put him in the regular for a couple of years…the season was so long, and he hated to going out to the outfield, only wanted to bat…We’ve always wanted him to be involved because it’s his peers that he’s in school with, and it’s important for the community to see the kids with special needs will be participating in the typical kids activity, so I think it’s not only good for the kids but for the parents. There are some parents that are probably in any city that there are some parents that are very ignorant. So I think the more he’s out in the community, the better it is for everyone. (Interview #1)

Figure 4.9. Alex played in the community basketball league
Lori also asserted that physical activity was a powerful medium for both community empathy on children with developmental disabilities and Iris's development in social skills and physical fitness:

...having her on cross-country was not only helped her with exercising and keeping fit, but it’s also, I think, it’s helped the typically developing children as well to see that teaching tolerance that not all children, all people are the same, and helping them to realize that the world was made up of all different types of people, and that’s pretty much why we’ve always done the things that we’ve done with Iris. (Interview #1)

Abby, mother of 17-year-old Dale with Asperger’s syndrome encouraged Dale to do exercise on a daily basis to stay healthy. “Now during the summer, he’s gotten up pretty much every morning or every other morning and he likes to walk on the treadmill.”

Elle, mother of 8-year-old Matt with Down syndrome, walked with Matt to the school to give him an opportunity to exercise.

But this year I’ve committed to walking him to school. It’s about a mile from our house to the elementary school. We’ve been parking about a half way and walking the other half, so he’s getting in that a little bit of exercise first thing in the morning, and my goal is to park a little closer to home each week and walk a little further. (Interview #1)

In addition, the parents also exposed their children to social activity programs and family recreational activities as a way of facilitating their level of physical activity participation. Abby, mother of 17-year-old Dale with Asperger’s syndrome described social activities that she exposed Dale to. Dale engaged in different types of social activities, such as having a picnic at home with his friends, joining the boy scouts, and doing outdoor activities:
We hosted one picnic here [at home] in the summer. [When he was in the middle school] I got to meet some of the parents of children with disabilities and some typical parents. We were able to help set up other social events for kids, just hosting in, have people in our home. It was good…I think for the kids that they could see that Dale had a lot of skills and talents that maybe didn’t come out at school. He had a lot of typical ideas and things, so it was just good to have kids in a different environment so that Dale could interact with them, and then they could interact with Dale like most typical teenagers. We played games…volleyball…. (Interview #2) His biggest activity was his boy scouts. He’s very involved in that. That’s at least once a week he has a meeting, and they have games and activities, and then once a month they have camp out. They go out hiking, and he’s got a 20 mile hike. (Interview #1)

Tara, mother of 12-year-old Alex with Down syndrome, also spoke about their family activities, such as playing basketball and riding bikes:

We have [a] basketball [net] in our basement. The kids were always doing that and playing soccer in the basement….for the bike Camp, we were really hoping to get and have him to ride the bike because we take a lot of bike rides as a family. (Interview #1)

She also shared one of her family pictures showing that they played basketball as a family activity.
Dena, mother of 10-year-old Chad with Down syndrome, also explained that she created social activities for her children to give them an opportunity to keep them active and enjoy their time:

That [sport activities] kind of consumes our day so we tried to get all of our studies done like the first part of day and then I let him either relax or have like I’m inviting a couple of John’s friends over. I invited them over and his little brother, his mom’s coming over, and they’re going to spend the afternoon here with my boys. I tried to have not only typical kids come over but there other special needs families that I contact with constantly. Once everybody’s vacation is over with, and then we typically try to do it at least once a week or once every other week, and then of course, I try to have other kids come over to play with them just to get the involvement of him with other typical peers to get him a good role model. We try to have kids over to the house and go to other people’s houses. It’s just keeping them involved and active, just to have peer models for him. (Interview #1)
According to Elle, mother of 8-year-old Matt with Down syndrome, engaging in physical activities were a part of their life. She shared her experiences with photos taken in different physical activity context:

We do family bike rides and we walk around the community a lot. My husband skis so he and both boys are out skiing a lot. We always are doing something. In the winter, we go ice skating or we go for a hike down at Hocking Hills. Every summer we go to New Hampshire, and we climb. I guess we do a lot of outdoor stuff. We try to swim a lot. We always get memberships to the pool in the summer. We run. My husband and I both run not very regularly, but we try. Matt likes to go sometimes to track and run together, but Mike is not too interested in doing that. I think they [physical activities] are very important. I think they are a way for us to relax together, to be together in a low stress setting where we can have conversations that we maybe wouldn't have otherwise. I think it's been really good for both the boys to see that we value it, and Jim and I feel it's important to be out doing stuff, so they think that something that stays with you through your life. (Interview #2)

Figure 4.11. Matt participating in activities with his father
I think in this one, ice skating with Dad, and I think he was about 5 years old or maybe a little bit younger, and that was I think the first time we got him up on ice skates. He spent most of the time on the ground, but he had a great time getting all wet and sloppy, and that was just a family activity. Skiing, it was just a family activity. We’ve had these little short skies that are called blazes, and we got Matt on those. This is my husband in the background. He would put his pole out in front. Matt would hold onto the pole. In this picture, they’re going down together, and he loved that. Since then, he’s been skiing several times. Just recently last winter, he went out with The Adaptive Adventure Sports Coalition. (Interview #3)

![Family Summer Vacation (Matt, 8 years old)](image)

This is from this summer. We went to the white mountains of New Hampshire and climbed Mountain Pemigewasset…This was a little over 2000 foot mountain, and he climbed all but probably 200 yards of it that he rode up on my husband’s back. Then he climbed down almost the whole way, probably all but a quarter of mile right at the end. (Interview #3)
Lori, mother of 13-year-old Iris with autism, also felt that Iris’s skill development in sports lets them enjoy leisure activities together as a family:

I think it’s important for parents to know that, in addition to helping the child, and it helps the family too because we can go on family bike ride. I mean we never thought we’d be able to go in family bike ride. I mean we went to New Hampshire one year, and we wanted to bike up there. This is before she could stop. We were terrified to doing it, so we wouldn’t take her unless we had a tandem bike because we were afraid she would go off the side or something, but I think that for all parents to know that it is liberating for her to be able to ride a bike. It is wonderful for our whole family because that is something our whole family gets to do together. (Interview #2)
“I don’t talk to him [GPE teacher] frequently, but he’s very open….I’m certainly more than welcome to come to any of the classes or discuss any issues with him. The need just hasn’t been there, so I would say it’s a positive relationship, but it’s not an active one.”

Sara, mother of 10- year- old girl, Jade with developmental delay

**Positive but Superficial Relationship**

The last theme, *Positive but Superficial Relationship*, captured the contradiction between parents’ beliefs and their behaviors interacting with the GPE teachers. All parents believed that having a relationship with teachers is the most powerful job to do to facilitate their children's learning and development. They believed that they must collaborate with teachers in order to support their children's participation in school and learning development. Moreover, they all asserted that they had a positive relationship with the GPE teachers. However, limited interactions with GPE teachers were actualized in parents’ experience, and they frequently communicated with other educational professionals, such as classroom teachers, special education teachers, and/or adapted physical education teachers. Although the parents valued parent-teacher collaboration highly with regard to their children’s education, they did not consider it to be needed with the GPE teachers.

**Working as a Team.** The parents perceived that they had a specific knowledge of their children and that they should share that knowledge with schools and teachers in order to promote their children's development. Also, they desired to know what activities
their children learned in physical education at school and how they performed in class.

The significance of collaboration between parents and teachers was interpreted by the parents in terms of maximizing their children’s learning outcomes. Nate, father of 13-year-old Iris with autism, spoke of home and school collaboration. He explained that they were often asked by the school how their child was instructed at home:

I know, on the sixth grade, when they were struggling a little bit in school, they would say, “well how can we work with her in these things?” We actually, in some cases, sent materials from home and said, “This is what we’ve been doing if you want to borrow from us a little bit or use that as a guideline to create an approach and hopefully that was helpful too.” We’re not in the business of telling them how to run their school because they’re the educators, and we’re parents. So we have different areas of expertise but when you combine that two, I think you can get very good results. We tried to fit into each other like cooperative….It’s [IEP meeting] very cooperative and collaborative. We usually had some discussions ahead of time as what we expect. If we have concerns, we contact the special education coordinator so when we need for the meeting is more or less a matter of formalizing what we’ve already talked about most of the time. We can talk about some of the details about what we want to write her goals and things, but it’s pretty constructive. We always tried to be like we’re on the same side. If we disagree about something, it’s because we’re both trying to get the same results, but we have a difference of opinion on how to get there. Usually that could be worked out, sometimes compromised, or one side convinces the other that you should try this way at first. (Interview #3)

Tara, mother of 12-year-old Alex with Down syndrome, also stated that she shared information to assist the teachers so that her child would benefit in learning:

I even gave a book to the regular education teachers about the Down syndrome being mainstreamed into the classroom. I wish it wasn’t that large book, but I highlighted certain things, and I came up with the overview of certain chapters and pages to look at. They could focus on the important things that I listed out, but I think it’s just very important to try and explain. I would give him a sheet all about Alex, just anything I could think about that would help with the teacher. There were a couple
times I emailed the gym teacher. “Alex had an ear ache. He has tubes in his ear, and there’s drainage. He’s on antibiotics ear drops. Don’t be alarmed.” So I would just send it to whomever I felt it needed to be on that list. (Interview #1)

Abby, mother of 17-year-old Dale with Asperger’s syndrome, even highlighted the importance of collaboration among team members:

I would say ‘very good’. [Relationship with school] Again, I’ve always taken the position that I’m a part of the team. I know Dale better than the teachers; however, they know their subject area better than I do. So we have to work as a team and communicate back and forth so that Dale benefits from their specialty of understanding whether it’s PE or Math or Geography. and also bring to the school system what other people are doing outside, therapies to work, to make sure that everybody’s on the same page so that we’re all working together to benefit Dale. (Interview #1)

In order to collaborate with the other team members for their children’s education, the parents considered communication as the most critical ingredient. The teachers would get a better understanding of the children and be able to plan instructions appropriately by utilizing different ways of communication (e.g., phone, email, face-to-face) on a regular basis. In the meantime, parents can get a better understanding of the programs and their children’s progress. Abby, mother of 17-year-old Dale with Asperger’s syndrome spoke about the role of communication in relation to supporting her child’s education:

Communication is a key and is trying to understand their point of view and trying to help them understand that. If I make the suggestion, I’m not telling them how to do their job, but we need to work as a team because I know things of Dale that they don’t know, and they know things from their perspectives as far as whether they’re PE teacher or APE teacher…teachers that I need to learn. We could all learn together and then Dale and we all benefit, but especially Dale. (Interview #2)
Tara, mother of 12-year-old Alex with Down syndrome, explained that she tried to communicate with the GPE teacher as much as she could. Tara also wanted to keep the line of communication open with the GPE teacher since she cannot be there at school all the time. Email was the primary means of communication used with the GPE teacher:

I gave them ideas. Alex has a heart monitor that he gets every year. He has to wear for 24 hours so I tell the gym teacher: “He’s going to have one in gym class”, just gives him heads-up, and communicate as much as possible....(Interview #1) The only thing I talked to him about when school starts is that “if there’s any issue, I need to get your email right away. I don’t want to wait till a week later.” Not that I’m anticipating issues, but in the beginning, it’s a huge transition, and then they kind of put me at ease. There are two gym teachers there [in middle school]. They would keep the lines of communication open, and that’s my biggest expectation. I’m really big on communicating as far as how his day went. Now in elementary, we did a communication log book. In middle school, I don’t think that they get to. I think they don’t have time for one, but the intervention specialist said she will email me. It’s just the highlights I want to know. I don’t want to know always bad things. It’s good things too or little things like he needs to bring something special for the next day. “If there’s something that I need to know about, just let me know, and we’ll get it worked out together.” They’ll get it addressed, and he’ll have a good year. (Interview #3)

Sara, mother of 10-year-old Jade with developmental delay, believed that constant and regular communication among the members would help enhance her child’s learning so that Jade can develop her skills properly:

I think consistency is absolutely critical. If she doesn’t get the concept in the first place, she’s not going to get it. The people try to explain it to her in five different ways. That’s just going to make the situation worse so that’s another reason why I think it’s really important for us actually to sit down together but to make sure. If something is being introduced, those people are communicating with the classroom teacher. In the classroom, teacher is using the same language, and then teacher comes back to us and uses the same. The special education teacher uses the same language,
but again, it’s just very important that we’re using the same language. If we don’t sit down together and if we don’t talk, it’s never going to work. I think that’s one other reason why Jade has been so successful because we really tried to focus on having a coherent approach to her. (Interview #1)

Nate, father of 13-year-old Iris with autisms also valued communication between teachers and parents:

That’s vital [communication]. I mean you don’t go a week without talking to one of her teachers or her aides. I mean we were almost every day. I mean not quite every day but very frequent contact just to email, and it’s a two-way communication to make sure that we’re all stayed preparing and proceeding to the right direction. It’s an open channel. It’s not just show up every six months to the teacher’s meeting like you might get away with a more typical child. (Interview # 3)

Although the parents asserted that regular communication with teachers is important to their children’s education, they had less interaction with the GPE teachers compared to other school personnel and yet they felt that they were always welcomed by the GPE teacher and communicated with them easily. According to Abby, mother of 17-year-old Dale with Asperger’s syndrome, she always felt that she was respected and welcomed by the teachers.

I would say that I felt listened whether it was an IEP meeting or just communicating with Dale for saying medication to watch out for side effects or whatever. I was respected as Dale’s mom that I did have information that they needed, and then I felt welcomed by the school to come in and observe or to help. Again I felt like I needed to listen to them because, of course, they had rules and things that they needed to go by, so I need to respect that. In turn, they respected my ideas, and they knew that I was there to help Dale and help them understand situations, and some of the people we had worked with had never had someone like Dale, which they might’ve been someone with autism, but he was totally different from Dale….now there’s always been children with autism

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before him, but you’re seeing so many more diagnosis. Some of the teachers had not experienced someone with autism before, so I felt that they respected my opinion and my knowledge of autism if they didn’t have it. (Interview #2)

Nora, mother of 16-year-old Brad with Autism, said that she had a positive interaction with the GPE teacher and felt supported by the GPE teacher:

The regular PE teachers have always been very kind and very supportive, but I always was in more contact with the APE teacher than the regular PE teacher, not because I never communicated with but I had other resources that I was using to make sure that he was getting kind of physical fitness that he needed….In elementary school, they even turned the bell, the buzzer off in the gym room. The gym teacher was so kind. He would come up and talk to me about it. He said, ‘we turned bell off. Do you want us to do anything else?’ (Interview #1)

Tara, mother of 12-year-old Alex with Down syndrome, also felt that she was respected by the school personnel throughout the whole school years in elementary school:

I feel like the teachers all respected me. The intervention specialist this year had been in a meeting. They’ve met with a lot of teachers in Bethel Elementary School, and someone even say…apparently someone there said, “If I were a kid with special needs, I would want Alex’s mom to be my parent.” So that was good. (Interview #2)

Tara also expressed the value of interacting with the GPE teacher:

I think it is important. I wanted teachers to have high expectations of Alex but yet understand what Down syndrome is, understand he has low muscle tone, understand he won’t be able to do everything that the other kids are doing. I thought it was important to communicate all that up front. (Interview #1)

She believed that she had a positive relationship with the GPE teacher. If she inquired about Alex’s performance or participation, she always received responses from the GPE
teacher: “If I ask for something, she’d always respond. She was to send a schedule like
Monthly newsletter that kind of gave us a synopsis what they’ve worked on that month
which is very helpful.” (Interview #1)

There wasn’t a lot of detail to talk about. If there were then, I’m sure she
would’ve emailed me because she email me real quick and say, ‘*Alex did a
great job and this or that or maybe about what color his team is supposed to wear*’.
(Interview #2)

Lori, mother of 13-year-old Iris with Autism, also held the view that her relationships
with the school and teachers were good in general:

I have a good relationship with them. I think that I’m a parent who knows
the rights of my child as the child with the disability, but I’m reasonable
in my expectation to the school. They seem receptive to listening to me,
and there are times that they say yes and times that they say no. That’s
rare. They were pretty much opened to almost anything that I’ve
requested. (Interview #2)

However, her relationship with GPE teachers was not close:

At the elementary level, I wouldn’t say I have a very close relationship
with the PE, the regular PE person, but the APE person, I’ve always had a
good relationship with, a close relationship, talking all the time about
what we want to work on. Of course, those people were always in the IEP
too. The PE teacher wasn’t. I think that, in PE, the physical education
instructor relies more on the aide than they probably should in interacting
with these kids because what ultimately our goal is for them to give Iris
the direction and the aide to make sure to follow. The PE program would
definitely not be successful without Iris having somebody in there, the
aide. When Iris first started in Middle school, I went to school during PE.
PE teachers…their involvement is really with the aid more than Iris.
(Interview #1)
Sara, mother of 10-year-old Jade with Developmental Delay, also experienced limited interaction with the GPE teacher, but she sensed that she had an open relationship with the GPE teacher.

I don’t talk to him [GPE teacher] frequently, but he’s very open. He’s focused on the children. He’s interested in what’s good for them, keeping them safe, even for the other children you have to watch them. They’re talking, goofing off; again kickball is a perfect example. They’re going to get bumped on the head with the ball. It may or may not really hurt them, but the point is that they should be paying attention and keeping them safe. I’m very comfortable with him. I mean we know who each other is. We sat down and talk. I’m certainly more than welcome to come to any of the classes or discuss any issues with him. The need just hasn’t been there, so I would say it’s a positive relationship, but it’s not an active one. If I had a concern, I would be very comfortable going to him and say, ‘I have this concern or we discover this about Jade. How can you accommodate these issues?’ Like I said, [it’s] very positive and open relationship. I would have no problem going to him. (Interview #3)

Gathering Information from Others. Although the parents spoke about their relationships with the GPE teachers as open and positive, the parents mostly received the information from others, such as classroom teachers, intervention specialists (i.e. special education teacher) and/or adapted physical education teacher because they were all involved in their children’s IEP meetings, so the parents had more opportunities to interact with them. This allowed for them to obtain the most updated information about their children, including the GPE program so the parents did not feel the need to communicate with the GPE teacher. Moreover, the parents showed more concerns with learning academics and functional skill than with the PE program.

Elle, mother of 8-year-old Matt with Down syndrome, explained that she frequently obtained information from Matt’s classroom teacher, so it was not necessary
for her to talk to the GPE teacher: “I don’t have communication with them [teacher in special subjects: PE, art, music]. Our whole relationship was kind of saying hi in a hallway when I see him, and now that’s about it.” (Interview #1)

In our case, I didn’t have any interaction with the music teacher last year either or the art teacher [Interviewer: because of academics?] I think so. I mean I think I would hear from the classroom teacher about what he was doing in the gym, so I didn’t feel like I needed to talk to the gym teacher about what he was doing in Gym. (Interview #3)

She also said the GPE teacher sometimes came to the quarterly meeting for Matt’s IEP:

We never had any communication. Sometimes I would get information through the classroom teacher who would say like I remember last year, ‘oh, Matt is really doing well with that APE goal of running the laps in Gym.’ And we did have a quarterly meeting with the IEP team. We asked for an opportunity to get together and kind of hear updates from everybody about how he’s doing. I think that the PE teacher came too, maybe two of those and gave us updates then. (Interview #1)

Dena, mother of 10-year-old Chad with Down syndrome, also felt that it was not necessary for her to talk to the GPE teacher because she did not think that there were any problems for Chad to participate in GPE class: “They’re very approachable. She’s very approachable. It’s not like you can’t talk to her. I just really had a need.” (Interview #2) Dena also talked about her experiences in East Elementary School and she felt that she did communicate with the GPE teacher because she was in school observing Chad’s performance, so she could talk to the teacher:

In East Elementary School, it was good. I knew him. He would talk to me occasionally because I was there so much. If he were walking by, he would like to just update me sometimes how well Chad did with this particular activity, or sometimes he had behavior issues there too, and they would remove him from the gym but, it was pretty good. (Interview #3)
Tara, mother of 12-year-old Alex with Down syndrome, explained that PE was often discussed in the IEP meeting, but mostly she communicated with the APE teacher directly rather than with the GPE teacher:

His IEP is always at the end of each year. They would meet and say, “Okay, Mrs. W., gym teacher, what are you going to be doing? Alex’s going to be fourth grade or fifth grade whatever. What is your curriculum look like for next year?” It’s pretty much the same, I think, every year anyways, so it’s not like she really had to think ahead of time….They always jog. He had, like the running skills, done some of the laps. They said he would do less laps, but it was good because, in the beginning, he ran real fast and tired up. Then he learned how to pace himself. Even though he was going… didn’t do many laps, he was still running the whole 10 [laps that] the other kids were running. The APE would pretty much recommend things she [APE specialist] thought, like the skipping, and [in] basketball, the dribbling a ball that was a big one. Soccer, he was in soccer one year. We wanted him to control the ball and skills, that type of thing, so between the PE [teacher] and APE [teacher], they kind of talked. Then the APE [teacher] and I talked. (Interview #3)

According to Sara, mother of 10-year-old Jade with Developmental Delay, she obtained information from special education teacher:

…mostly with the special education teacher because she keeps in contact with the other teachers and then sometimes if I see them in the morning, which isn’t very often, we may exchange [words]. If there is something particular going on, they will send a note but, it’s not too many notes. It’s typically conversation with the special education teacher if my husband ran into someone in the afternoon when he picked up the kids. (Interview #2)

Lori, mother of 13-year-old Iris with Autism, expressed that she had a better relationship with the APE teacher than the GPE teacher because the APE teacher was in the IEP meeting and had knowledge on children with disabilities:
The APE has been good because they’ve worked on specialized skills. At the elementary level, I wouldn't say I had a very close relationship with the PE, the regular PE person. But the APE person, I’ve always had a really good relationship with, a close relationship talking all the time about what we want to work on. Of course, those people always in the IEP too. The PE teacher wasn’t. (Interview #1)

Nora, mother of 16-year-old Brad with Autism, also had close relationships with the APE teachers and special education teachers. She seemed to trust them with Brad’s education.

I’ve always looked to the APE teacher and the intervention specialist helping and guiding me through that. I mean I would talk to them and converse with them, but it wasn't like I was talking with them on a daily basis or anything like that. Maybe once every six weeks we touch base. I always, kind of, went to the intervention specialist [special education teacher] first. The lines of communication were really been there, so with the APE teacher, I developed more of relationships through the years. She's been a great communicato. She always came to Brad's IEP meeting. The APE teacher was always very involved. She told me what she thought. She was very interested in Brad. She would call me and she’s really been neat. She’s been great, so I guess I have had a relationship with her. As far as the APE teacher is concerned, I’ve been really happy with that. They’ve always communicated with me, and they’ve always really worked with him. I talked to the intervention specialist on a daily basis or at least by email. APE, every six or four weeks. (Interview #3)

Abby, mother of 17-year-old Dale with Asperger’s Syndrome stated that it was difficult for her to communicate with all teachers in different subjects when Dale was in middle and high school because there were too many teachers. Hence she frequently communicated with the intervention specialist (i.e. special education teacher) since she or he had more contact with other teachers. She also explained that she emailed the teachers if she needed to talk with them:
In elementary, it was easier because you have one teacher and when he was gotten older like middle and high school, it was more of talking with the intervention specialist. She or he would communicate with the other teachers, but there was also times when we had conferences or if we needed special conference or something, we could just email other teachers, primarily through the intervention [specialist]. (Interview #2)

She also described that she used to interact with special education teachers:

I wasn’t involved in a lot in physical education. I was working through the intervention specialist, and then she or he would work with the physical education teacher. So there wasn’t a lot of communication back and forth between myself and the physical education teacher. It more became through the intervention specialist (Interview #3)

In high school, Abby had fewer opportunities to interact with the GPE teacher. Because high school only requires students to take 2 credit hours of PE participation, her interactions with the GPE teacher occurred at the beginning of the year:

He had to have [PE] two quarters, two credits worth for the whole high school year so he has actually finished that. He did a quarter in his freshman year, and then a quarter in his sophomore year, so he’s finished with that. He can take more if he wants to or if it fits in his schedule but as far as finishing the requirement he has done that. I didn’t really communicate with him [PE teacher]. It was more just through Dale. “What were you doing? How things are going?” Also it was through the intervention specialist. It [GPE program] was every day for quarter. He had about three months, so I would say once or twice communicate directly [to GPE teacher] and again just being in the office and seeing them and say, “How’s Dale doing in PE?” but then it would come up with the intervention specialist probably once a week. I probably talk to them at the beginning just kind of went in and talked to them [about his strengths and challenges] and then again it might be once or twice during that quarter of PE. (Interview #1)

**Low Expectation toward PE Program and GPE teacher.** The parents expressed that they were more driven to support academics than the PE program. Therefore, the GPE program was seldom discussed in their children's IEP meeting. It results in the
absence of GPE teachers in the IEP meeting. In turn, the parents showed more interest in participating in extra-curricular activities (i.e. cross-country running, community sport league, Special Olympics), rather than building relationships with the GPE teachers to gain program knowledge in physical education.

Dena, mother of 10-year-old Chad with Down syndrome, showed more concern about Chad’s learning in academics and behaviors than learning in GPE program:

I was always very athletic growing up and that was my favorite part of the school year, so I’ve always considered important. For me, it was really important at growing up just because I enjoyed it so much, but I guess because my kids have special needs, so I’ve always focused more on academics because it doesn’t come as easy to them. (Interview #2)

I think they were very open if you want to go in and observe or watch or if you have a question they always welcome that. I just never had a question because I was so involved in other issues [behavioral issues].” (Interview #1)

Tara, mother of 12-year-old Alex with Down syndrome, also felt that no specific concerns were raised in the GPE program:

There really weren’t any issue so there wasn’t a lot to talk about. It was always positive. She [GPE teacher] always made it feel very comfortable in that class. That was my perception. He was a part of that class whether he had Down syndrome or not. During the acrobatic sport routine, she found certain things that he was good at. I mean that’s the key knowing the kids and knowing which group of kids to put him in certain groups of activities, and she just had nothing but praise to say. I really liked her mannerism. He’s no different to her than the other kids. (Interview #2)

Elle, mother of 8-year-old Matt with Down syndrome, also showed more concern about Matt’s academic achievement than the GPE program. “My focus last year was more on ‘is he ever going to learn how to add? How is he keeping up with his reading?’ I think the academic focus was predominant.” (Interview #3)
Even though the GPE teacher was the primary teacher in their children’s PE programs, the parents mostly relied on the APE teacher or special education teacher. They tend to contact them first if they have any matters about their children’s learning.

Dena, mother of 10-year-old Chad with Down syndrome, held higher expectations toward the APE teacher:

I don’t really think I have much more expectation from the regular physical education teacher, but the APE teacher, I would expect more since it is in his IEP. I would expect more communication and quarterly reports on what she’s working on with him and his progress. I just never had questions because I was so involved in other issues so I never really asked any question but they’re very open about you’re coming in and asking questions or if you call them, returning your call. (Interview #3)

Lori, mother of 13-year-old Iris with Autism, expressed that she relied more on the APE teacher than the GPE teacher:

I don’t know how much experience they [GPE teachers] have with children with disabilities. I tried to be reasonable in my expectation of the regular physical education teacher because I don’t think they’ve had much training in working with these kids. I can’t really say that I’ve had a bad experience, but they’re relying more on an aid, and then the APE has been good because they’ve worked on specialized skills. (Interview #1)

I don’t really have any expectation from the GPE teacher because there are so many kids in there. Basically in her IEP, I have written that she needs to get 30 minutes of exercise per day, so I just want them to make sure that she gets it. As far as PE teacher, it depends if he has 16 kids, I think my expectation would be higher, but it’s 47 kids. I think that pretty reasonable in my expectation of that. (Interview #3)

The physical education teacher has 47 kids [in class], and Iris gets lost in a rush there because he doesn’t have a time to spend teaching her how to play football or table tennis, so I relied on a lot on the person who is assisting her and also the person who provides the APE. Now the APE could only be once a week, so she’s not always there, but at least she’s providing some support. (Interview #3)
Nora, mother of 16-year-old Brad with Autism, also asserted that she expected more from the APE teacher than the GPE teacher: “I don't have that expectation from the regular PE teachers, especially I feel like they’re there to teach all the kids. They have a certain level they’re supposed to be teaching.” (Interview #1) She even said that the APE teacher had to be in GPE classes to modify activities for her child. She wanted him to be supported by the APE teacher in GPE class:

I don't think it's fair to expect them to be modifying. I mean maybe it sounds terrible. I just feel that’s what the APE teachers for and help them out with that. I think they should have somebody in there to help them out with that. (Interview #1)

Nora also highlighted the importance of teachers’ training. She thought that the GPE teacher should be supported by the school, such as getting appropriate training for teaching children with disabilities and having supportive personnel in class:

I think they [GPE teacher] should be trained how to work with these kids. I think they should be held accountable. For high school, I’m hoping that the PE teacher again is accepting Brad and understanding his needs. I also hope that he has the support, and they put actually APE teacher or aid in there [class] they can work with Brad. I expect for the school system to make sure that he’s got the support that he needs to be able to compete or to participate in the programs. I expect to have APE teacher in there….I expect more from the administration to support him. The administration needs to make sure that the APE and the intervention specialist are supported, and they need to make sure that the PE teacher had special training classes and inclusiveness with these special needs kids. I don't expect to lay it all out on him [GPE teacher]. I’ll probably talk to him a little bit, but I’ll still more talk to APE instructor or the intervention specialist. (Interview #3)
Chapter 5: Discussion

Introduction

In this phenomenological study, the researcher explored the meaning that parents of students with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers. The stories of four mothers of elementary school children (3 boys and 1 girl) and three mothers and one father of secondary school adolescents (2 boys and 1 girl) were gathered. The findings from this research portrayed parents’ understanding and values of parental involvement in their children's physical education, their roles in the involvement of their children's educational programs and its process. In so doing, they added their voices and knowledge to the ongoing discourse on inclusive physical education. Bronfenbrenner's (1979, 1992, 2005) ecological systems theory provides a constructive guide for the interpretation of the findings of this study. This theoretical framework is an interactive and dynamic system of human development that provides a conceptual scheme of child-environmental interaction to affect development.

This chapter consists of four sections. The first section reviews and summarizes the main findings of this study as aligned with the existing literature. The second section presents Bronfenbrenner's theory with regard to the study’s key findings. The third section answers the main research questions of this study. The fourth and final section focuses on the direction of future research and certain educational implications are discussed.
Integration of Findings to the Literature

Advocacy: Facilitating and Strengthening Children’s Development

The first emergent theme, advocacy, captures the essence of parental involvement in physical education, as perceived by the parents in this study. The parents recognized their personal involvement to be their primary role and responsibility in supporting their children’s development and they also sought to increase the teachers’ understandings of their children. The findings of this study demonstrate that parents’ advocacy takes place in the environmental contexts of school, home and community (Epstein, 2001).

The first subtheme, “To ensure children’s success,” presents the parents’ perceptions of parental involvement in physical education. The findings of this study concur with previous research findings, that parents were advocates representing their children’s attributes and needs for effective learning in schools (An & Goodwin, 2007; Hilton & Henderson, 1993; McBride & Lin, 1996). These parents were involved in their children’s schools, mostly by means of communicating with teachers and observing various class or school activities. Their involvement was not only limited to communication with teachers, but also interaction with administrators by joining with different organizational groups, such as the parent-teacher association and the school special education council.

In the environmental context of the school, the parents made efforts to identify their children’s needs in order for them to learn academic content and skills, social skills and physical development in inclusive settings, since their children were unable to inform the school of their needs. The parents communicated with teachers and administrators by attending various conferences (e.g. IEP conferences, parent-teacher conferences). They enlightened teachers as to their children’s characteristics and needs, so that
appropriate programs and instruction could be provided to them. In addition to this, the parents continued monitoring school programs to determine whether or not they are appropriate for their children’s learning and development. They consistently inquired about whether the schools needed additional support from them. More specifically, the advocacy was acted upon through the parents’ participation in IEP meetings, frequent communication with teachers, observation of classes, engagement in school activities and school organization.

The parents’ actions of advocacy to facilitate their children’s learning continued at home (Bronfenbrenner, 2005; Epstein, 2001). There were two distinct activities produced in relation to advocacy. The first activity was seeking out residential support services\(^6\) from a local county, so that the parents were capable of creating educational programs at home for their children to supplement their learning and development. Further, they mentioned that they could hire someone who specialized in teaching children with developmental disabilities, such as reading tutors, sport instructors, special educators and behavioral analysts. This experience explains how these parents sought resources in a broader context beyond the schools and in that way functioned within the exosystem (Bronfenbrener, 1992, 2005). For example, parents in this study took advantage of a Medicaid Waiver Program, which is a legal service offered by the state department of developmental disabilities (DODD). Through this service, as in this study, children with developmental disabilities can continue with their learning outside of school. This experience verifies the existence of interrelations among different environmental contexts (Bronfenbrenner, 2005).

\(^6\) It is also known as Medicaid Waivers Program (www.olrs.ohio.gov/medicaid-waivers)
The second activity that the parents undertook was engaging in research about learning opportunities for their children. The parents desired their children to be able to participate in various activities offered to all children, so that their children could experience what their peers experienced. The parents usually gathered information about programs through online and social networks (i.e. parent group organizations for special needs students in schools, disability organization in communities, friends and neighborhoods). The parents were significant agents in enabling their children to be able to connect with certain environmental systems (Bronfenbrenner, 2005). The children’s development was influenced by the environmental system outside of their worlds, which Bronfenbrenner (1992, 2005) identifies it as the exosystem. Moreover, the parents were active members in the community. They all kept networking with local community organizations (e.g. Down Syndrome Association, Autism Speaks), school districts parent groups of special needs children, and schools’ special education groups.

In contrast to the findings in An and Goodwin’s (2007) study, the parents in this study did not provide direct assistance to teachers or their children in physical education classes or, actively engage with the physical education programs. However, all of them participated in physical education or activity events in the schools as volunteers if they were asked. Because the parents were all concerned about their children’s health and physical fitness, they searched out opportunities for physical activity and sports outside of the school so that their children continued improving their skills and health along with physical education in school. They were also involved in the communities, for example, advocating for greater public awareness of “disability,” “parent-professional relationships,” and “funding for students with disabilities” through the special education
parents committee in the school district and disability organizations (e.g. Buddy Walk organized by the Down Syndrome Association).

The second subtheme, “the more involved I am, the higher they set the bar,” highlights the importance of parental involvement in school. The parents discovered that teachers would have higher expectations of students’ learning if parents became more involved in the school through communicating with teachers and observing classes and attending parent-teacher conferences on a regular basis. The parents believed that their children could be more successful in school academically, socially and physically if their teachers placed higher expectations on them. The parents discovered that teachers provided higher expectations for their children’s learning when they closely monitored their children's progress and programs. Further the school performance of the children was enhanced. However, if the parents became less involved in school, then their children would begin to show some behavioral problems (e.g. increased obsessive behaviors, tantrums, inattention and aggressive behaviors) and their learning tended to regress. This experience reflects the importance of parent-teacher interaction in their children’s learning and development. It appears that regular parent-teacher interactions tend to positively influence the development of children in physical education.

Involvement: Playing Multiple Roles to Support Their Children’s Learning

*Involvement* is the second emergent theme in this study and it captures the efforts and contributions parents have made through three different environmental contexts: the home, the school and the community in support of their children's development. The parents played various roles including those of program coordinator, organizer, motivator, teacher, evaluator and therapist in their children's education in terms of
promoting their children’s learning development. This theme also uncovers why and how the parents were involved in their children’s education (Hoover-Dempsey & Sandler, 1995, 1997). According to Hoover-Demsey and Sandler (1995, 1997), parents decide to become involved in their children’s education in school when they perceive home-school collaboration as their role. In this study, the parents placed a high value on home-school collaboration in physical education. They tried to understand their children’s performances and physical education programs in school by engaging in school activities, communicating with school personnel, volunteering to assist class instructions and observing students’ performances. With regard to involvement in physical education, it was not limited to the school setting, but also extended into both home and community settings. The parents played more active roles outside the schools than in the schools creating physical activity programs at their homes and seeking sports programs in the communities to support their children’s skill development.

The first subtheme, “understanding the big picture,” reveals the ways in which the parents became involved in their children’s education in the schools. The ultimate goal was to support their children’s learning so that their children could achieve what they were supposed to. Specific to parental involvement in physical education, they used two distinct approaches: communication and observation. Consistent with previous findings in this area of inquiry (An & Goodwin, 2007; Epstein, 2001; Shepard & Rose, 1995), communication is the most common approach that the parents utilize to understand their children’s progress in school. There were two primary means of communication: (a) verbal communication (e.g. dialogue during IEP meetings, parent-teacher conferences, face-to-face weekly or quarterly meetings and telephone calls) and (b) written
communication (e.g. IEP documents, PE newsletters, communication logs and emails).

When the parents were involved, verbal exchange was the most common form of communication used. For example, the IEP meeting was a formal place where parents discussed their children’s educational programs, learning goals and objectives and educational services. However, physical education-related goals and objectives were rarely addressed in the IEP meetings, which is consistent with the findings of An and Goodwin (2007). Parents in this study tended to rely on other educators, such as special education teachers, classroom teachers, or adapted physical educators to gather information. The parents’ interactions were irregular as well as limited with the GPE teachers, possibly, or at least partly, due to these teachers’ busy schedules.

All of the participants, except for Sara, mentioned that when discussed in IEP meetings at the elementary level, the focus of physical education programming was on skill development and exercise, with respect to APE services. This was because the elementary-aged students received direct APE services, such as one-on-one, pull-out sessions or a small group instructional session. In secondary schools, the focus was to determine the types of activities and placement (e.g. physical fitness, individual sports, recreational activities, and community programs). Because the GPE teacher did not participate in the IEP meetings, the parents received information with regard to GPE programs from the adapted physical education teachers. In the case of Elle, mother of 8-year-old Matt with Down syndrome, the physical therapist developed exercise programs and provided consultation for the GPE teachers. Also, the physical therapist determined whether or not APE services were needed for Matt. This was because there was no APE specialist in the school district.
Because of the absence of GPE teachers in the IEP meetings, discussions about physical education did not go beyond program placement and goal settings. One episode shared by Elle portrayed insufficient collaboration between the parents and school officials with regard to physical education programming. More specifically, his parents and some IEP team members disagreed on APE services for Matt. The parents wanted to continue with the APE goals of building endurance and providing him with additional services during the following academic year. However, the school convinced the parents that the child achieved the goal, so the service was no longer required. The parents did not understand the consequences of eliminating the APE service for their child, but at the same time, the parents did not know how to respond to the school’s position. In the end, the APE service was eliminated from Matt’s IEP. Her experience reflected the fact that both teachers and parents had a lack of communication and understanding of the physical education program. There was no representative from PE or APE to provide program information and the necessary information about the APE services for Matt in the IEP meeting. Moreover, the GPE program was not the primary focus in the IEP meetings, even though parents all believed that physical education should be an integral part of their children’s learning. They had more interest in academic programs (parents of elementary school children) and functional living and career skills (parents of secondary school students).

Along with the parents’ active involvement in IEP meetings, they also communicated with teachers, other professionals and administrators to understand more about educational services and support in school. Because the IEP meeting is held only once a year, parents feel that more communication is needed with school personnel.
They scheduled informal meetings throughout the year to review students’ participation, progress, and the program contents. Unfortunately, students’ learning in physical education was omitted from those meetings, whereas other academic subjects and social skills (behavioral aspects in particular) were frequently discussed. This phenomenon reflects social and cultural beliefs, that the society places a higher value on students’ academic learning in school than that of physical education (i.e. macrosystem) (Bronfenbrenner, 2005).

As a written form of communication, some parents received quarterly progress reports, drawn from the IEP plans and report cards. The parents receive general and positive comments from GPE teachers about their children’s participation. However, the comments were related to the child’s behavior and there was no specific description on lesson contents or skill learning in class in the reports. In the IEP documents provided by some participants (Dena, Iris, Elle, Abby), the APE goals were stated, but the parents were not fully aware of the goals. In particular, they had little knowledge on how to evaluate these goals and as such they had limited understanding or knowledge on whether or not their children achieved the educational goals set in physical education.

The second subtheme, “becoming a supporter for my child, teachers, and school,” exposes the significance of parents’ roles played in their children’s learning over time (Barge & Loges, 2003; Virgilio, 1990). Consistent with the findings of Hilton and Henderson (1993) and McBride and Lin (1996), all parents in this study said that they had to play specific roles in order to support their children’s learning. At first, the parents became volunteers at the schools to assist with their children’s educational programs, such as class instruction, school events during field day or fun-day, and non-educational
programs of organizing fundraising and book fairs and being a chaperon in field trips (Epstein, 2001). The parents often received announcements from the schools with regard to their involvement in the schools, such as volunteering in classes, fund raising activities and field events. In relation to GPE programs, the parents in this study sometimes assisted teachers in class settings (e.g. climbing wall) and volunteered to help with various activities (e.g. field day and fun day) if they were asked to do so.

The parents also supported the school by engaging in governance and advocacy for their children’s success (Epstein, 2001). All but one parent took a certain position in the PTO and/or parent committee groups of special needs children. They became part of the team in the process of decision-making for school programs and policies. Similar to the findings of An and Goodwin (2007), the parents also committed to supporting the school for increasing disability awareness and inclusion within the schools and their communities.

Lastly, parents’ support for their children continued in the home context, as well. Epstein (2001) identified a framework of six types of parental involvement. One of the types was “parenting,” which talks about parental supports for their children at home. Parents in this study showed that they closely monitored and supervised their children’s learning opportunities both at home and within their communities. For instance, three of the children with disabilities in this study were supported by local county residential support service programs for individuals with disabilities, so the parents could organize and coordinate the programs for their children. Also, all children engaged in, at least, one sports program in their communities. The parents were all involved in their children’s community sports programs and they provided transportation, as well as
emotional support and vocal participation i.e. observing games and practices, cheering their performance.

The parents also perceived physical education as a valuable subject in that it facilitated their children's development in various areas, such as personal and social skills and physical and health improvement (Bailey, 2006; Ellis, 2001). The last subtheme, “keeping my child active,” represents the engagement of parents in their children's physical activities outside of school. Consistent with the findings of previous studies (An & Goodwin, 2007; Ellis, 2001), these parents placed a high value on their children's participation in physical activities and sports, in part due to their children's developmentally disabling conditions. They believed that it promoted their children's skill and fitness development, enhanced socialization and reduced their stereotyped and repetitive behaviors (Sherrill, 2004).

In addition to this, the parents expressed that their children's participation in sports programs not only helped their children's development but also augmented community empathy. Because the parents considered physical activity and/or sports participation as an avenue for developing social skills and being healthy, they enrolled their children in various programs within the communities (e.g. Special Olympics, and inclusive sport leagues) as well as in the schools (intramural sport activities-track team). In particular, the parents who had children in secondary schools stated that their children needed to participate in physical activities on a regular basis to maintain physical health and improve fitness levels.

Because physical education programs were not provided for their children in school all year-round, they needed to seek physical activity opportunities outside of the
school environment. The parents searched for the opportunities (e.g. intramural activities, community recreational activities, sport league, and camps for children with disabilities) and created physical activities at home, so their children would continue to develop their social skills, were physically active and the parents even exercised with their children (e.g. playing basketball, backyard, jogging, riding a bicycle, walking around the neighborhood and exercising in community recreational center).

Positive but Superficial Relationship: Missing Collaborative Partnerships

The final emergent theme, “positive but superficial relationship”, captures the essence of the relationships between parents and the GPE teachers, which is reflective of the mesosystem in the ecological systems theory (Bronfenbrenner, 2005). According to Bronfenbrenner (1992, 2005), the development of the child is also influenced by the interaction between parents and teachers. In this study, the parents placed an emphasis on teamwork. They believed that they must work together with teachers to support their children's learning in school as well as in the home. Because each party has an area of expertise with regard to the learning of the children, collaboration between parents and teachers can promote the development of children. Specifically, parents had a better understanding of their children (e.g. personal strengths and weaknesses and likes and dislikes) whereas teachers had a better knowledge of the subjects they taught (Hoover-Dempsey & Sandler, 1995, 1997). Epstein (2001) identified three perspectives of home-school relationships: separate, sequential, and shared responsibility. One of the perspectives, shared responsibility, supports parent and teacher collaboration. Parents and teachers must have common goals for the children and work together to foster the children's development based on shared power and authority (Epstein, 2001).
Mundschenk and Foley (1994) examined home-school partnerships between high school educators and parents of students with and without disabilities. They found out that both parents and teachers considered communication as the most critical prerequisite for successful partnerships between parents and teachers. However, the partnerships between parents and high school educators were not strong. In this study, similar findings were uncovered. More specifically, the parents perceived communication as a key element for achieving home-school collaboration. Furthermore, they valued building collaborative partnerships between parents and teachers in terms of promoting their children’s development and being successful in school. However, collaboration between parents and GPE teachers did not manifest themselves during the conduct of this study.

Although the parents stated that they had positive and active relationships with school personnel, their relationships with the GPE teachers remain weak. At first, the parents felt that it was not necessary to go and talk to GPE teachers directly because they gained information from other educators, such as classroom teachers, special education teachers and adapted physical education teachers. Secondly, the parents were concerned more about learning in academic subjects than in physical education. Thirdly, they believed that they had limited opportunities to interact with GPE teachers due to these teachers’ busy work schedules, so they tended to communicate via email instead of visiting the schools to have a regular meeting.

The first subtheme, “working as a team,” describes how home and school should interact in order to achieve educational goals and to meet the children’s needs in school. The parents asserted that home-school collaboration could be accomplished through
various forms of communication, such as phone calls, emails, and face-to-face meetings. Also, parents and teachers should respect each other in a manner consistent with the literatures (Blue-Banning et al., 2004; Virgilio, 1990). That is, as Blue-Banning et al. (2004) articulated, collaborative partnerships have six indicators of professional behaviors: (a) communication, (b) commitment, (c) equality, (d) skills, (e) trust and (f) respect. In general, the findings of this study are consistent with the findings of Blue-Banning et al. (2004) and An and Goodwin (2007) in that, home-school collaborative partnerships were recognized by the parents as the best way to maximize their children’s development because parents and teachers can work together to reach common goals to benefit their children in school and at home. Consistent with the findings of Blue-Banning et al. (2004), Mundschenk and Foley (1994), and Stoner et al. (2005), frequent communication is considered to be the most critical ingredient for establishing effective home-school collaborative partnerships.

Although parent-teacher partnerships were highly-valued by the parents as a form of their involvement in their children's education, their partnerships with GPE teachers were not formed closely due to limited opportunities to interact with GPE teachers and a lack of PE program information. Because of GPE teachers’ busy teaching schedule, the parents often communicated via email or through other school personnel, particularly in secondary schools, where the APE teachers actively engaged in their children's program, so the parents did not feel the need to communicate with the GPE teacher despite all of their children participating in GPE classes. Nevertheless, parents expressed that they were welcomed, esteemed, respected and supported by GPE teachers.
The second subtheme, “gathering information from others” explains the patterns of parents’ interactions with educational professionals in school with regard to the GPE program. Parents tended to obtain information about their children’s performance, behaviors and progress through classroom teachers, special education teachers and APE teachers because there were more opportunities e.g. IEP meetings, quarterly meetings, parent-teacher conferences, email/phone communication and school visits, were available to interact with them than with the GPE teachers. As a result of frequent interactions with other professionals, the parents did not feel that they needed to increase their interactions with the GPE teachers. Also, they trusted the special education teachers and APE teachers because they felt these teachers had more specialized knowledge and expertise and therefore, they were more effective in teaching students with disabilities. Consequently, the parents used only indirect methods of interaction with GPE teachers; that is, by way of other educational professionals: adapted physical educator, special educator, or the classroom teacher usually, communicated with GPE teachers on the parents’ behalf.

The third subtheme, “low expectation toward GPE program and GPE teacher” reveals the absence of partnerships between parents and GPE teachers and passive attitudes toward their involvement in GPE programs. The parents stated that they did not experience challenges with regard to their children’s participation in GPE programs. Parents further indicated that their children sometimes had behavioral problems in general education classes, but not in GPE programs so those experiences affected their engagement in school. Another factor that hindered building partnerships between parents and GPE teachers was the absence of GPE teachers in the IEP meeting. The
parents stated that APE teachers often participated in the IEP meetings and shared students' performance and progresses in GPE programs. Additionally, because the APE teachers or physical therapist (in Elle's case, no APE teachers available in school district) developed their children's IEP goals for PE, the parents tended to contact APE teachers rather than GPE teachers.

**Bronfenbrenner’s Theory and Parental Involvement**

This study was situated in Bronfenbrenner’s ecological systems theory (1979, 1992, 2005) to best explain parental involvement in their children’s learning and development with respect to physical education settings and other environments (e.g., home, community). Bronfenbrenner (2005) theorized that human development occurs through interactions between persons and contexts. Further, he focuses on four tenets: process, person, context, and time. In this study, all parents were actively involved in their children’s physical education programs in the environmental contexts of the home, school and community. Above all, the parents were the most significant environmental influences in their children’s learning and development.

**Process**

Bronfenbrenner (1995) posited the idea that the property of the ecological paradigm is related to the ‘interaction of forces’ in human development. *Process* is the dynamic interaction between an active person and his/her environment. It is particularly important as “the primary engines of development” (Bronfenbrenner & Morris, 1998, p. 996). Applied to this current study, the *process* refers to the dynamic interactions between parents and their children, parents and teachers, and parents and other environmental
contexts (e.g. work and community organization) over time. The study findings show that parents constantly interacted with their children in various environmental contexts: the home, school and community. All of the parents were concerned with their children’s physical health and fitness and social skills and, fortunately, physical activity programs were available to their children all the time. The parents engaged in recreational and sport activities with their children directly and indirectly. They provided instructions and gave social support to their children’s participation in physical activities by driving them to places and observing their performances.

The second example of process is the interaction between parents and teachers. The parents believed that their children’s learning could be promoted by them forming collaborative partnerships with their children’s teachers. The parents sought to connect with the school personnel to support their children’s development by attending IEP meetings, parent-teacher conferences, face-to-face communication, volunteering in school activities and responding to teachers’ requests. However, there was little or no interaction between the parents in this study and their children’s GPE teachers, even though they considered teamwork to be a critical element in their children’s development.

A final example is the interaction between parents and other environmental contexts. In this study, the parents actively engaged in special education parent groups, community organizations (Down syndrome association, autism speaks and Special Olympics). With the purpose of providing additional learning opportunities for their children, the parents were actively involved in local organizations in order to gather resources and support to increase the awareness of disability. In addition to this, some parents kept searching for resources to support their children and were able to obtain a
legal support service for their children. The service allowed them to hire specialized individuals trained in teaching children with developmental disabilities, and this supported their children’s learning and development.

**Person**

*Person* as the second tenet of Bronfenbrenner’s theory refers to the individual and his or her characteristics (e.g., sex, age and health) that are engaged in processes (Bronfenbrenner, 1995). From an ecological perspective, the *person* is one dynamic force that positively or negatively influences his or her development. Applied to this study, children’s disability and parents’ characteristics, such as beliefs, knowledge, and expectation can be considered as the forces of the person. Parents’ characteristics would influence the various roles that they play involved in their children’s education.

Often, individuals with developmental disabilities have chronic mental impairments that limit their functions in major life events (e.g. self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living and economic self-sufficiency) (American Association on Intellectual Disabilities and Developmental Disabilities, 2010). Children’s disability discourages reactions from the environment and disrupts processes of growth (Bronfenbrenner & Morris, 1998). In Dena’s experiences, Chad was placed in a segregated classroom due to his behavioral issues (spitting, hitting, throwing objects, inappropriate language, running away and noncompliance) while he was in the first semester of second grade. She remarked that his behavioral issues and educational placement in school caused him to be unable to learn what he was supposed to learn in general education classes. Also, in IEP meetings, his behaviors were the main topic of discussion. In his PE program, his report card also
showed the evaluation of his behaviors only. Dena had a struggle interacting with the school in relation to Chad’s education during that time because she wanted him to be included in general education. Finally, she made a decision to change his school.

All children in this study were included in GPE classes and participated in physical activities with their peers without disabilities. Parents believed that their children should be placed in GPE classes in order to learn age-appropriate social skills. The parents’ beliefs on inclusion affected their children’s educational placement as demonstrated by Dena’s experience. However, the parents did not perceive that the full responsibility for teaching their children in physical education program should belong to GPE teachers, even though their children were included in GPE programs. Such low expectations toward GPE teachers affected their interactions with GPE teachers. It results in getting information from others. Secondly, the parents had limited knowledge with regard to physical education, so it results in less discussion of physical education programs and the absence of their input in the IEP meeting.

Context

The third tenet of Bronfenbrenner’s theory is the context where the individual’s development occurs (Bronfenbrenner, 2005). It is also an influential force that affects the child’s development. Bronfenbrenner and Morris (1998) identified contexts as consisting of four nested environmental systems: microsystem, mesosystem, exosystem and macrosystem.

Microsystem. This system refers to the immediate environment of the developing person and includes persons, objects, activities and events. These are the elements of the environment with which the developing person directly interacts. In this study, it broadly represents home, school and community settings, as the children’s
interactions occurred in these spaces. In those settings, significant others that their children interacted with were parents, teachers and coaches.

In relation to parent-child interaction, the study findings show that these types of interactions occurred in both home and school settings. The parents played various roles over time to support their children’s development, yet there were slight differences between elementary and secondary school-aged students. The elementary school-aged children had more interactions with their parents than those who were in secondary schools. Parents directly worked to instruct their children during the early years of elementary school. For example, Elle and Tim spent more time with Matt teaching various sports (e.g. skiing, skating, swimming, bicycling and running) when he was in preschool and kindergarten. Also, they always tried to engage in physical activities with Matt at home. With regard to physical activity participation at home, fathers played primary roles of teaching (Matt, Jade, Alex and Iris). In addition to this, the parents had opportunities to engage in physical education programs or school events as volunteers in school. Dena assisted with one of the physical education lessons (climbing wall) in school, so she could observe her son’s performance and interact with her child. Tara also participated in school sports day when Alex was in the 5th grade. Interestingly, mothers became the primary people to teach and assist in the programs with regard to school participation.

Once their children moved to upper grades in elementary and to the secondary school, the parents’ roles were shifted to indirect forms of interactions, such as program organizer/coordinator, supervisor, evaluator and supporter. Although this study does not describe child-teacher or child-coach interactions in physical education and sports, it
can be assumed that their children’s development has been influenced by them because some children (Brad, Chad, Iris and Jade) were a part of sport teams in school or community programs (cross-country, swimming and basketball).

**Mesosystem.** The second level of context is *mesosystem* which is the connection between two microsystems to which the developing person is located (Bronfenbrenner, 2005). In this study, it represents the interaction between home and school (parents and teachers). As with the home-school interactions, the IEP meetings were the major connections between parents and teachers to discuss programs. The parents in this study also regularly attended parent-teacher conferences, and they even set up monthly meetings or quarterly meetings (Tara and Elle). This represents one of four types of interconnections between the home and the school setting: ‘indirect linkage’ where the parent is establishing the connection between home and school (Sontag, 1996). In addition to this, the parents were also actively involved in the written communication with the school personnel, such as mails, communication log books, emails and the school website. The parents’ relationships with the GPE teachers were not established due to the absence of GPE teachers in the IEP meetings. However, they often received physical education information about their children through emails. This represents a second type of interconnections: ‘intersetting communications’ where the messages are transmitted from one setting to the other (Sontag, 1996). Because they had superficial relationships with the GPE teachers, the parents gathered information from other school personnel (e.g., classroom teachers, adapted physical education teachers and special education teachers), which represents ‘intersetting knowledge’ where information or experiences are obtained from others (Sontag, 1996).
**Exosystem.** This is an environmental system where the child’s development is influenced by factors outside of his or her immediate world (e.g. parents’ workplace, supporting network, legal service). The parents in this study were active in searching for resources for their children. Some children (Brad, Chad and Iris) were the recipients of a residential service support program offered by the local government. Through this program, the parents were capable of providing additional learning opportunities at home and hiring specialists for their children. Also, the parents joined organizational groups, such as the parent-teacher association, special education parent groups, Down syndrome association, Autism Speaks and Special Olympics. They constantly engaged in networking with groups of people to gather information and educate themselves about disability and their children’s learning programs.

In Abby’s experiences, she served as a committee member in parent-teacher association and special education parent groups in her school district for two years when Dale was in middle school. She stated that the goal of the committee was to increase the communication between parents and administrators, to enhance community awareness of children with disabilities and to help raise educational funding for them. In order to achieve this goal, the committee organized summer fair events where people could gather information relating to summer camp programs, therapy programs, sport programs, and so on. Also, the committee provided parent education sessions once a month by inviting speakers in various areas (like doctors, administrators and therapists) to discuss special education programs within school district and disseminate necessary information to the families, such as legislation regulation and IEP information.
**Macrosystem.** The last level of environmental system is the macrosystem, or broader social influences (e.g. government policy, economic circumstances, cultural or societal expectations), which refers to the larger sociocultural context where the child resides (Bronfenbrenner, 2005). The legislation of IDEA (2004) requires parent participation in their children’s IEP meeting to make decisions about their children’s education. This represents both educational and social influences which can serve to enhance relationships between parents and teachers. It challenges parents to become decision-makers, rather than recipients only, in their children’s educational program plan. Also, it promotes collaborative partnerships between parents and teachers. In this study, the parents placed a high value on parent-teacher collaborative partnerships and they considered the IEP meetings as the main place that they could collaborate with the teachers, as well as establish partnerships with the professionals.

Another important factor in this level is the socioeconomic status of the parents. This study did not closely examine their socio-economic status, but they were asked to answer the simple demographic questionnaires (like address, age, educational background, employment and children’s information including school and community programs). Their responses to the demographic questionnaire showed that all participants in this study were White, resided in suburban areas, and had at least a college-level education. In addition to this, three families (Alex, Brad, and Jade) had double-income, because both fathers and mothers worked full-time. In Matt’s family, Elle worked part-time and her husband worked full-time. The field of their occupations indicates their income levels (systems engineer, software engineer, project manager, vice president of information technology, real estate broker and certified special education
teacher) which therefore allowed their children to become involved in various learning opportunities.

Through the organizational involvement, the parents constantly gathered updated information in relation to special education programs. In turn, their involvement in school organizations may bring the public awareness of students with disabilities and the importance of their educational programs to light.

Lastly, the societal expectations of children’s learning also played a role that influenced parental involvement in physical education. Even though the parents placed a high value on regular physical activity participation concerning their children’s health issues and social skills, their expectations of physical education programs in school were low. The parents of elementary school aged students showed greater interests in learning academics than physical education. The parents of secondary school-aged students showed higher interests in learning sport skills than those of elementary school aged students, and yet they had more concerns for their children’s independent living skills, including career goals and social adjustment in the real-world setting. It reflects societal expectations of successful schooling that relates to academic achievement in school.

Time

The last tenet of Bronfenbrenner’s theory is the concept of time. Bronfenbrenner has incorporated temporal aspects of development in his model. It is also known as the chronosystem, which refers to “the person’s development of changes (and continuities) over time in the environment in which the person is living” (Bronfenbrenner, 1986, p. 724). Bronfenbrenner and Morris (1998) conceptualized time into three categories: microtime, mesotime, and macrot ime.
Microtime. The first category is microtime and it represents what happens during the proximal process. In the context of this study, microtime was reflective of the time whenever the parents interacted with their children, for example, parental involvement in physical education was continued in various contextual settings (i.e. home, school and community). The parents wanted to provide various opportunities to learn and develop various skills, such as social skills, sports skills and competition, so their children could participate in community sports programs, intramural sports activities in school and recreational activities at home. The type of their involvement tended to change over time from giving mostly direct instruction to providing their children with support toward greater independence.

Mesotime. The second category is mesotime and it refers to the periodicity of parents’ interactions across broader time intervals (e.g., days, weeks and months). There was no regular connection between the parents and GPE teachers in this study. However, the parents maintained a degree of connectivity with other school personnel with regard to their children’s physical activity experiences. Their interactions were mostly those of regular meetings (e.g., monthly and quarterly meetings, parent-teacher conferences and IEP team meetings), daily communication logs, and e-mail correspondences.

Macrot ime. The last category involves changing expectations and events in the larger society. Time was devoted to advocacy type activities with these parents as they regularly engaged in activities of local community organizations. The parents’ engagement in community organizations started and has continued since their children were born. For example, some participate regularly in annual events, such as the Buddy Walk and Walk Now for Autism Speaks, to increase community awareness of disability.
In addition to this, the parents were also members in both parent-teacher associations and special education parent groups in schools and school districts. Therefore, their involvement clearly comprised both time and space.

In summary, the current study was positioned within the theoretical framework of Bronfenbrenner’s (1979, 1992, 2005) ecological systems theory and as such gives a constructive guide for the interpretation of its findings. Of importance, the study’s findings provide insights into what contributes to children’s learning and development in physical education and how parents can positively be influential in promoting their children’s learning success. The parents’ experiences of their involvement in their children’s physical education conceptualized within the ecological systems theory (Bronfenbrenner, 1992, 2005; Bronfenbrenner & Morris, 1998) have highlighted the importance of parent-teacher relationships in terms of promoting children’s development in physical education. In addition to this, it reinforces the need of GPE teachers’ regular involvement in IEP meetings and greater collaboration between GPE teachers and APE teachers in order to establish appropriate educational learning goals in physical education and provide appropriate instruction.

**Research Questions**

**Research question 1: What meaning do parents of students with developmental disabilities ascribe to their involvement in their child’s physical education programs?**

A number of values parents ascribed to their involvement in their children’s education emerged from this study. The parents perceived that parental involvement was for parents to advocate, on behalf of their children, to appropriate educational opportunities and to provide support in order to facilitate and strengthen their children’s
development. Parental involvement is also meant to increase community awareness of individuals with developmental disabilities in inclusive education and of their participation in educational programs offered to everyone. The parents were highly engaged in the advocacy in relation to their children's educational programs. Their involvement was not only limited to the school setting but also to home and community settings.

The parents stated that parental involvement was valuable and a critical process necessary in the development of their children’s learning and performance, particularly in the school setting. They also perceived that the extent to which they are involved in their children's school had positive influences on their children's success in learning as well as to the teachers’ attitude toward students with developmental disabilities (Becher, 1986; Coulombe, 1995; Henderson, 1989). The ultimate goals for their children in school were to participate in the same activities and to learn successfully. Their children often showed inappropriate behaviors in classrooms so teachers tended to pay more attention to manage behavioral issues rather than to motivate children's learning in actual subjects, due to their children's condition. As a consequence of this, students with developmental disabilities have a higher chance of being unsuccessful in school because they lose learning opportunities because of teachers misreading of their behavioral issues. Without parents being involved in school, their child’s learning in school can be jeopardized and development can be negatively influenced.

With regard to advocacy, parents also reached out to the community in networking with the families of children with developmental disabilities within the school or school district and the disability organizations i.e., special education parent
group, Down syndrome Association and Autism Speaks) (An, 2005). The parents shared information of parenting, their children's schooling and other extra-curricular activities (e.g., tutoring, therapy, APE services and sport/recreational activities) with others. Moreover, the parents used the legal system i.e. state agency for developmental disabilities to obtain the information about their children’s education and independent living and even got residential support services for their children to be able to interact with a variety of environments (Bronfenbrenner, 2005).

Similar to previous studies, various types of parental involvement were identified in this study: (a) communication, (b) observation, (c) volunteering, and (d) participation (An & Goodwin, 2007; Barge & Loges, 2003; Bronfenbrenner, 1986; Spann et al., 2003). Parental involvement was shown in various contexts: the home, school and the community (Epstein, 2001). The involvement in the home context explains the process of interactions between parents and children i.e. microsystem (parent-child). The parents typically used a form of observation in that they closely monitored their children's interactions with their surroundings, engaged with their children's activities in playing sport and observed their children's performance. Communication was the most frequently used form in the school context i.e. mesosystem (parent-teacher). The parents used in two methods: (a) verbal communication: IEP conference, teacher-parent conference, phone conversation, face-to-face conversation in school visit and (b) written communication: email, progress report, report card, newsletter, communication notes and IEP documents. This explains the process of interactions between home and school, specifically parents-teachers interactions. This also represents the internal structure of Epstein’s (2001) overlapping sphere of influence model. Specifically, the parents involved
in program planning (IEP) to determine their children's educational programs correspond to institutional communication. They also actively communicated with school personnel.

The parents are also involved in many community activities that embody both the exosystem (interactions between parents’ world and children) and the macrosystem (interactions between society and cultural values and children). Because parents continued to develop networking in their social world, it helped their children to participate in various physical activities and sports programs in home, school and community contexts. In addition to this, there were community outreach programs (i.e. Special Olympics) available for people with developmental disabilities, so their children could participate in competitive sports programs (Bronfenbrenner, 2005). Parental involvement in this context was the combination of communication, participation and observation depending on what types of activities they were involved in. For example, some children were playing in community sport teams, so the parents mainly provided them with the social support of driving them to the training and competition sites, observing the performance and cheering them on. They sometimes communicated with the coach and socialized with other families in the team. They also engaged in physical activities and sport as a family activity.

Finally, parents perceived that parental involvement was for parents to play multiple roles to promote their children's development (Folsom-Meek, 1984; Gettinger & Guetschow, 1998; Hilton & Henderson, 1983; McBride & Lin, 1996). This study suggests many different types of roles, including being a supporter, observer, evaluator, monitor/supervisor, teacher, therapist and program coordinator/organizer. In the home
setting, parents mostly took the roles of coordinators, supervisor and teacher/therapist, because their children tended to show signs of stereotyped and repetitive behaviors in unstructured settings, so they tried to keep their children occupied with different activities. In contrast to the roles played in the home context, parents’ roles in the school context were rather passive, particularly in the physical education program. Observation was the main role played by parents in physical education. It is worth to mentioning that parents showed a strong belief that physical activity facilitated their children's social and physical development. However, the physical education program was rarely discussed in the IEP meeting. Hardly any input was made by parents during the IEP meeting and the comments that were made were not fully accepted by the IEP team members.

**Question 2: What meaning do parents of students with developmental disabilities ascribe to their interactions and relationships with their child’s GPE teachers?**

The findings of this study also suggest the values and the barriers of building partnerships with GPE teachers. Parents perceived that they must share their expertise with teachers to promote the development of children with developmental disabilities. This is supported by Epstein’s model (2001) of overlapping spheres of influence. According to Epstein (2001), the child is placed in the middle of three spheres: the home, school and the community and that these spheres are pushed or pulled by the forces of their characteristics, philosophies and practices. The parents recognized that they had knowledge of their children that they can positively affect their children’s development and teachers had knowledge of subjects and teaching skills for their children. Therefore, if those knowledge and skill sets were to be combined, then their children's development
would be improved. Parents highlighted that they should be considered as a partner in their children's educational team. Also, they believed that building partnerships with the teachers is necessary to enhancing and maintaining their children's development (Barge & Loges, 2003; Blue-Banning et al., 2004).

More importantly, the parents emphasized the significance of having collaborative partnerships between home and school environments (An & Goodwin, 2007; Blue-banning et al., 2004; Columna et al., 2008). The parents felt that it was a way to ensure their children's learning in school. They desired to be a part of their children's educational team and to be able to provide their input in the decision-making process. At the same time, they wanted to know everything that happened in school. For example, class participation and performance, specific goals for subjects and its achievement and social relationships with teachers and peers without disabilities. Parents believe that open and active communication is central to building collaborative partnerships between home and school.

Although the parents continuously emphasized the importance of collaboration with school personnel, their relationships with GPE teachers were not solid and strong compared to those of other school personnel (e.g. classroom teachers, special education teachers, adapted physical education teachers). The relationship between parents and GPE teachers was limited to giving and receiving information. For instance, the parents tended to explain their children's characteristics or conditions. The teachers viewed children's performance as being related to behavioral issues, rather than the content they learned from the subjects. Cunningham and Davis (1985) have identified three models of parent-professional relationships: (a) expert model, (b) transplant model, and (c)
consumer model. The expert model explains that professionals have the expertise, not the parents, and therefore should make all of the decisions for the children. The transplant model respects the roles of parents in the decision-making process, but still the professionals transfer the skills and knowledge to the parents and the parents’ roles are supervised by the professionals. The consumer model acknowledges parents’ expertise and responsibilities, so the decision-making process is controlled by the parents. In this study, the findings show that the relationship between parents and GPE teachers is most closely associated with the expert model.

In fact, the parents showed a lack of interest in building relationships with GPE teachers as can be observed from their lack of interactions with these teachers. They obtained information regarding PE programs through other school personnel such as classroom teachers, special education teachers and adapted physical education teachers. Hence, the parents did not feel that it was necessary for them to contact the GPE teachers.

The other barrier to building partnerships with GPE teachers was the lack of parents’ knowledge in PE and their low expectation of PE programs. The main concern of parents regarding GPE programs was their children's participation in activities that are provided in class. Since their children attended an inclusive setting, they desired their children to be able to participate in programs and interact with their peers without developmental disabilities. In addition to this, the parents did not seem to know what contents their children learned from PE programs.
Recommendations for Future Research

In the field of adapted physical education, examining the effectiveness of intervention programs or instructional methods for students with developmental disabilities has been of primary interest to researchers and practitioners with regard to children's development (Bar-Eli, Hartman, & Levy-Kolker, 1994; Hamilton et al., 1999; Klavina, 2008; Klavina & Block, 2008). The process and outcome of direct interactions between active agents i.e. students with developmental disabilities) and environment (i.e. physical education program) is the focus of this investigation. Besides, many students with developmental disabilities are included in general physical education with the support of the legislation of IDEA (2004), so the issues of curriculum and instruction in an inclusive setting are considered an important topic investigated in the field of adapted physical education (Block & Obrusnikova, 2007).

Although parents are one of the most significant factors influencing children’s development, parents’ voices were often omitted in the discourse of adapted physical education. This study investigated the experiences of parents of students with developmental disabilities in their children’s PE involvement. They perceived it as being critical to their children’s learning and skill development. The importance of parent-teacher partnerships was also emphasized. However, there are still numerous challenges to future research in the field of adapted physical education.

In this study, the parents were exclusively White, middle class and resided in suburban areas. Their privileged social status made it far easier for them to be actively involved in their children’s education. These parents were willing and able to support their children, teachers and schools. In future research, however, the experiences of
parents with regard to parental involvement in PE can be varied by different parents’
characteristics (i.e., educational background, employment, socio-economic status,
geographical location, marital status, and so on).

A second issue for future research is to consider multiple perspectives of parental
involvement. This study focused on the experiences of the parents of students with
developmental disabilities. Further research of different demographic groups of parents
of students with developmental disabilities (e.g., low-income families, immigrant
families, single parent families) is necessary. In addition to this, this study found that the
parents placed considerable emphasis on home-school collaboration. It is necessary to
examine the perspectives of different groups (teachers and administrators for instance).

Thirdly, parents in this study did not develop strong partnerships with the GPE
teachers, so it is necessary to examine the barriers to and strategies for building
partnerships in physical education programs. In addition to this, examining school
policy with regard to parental involvement and parent education is also needed to
establish specific guidelines.

The final issue is to examine the role of the IEP process for physical education
programs. According to the parents of students with developmental disabilities in this
study, the major discussion of physical education in IEP meetings was to determine the
placement of physical education programs i.e. whether or not there ought to be APE
services or not. According to the definition of IDEA (2004), special education includes
instruction in physical education, so physical education programs should be greatly
discussed in the IEP meeting including instruction, measurable goals and evaluations
relative to GPE programs. Relating to APE services, program clarification needs to be
made because the administrators often made an error introducing physical therapy services to parents instead of providing APE services. Some parents were informed enough to choose one of the services (APE vs. physical therapy) for their children. IDEA (2004) clearly stated that physical education comes under the special education programs section and physical therapy comes under related service programs. Therefore, the utilization of IEP goals in physical education and its effectiveness in relation to children’s learning needs to be investigated.

**Implications for Practitioners**

It was evident from the study’s findings that the education of these students with developmental disabilities was not the sole responsibility of the school. The parents actively took responsibility for becoming involved and fostering collaboration among the school, the home and the community. The findings of this study provide substantial descriptions for teacher educators and practitioners to use in their own practices. The shared responsibility for the development of students with developmental disabilities in physical education requires considerations for its future practices:

First, motivating GPE teachers to establish and welcome parental involvement in their children’s physical education classes should be encouraged. In order for them to provide effective instruction, the teachers need to understand the students. Parents are the first and most important resource that teachers can access, so building partnerships with the parents of students with developmental disabilities is potentially extremely valuable. This could be achieved by creating a parent-teacher conference at the beginning of the school year. Both parties should share their goals for students with disabilities. Without having these common goals, students cannot be successful. Parent-teacher
relationships can be established by open and frequent communication (e.g. phone, email, website, class newsletters and invitations to attend physical education classes).

The second consideration is the frequency with which parents should be informed parents of the contents and knowledge of physical education programs. Parents have the right to know what contents are taught in physical education. It can help parents to understand what areas need to be developed in specific periods of time i.e. elementary, middle and high school. In turn, they can support their children’s learning at home.

Finally, it is necessary to develop the IEP goals in physical education no matter what the students have the APE services or not. According to the findings of this study, students had established IEP goals if they had APE service. Once the service is eliminated from the IEPs, the students do not have learning goals for physical education although the students attend GPE classes. It is critical for students with developmental disabilities to have structured goal settings throughout years in school because it can facilitate and reinforce their skill development and prevent regression in learning. Therefore, physical education program should be discussed in the IEP meeting. In order to provide a quality program to students with developmental disabilities, the IEP goals should be set up in relation to state or national standards so that they can also be physically educated individuals.

Conclusion

The parents are the most crucial agent in the lives of students with developmental disabilities, in that they are the first create a learning environment for their children to stimulate or deprive the development of children. Moreover, they were the first
environmental contexts with which their children interacted. Although parents are regarded as advocates for their children within educational contexts, their voices have been neglected in the field of adapted physical education. Therefore, the present study explores the meaning that parents of students with developmental disabilities ascribed to their involvement in physical education and their relationships with GPE teachers.

The experiences and perceptions of eight actively-involved parents (four at the elementary school level and four at the secondary school level), who have children with developmental disabilities i.e., Autism, Asperger’s syndrome, developmental delay, and Down syndrome were captured in this study. Their stories were gathered by face-to-face interviews, photographs, documents, and the researcher’s journals. Findings from this study concluded that parents involved in multiple contexts of the home, the school and the community advocate for their children's needs and play various roles to assist their children's development. They supported their children's education in various ways such as communicating with school personnel, participating in activities with their children, instructing/assisting their children in learning and becoming a member or a leader in a local or district level of organization. Parents tried to build relationships with school personnel; but they failed to do so with GPE teachers.

In conclusion, this study suggests that parental involvement needs to be incorporated in education for youngsters with developmental disabilities in order to maximize children's development and success in learning. It is also important for parental involvement to be promoted, once parents and teachers develop collaborative relationships. This study highlights that parents had generally positive relationships with school personnel, although their relationship with GPE teachers was insufficient.
Because of limited interactions with GPE teachers, parents’ interest in being involved in the physical education program also seems to be lacking. Therefore, the school needs to take the initiative to encourage parents’ participation in physical education by implementing specific guidelines to assist parents to become more involved in school.
References


192
Clarke, R., & Williams, B. (1992). The importance of parental involvement as perceived by beginning teachers vs. experienced teachers. (ERIC Document Reproduction Service No. ED347129)


Appendix A: IRB Approval
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<tr>
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<td>University Title:</td>
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<tr>
<td>Professor</td>
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<td>School of PAES</td>
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<td>Campus Address (room, building, street address):</td>
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<tr>
<td>A254 PAES BLDG, 305 W 17th Ave, Columbus, OH 43210</td>
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<tr>
<td>E-mail: <a href="mailto:hodge.14@osu.edu">hodge.14@osu.edu</a></td>
</tr>
<tr>
<td>Phone: 614-292-8364</td>
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<tr>
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<tr>
<td>E-mail: <a href="mailto:an.58@osu.edu">an.58@osu.edu</a></td>
</tr>
<tr>
<td>Phone: 614-599-2216</td>
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<tr>
<td>Fax: 614-688-4885</td>
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<td>Office of Regisegable Research Practices</td>
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Appendix B: Recruitment Flyer
This research project approved by the Institutional Review Board (IRB)

Further information contact:

Jihoun An  (614) 599-2216
jihoun.an@gmail.com

Samuel Hodge, PhD  (614) 292-8364
hodge.14@osu.edu

Exploring Parental Involvement in Inclusive Physical Education

School of Physical Activity and Educational Services
The Ohio State University
A 100 PAES building 305 W. 17th Ave. Columbus OH 43210

A research project of Sport and Exercise Education School of PAES
Purpose of the Study

To describe, in an attempt to understand, the lived experiences of parental involvement in physical education and the relationships with general physical education (GPE) teachers and the meaning given to these experiences.

More specifically, it is to understand (a) your involvement in your child’s physical education, (b) your value of parental involvement in physical education, and (c) your relationships and interaction with GPE teachers.

Why is Your Participation Important?

Through interviews, you will provide a rich and in-depth look at your experiences for your involvement in your child’s physical education.

You participation in this study will help others understand the importance of parents’ role in supporting a child’s education and participation in physical activity at school and will continue to expand the knowledge of the issues of inclusion and parental involvement in physical education.

Who Should Participate?

You are eligible to participate if you are:

- a parent of school aged (kindergarten to grade 12) children with disabilities who are attending in physical education with their peers without disabilities.
- a parent involved in your child’s school actively (e.g. IEP process, interacting with school personnel, PTA, volunteering, observing, etc.).

What is Involved?

- Three one-on-one interviews (one hour each, three hours total)
- Sharing of artifacts (school documents, pictures, family video clips, and related materials, etc.)
- Providing feedback on the findings

Research Team
Sport and Exercise Education
School of PAES

- Jihoun An, PhD student
- Samuel Hodge, PhD
- David Porretta, PhD
- Sue Sutherland, PhD
Appendix C: Recruitment Letter
June 2008

Dear Parents,

My name is Jihoun An and I am doing dissertation research for a Doctoral Degree in the School of Physical Activity and Educational Services (FAES) at The Ohio State University. My academic advisor is Dr. Samuel R. Hodge, Associate Professor, School of FAES. The topic of interest is the perspectives of the parents of children with disabilities on parental involvement in their children’s physical education. The purpose of this study will be to describe, in an attempt to understand, the lived experiences of parental involvement and the relationships with a general physical education (GPE) teacher and the meaning given to these experiences.

It is our hope that you will take part in this study as your input is essential to learning more about the experience and meaning of parental involvement in physical education regarding children’s learning and development. The information you provide will be valuable in assisting us in gaining a better understanding of the issue of parental involvement.

If you agree to take part in the study, you will be asked to participate in three interviews over a period of approximately two months. The purpose of the interviews will be for you to reflect on and talk freely about your involvement in your child’s physical education and for me to listen to you and talk with you, so I can understand these experiences. The length of each interview will be approximately 1 hour. The interviews will be conducted at a mutually agreed upon time and place. During the second interview, you will be asked to share photographs (or video recordings) of school events (e.g., activities in physical education, field days, or school events) and documents (e.g., notes sent home, newsletter, IEP, meeting agenda, etc.), if any, to supplement your stories.

If you agree to participate in the study, your name will not be connected with any information you reveal as pseudonyms will be used to ensure confidentiality and privacy. You are free to end the interview and to withdraw from the study at any time. If you decide to end your involvement, all data collected will be destroyed. You may also refuse to answer individual questions. If you would like further information about the study and/or would like to participate, feel free to contact me by telephone (614) 599-2216 or email jihoun.an@gmail.com.

Sincerely,

Jihoun An
Appendix D: Consent Form
The Ohio State University Consent to Participate in Research

Study Title: Exploring Parental Involvement in Inclusive Physical Education

Researcher: Dr. Samuel R. Hodge and Ms. Jihoun An

Sponsor: N/A

This is a consent form for research participation. This form contains descriptions of objectives, key components and procedures of the study. In addition, it describes what to expect if you decide to participate. Please read each section carefully to consider your participation.

Your participation is voluntary.

Your participation is voluntary and feel free to ask questions before making your decision. If you decide to participate, you will be asked to sign this form and will receive a copy of the form.

Purpose:

The purpose of this study is to describe the meaning parents of children with disabilities ascribe to their involvement in physical education and their relationships with general physical education (GPE) teachers. More specifically, this study will focus on the following questions:

1. What meaning do parents of school-age children with disabilities ascribe to their involvement in their child’s physical education programs?

2. What meaning do parents of school-age children ascribe to their interactions and relationships with their child’s GPE teachers?

Procedures/Tasks:

This study will require your participation in three one-on-one interviews that will last approximately 60 minutes (total time approximately three hours). The interviews will be audio recorded and transcribed verbatim (written out). You may be asked to provide feedback on the accuracy of the transcripts and the interpretation of what was said after the information from all the participants has been analyzed.

You will also be asked to provide documents and photographs (or video clips) that help you tell your story. You will explain the significance of documents and photographs (or video clips) during the second interview. You agree to the making of the copies of documents and photographs (or video clips) so that the researcher can refer back to it at a later time. You are also aware the investigator will be keeping written field notes of her observations and impressions about what was heard during the interview process. Your direct quotes will be used in written report as study findings.
Duration:

Your participation in three interviews will last about 60 minutes each for approximately three hours of your total, over a two month period. You may leave the study at any time. If you decide to stop participating in the study, there will be no penalty to you, and you will not lose any benefits to which you are otherwise entitled. Your decision will not affect your future relationship with The Ohio State University.

Risks and Benefits:

You will not be subjected to any physical or psychological risk. You have the right to refuse to answer any question, at which time the discussion will be redirected. Should the researcher feel that your continuation in the project is placing undo pressure on you (e.g. establishing mutual times for interview sessions), the investigator can choose to discontinue your involvement in the study at which time any data that has been collected will be deleted from the study and destroyed.

Beneficial to the educational community is that as a parent of a child with disability. Your voice, as a parent of a child with disability, will be heard, and although the impact of your story cannot be guaranteed, your participation in this study may contribute to a better understanding of parental involvement in inclusive physical education for students with disabilities.

Confidentiality:

Efforts will be made to keep your study-related information confidential. However, there may be circumstances where this information must be released. For example, personal information regarding your participation in this study may be disclosed if required by state law. Also, your records may be reviewed by the following groups (as applicable to the research):

- Office for Human Research Protections or other federal, state, or international regulatory agencies;
- The Ohio State University Institutional Review Board or Office of Responsible Research Practices;
- The sponsor, if any, or agency (including the Food and Drug Administration for FDA-regulated research) supporting the study.

The following steps will be taken to protect the anonymity and confidentiality of the verbatim interview transcripts: (a) names or other identifying particulars will not be discussed or made public outside of the research team (principal investigator and co-investigator), (b) pseudonyms will be substituted for all names that appear on the data transcripts, research presentations in academic conferences, and publication in scholarly journal, (c) the audio tapes will be identified by code numbers only. The data will be presented as general themes that emerge from the transcripts.

The data from this study will be published and presented at conferences; however, your identity will be kept confidential. Although themes from the findings will be supported by direct quotations, you will be given a pseudonym and all identifying information (e.g., school child attends) will be removed from the report. Only the research team (principal investigator and co-investigator) will review the original materials. The audio tapes, transcripts, documents, and
photographs (or video clips) will be stored separately from the master sheet identifying participants’ name, pseudonyms and code number.

The photographs (or video clips) will be used only to your indicated wishes: (a) as raw data only (viewed only by the research team), (b) for educational purpose (presentation to professional and/or research groups) and publication in scholarly journals only if the photographs are edited to remove those which identify the participants (i.e., only photographs depicting objects or spaces can be released beyond the research team), or (c) the unedited use of the photographs for educational purposes (as described in ‘b’).

**Incentives:**

No direct incentives are given to the participants

**Participant Rights:**

You may refuse to participate in this study without penalty or loss of benefits to which you are otherwise entitled. If you are a student or employee at Ohio State, your decision will not affect your grades or employment status.

If you choose to participate in the study, you may discontinue participation at any time without penalty or loss of benefits. By signing this form, you do not give up any personal legal rights you may have as a participant in this study.

Your involvement in the study is entirely voluntary and participation may be declined or withdrawn at any time without penalty of any sort. At the time of withdrawal from the study any data that has been collected will be destroyed.

**Contacts and Questions:**

For questions, concerns, or complaints about the study you may contact Samuel R. Hodge at (614) 292-8364 (hodge.14@osu.edu) or Jihoun An at (614) 599-2216 (an.58@osu.edu).

For questions about your rights as a participant in this study or to discuss other study-related concerns or complaints with someone who is not part of the research team, you may contact Ms. Sandra Meadows in the Office of Responsible Research Practices at 1-800-678-6251.

If you are injured as a result of participating in this study or for questions about a study-related injury, you may contact Samuel R. Hodge at (614) 292-8364 (hodge.14@osu.edu) or Jihoun An at (614) 599-2216 (an.58@osu.edu).

**Signing the consent form**

I consent to participating in research entitled: **Exploring Parental Involvement in Inclusive Physical Education.**

Samuel R. Hodge, PhD, Principal Investigator, or his/her authorized representative Ms. Jihoun An has explained the purpose of the study, the procedures to be followed, and the expected duration of
my participation. Possible benefits of the study have been described, as have alternative procedures, if such procedures are applicable and available.

I acknowledge that I have had the opportunity to obtain additional information regarding the study and that any questions I have raised have been answered to my full satisfaction. Furthermore, I understand that I am free to withdraw consent at any time and to discontinue participation in the study without prejudice to me.

Finally, I acknowledge that I have read and fully understand the consent form. I sign it freely and voluntarily. A copy has been given to me for my records.

I also give permission for the photographs (or video clips) I provide to be used under the following circumstances:

Photographs (or video clips) to be used as raw data only, not to be viewed outside of the research team (principal investigator and co-investigator)

Photographs that do not reveal my or my child’s identity to be used for educational purposes (professional and research presentations) and research publications.

Photographs to be used for educational purposes (professional and research presentations) and research publication.

Printed name of subject

Signature of subject

am/pm

Date and time

Printed name of person authorized to consent for subject (when applicable)

Signature of person authorized to consent for subject (when applicable)

am/pm

Date and time

Investigator/Research Staff

I have explained the research to the participant or his/her representative before requesting the signature(s) above. There are no blanks in this document. A copy of this form has been given to the participant or his/her representative.

Printed name of person obtaining consent

Signature of person obtaining consent

am/pm

Date and time
Appendix E: Participant Information Form
### Participant Information Form

*Please provide the following information*

**Personal Information**

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<th>all children</th>
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**Date:**
**School Information**

School District/School Name/Grade

How long has your child attended at a present school?

Have you ever changed your child’s school? if so, why?

Is your child attending physical education (or gym activities) in his or her school?

- [ ] Yes
- [ ] No

Type of Class:

- [ ] General Physical Education (i.e. attending class with children without disabilities)
- [ ] Adapted Physical Education (i.e., attending class with children with disabilities)

Is there a teaching assistant (TA)?

- [ ] Yes (Full-time/Part-time)
- [ ] No

Does a TA attend Physical Education (or gym activities) with your child?

- [ ] Yes
- [ ] No

Rate your involvement in your child's school.

- [ ] no involvement
- [ ] rarely involved
- [ ] occasionally involved
- [ ] regularly involved

How do you communicate with teachers? (e.g., telephone, email, in-person, etc.)

**Individual Education Plan (IEP)**

How many IEP meeting held per year:

How many are you attended?

Who attends the meeting? (i.e., IEP members)

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Appendix F: Interview Guide
### Possible Interview Questions 1: Focusing on life history (Past Experiences - Up to Present)

1. What prompted you to respond to this announcement of research project?
2. What is your understanding of parental involvement?
   (a) How would you describe about parental involvement?
3. Could you please introduce about you, your child, and your family?
   (a) Who are your family members, type of disability, grades, your background, etc.
4. Would you describe your involvement in your child’s school?
   (a) What kinds of involvement have you done for your child’s school and education?
      (e.g., communication, observation, volunteering, advocacy, etc.)
   (b) How would you describe about your level of involvement?
5. Would you tell me about your child’s physical education program?
6. How would you describe your involvement in your child’s physical education?
7. How is it important for you to be involved in your child’s school and physical education?
8. Please tell me about your relationship with the school that your child attended.
   (a) How do you interact with school personnel (i.e. general physical education teacher)?
   (b) How often? How is it important?

### Possible Interview Question 2: The Details of Experiences (Present Experiences)

1. After reviewing the transcript, is there anything you have thought of that you would like to add, alter, or delete from our discussion during the first interview?
2. Could you describe about your child’s current physical education program?
3. Could you describe about your day-to-day activities?
4. Tell me about the artifacts you brought today.
   (a) How are those related with “parental involvement”?
5. How would you describe your role as a parent in your child’s learning and development?
   What about father’s role and family’s roles?
6. What advantages or disadvantages of parental involvement are there in regard to your child’s development? (overall & PE)
7. What have you learned from your experiences of being involved in school and your child’s education?
8. In terms of interacting with the teacher, what experiences have you had?
   (a) How did you interact with GPE, APE, & TA?
   (b) What was like? Positive, Negative, Collaborative, etc
   (c) What does it mean to you?

### Possible Interview Questions 3: Reflections on the Meaning (Past + Present)

This interview will be focused on identifying the meaning that the parents have described in previous interviews. After reviewing the transcript, is there anything you have thought of that you would like to add, alter, or delete from our discussion during the second interview?

1. Given what you have said through previous interviews, how would you define parental involvement?
2. What does parental involvement mean to you?
3. What benefits and/or concerns do you have? How does it make you feel?
4. What would you expect from your child’s school and GPE teachers?
5. Given what you have said through these interviews, where do you see yourself going in the future?
Appendix G: Member Check Forms
Dear

I am happy to inform you that the data analysis of the research study titled *Exploring the Meaning of Parental Involvement in Physical Education for Students with Developmental Disabilities* has been completed. I would like your assistance in determining the accuracy of my interpretation of your stories and insights. I have attached both a summary of the findings and feedback form. I invite you to comment on how closely I have represented your experiences.

Please read the summary of the findings and write any comments you may have and please email me back your comments (jhoun.an@gmail.com).

Once again thank you for participation in my research and please do not hesitate to contact me if you have any questions about the study. It has indeed been a privilege to hear your stories and I thank you for sharing them with me. Thank you for your ongoing commitment.

Sincerely,

Jhoun An

jhoun.an@gmail.com

(614) 599-2216

1835 Independence Rd. APT 106

Columbus, OH 43212
Meaning of Parental Involvement in Physical Education for Students with Developmental Disabilities

Summary of Thematic Analysis

This study explored the meaning of parental involvement in physical education from the viewpoints of eight parents of children with developmental disabilities. Four preliminary themes emerged from thematic analysis: (a) Being an advocate for my child; (b) Contributing to shape my child's development; (c) Open relationships but not active; (d) Working as a team. These themes are supported by subthemes that further explicate the experiences of the parents of children with developmental disabilities.

Research Question 1: What experiences and meaning do parents of school-age children with disabilities ascribe to their involvement in their child's physical education programs?

1. Being an Advocate for My Child

The first theme captures the parents' understanding of their involvement in their children's education, including physical education. Parents continually emphasized the importance of being involved in their children's education and lives in order for them to succeed. Because their children have special needs, parents perceived that they should be an advocate for their children to make sure that the programs and supports were appropriately placed for their children in school. Parents also anticipated the school to position high expectation toward their children.

   a. Ensuring Children's Success in School

   The parents reflected that parental involvement was to make sure that their children to meet their goals and needs to be successful in school. They felt that their children need appropriate supports and service programs to exceed their abilities. It was their job to make it happen.

   b. The More Involved I am, The Higher They Set the Bar

   The parents highlighted how much it is important for them to be involved in their children's education in school. Without their involvement, their children would not be able to get higher expectation from their teachers. It would eventually affect children's success in school.

2. Contributing to Shape My Child's Development

The second theme exposes the experiences of the parents being involved in their children's lives and education. Their involvement was not only happened in schools but also it was continued in homes and community settings. The parents played various roles (e.g., coordinator, organizer, motivator, teacher, and supporter) to facilitate their children's development. The parents also expressed that they were continuously seeking out different opportunities for their children to enlarge their abilities.
a. Understanding Big Picture

The major focus of involving in their children’s education was to oversee and understand the things happening around their children’s lives, especially learning in school. Since their children have special needs, they needed a lot of supports to accomplish their goals appropriately. Parents employed various forms of approach to get the pictures of their children’s participation and performance (i.e., verbal and written communication via phone, face-to-face meeting, communication notebook, email, and newsletter and classroom observation).

b. Becoming a Supporter for My Child, Teachers, & School

The parents were very eager in helping their children, teachers and school. In order to support their children, they organized either home programs to supplement the education that their children were getting from the school or volunteered classroom or school to help out both teachers and their children (e.g., PE activities in classroom or School Field Events). Also, the parents were an active member in parent-teacher organization in school or an advocacy group for special needs children within school district.

c. Keeping My Child Active

The parents all recognized the benefits of physical activity in their children’s lives in the aspects of health promotion and socialization. They highlighted that their children needed to be physically active to prohibit secondary health risk of obesity and to improve physical fitness. Their children have been participated in sport programs (e.g., Special Olympics, local community sport league, after school activities joining sport team) and actively involved in family recreational physical activities.

Research Question 2: What experiences and meaning do parents of school-age children with disabilities ascribe to their interactions and relationships with their child’s GPE teachers?

3. Open Relationship But Not Active

The next theme, Open Relationship But Not Active, captures the experiences parents have had with general physical education (GPE) teachers. Even though all parents reflected that having a close relationship with teachers was important to support their children’s education properly, they all seemed to have low level of interactions with the GPE teachers. Instead of building the relationship with the GPE teachers, they seemed to rely on the intervention specialist (i.e. special education teacher) and adapted physical education (APE) teacher because of their specialty in children with disabilities and availability.
a. Gathering Information From Others

Although the parents spoke about their relationships with the GPE teachers as open and positive, the parents received the information from classroom teachers, intervention specialists and/or adapted physical education teacher because the others were all involved in their children's IEP meetings so they regularly obtained information from them. However, the information was more focused on children's IEP goals relating to physical and motor skills rather than the contents of GPE program that they participate in.

b. Low Level of Expectation Toward the General Physical Education Program and Teachers

Parents expressed that they were more driven into the academics to support than the PE program for their children. Since they have very limited interaction with GPE teachers (i.e. absence in the IEP meeting, teacher's busy teaching schedule), no concerns regarding GPE program were brought into the parents' attention. Also, parents seemed to have more interests supporting their children in extra-curricular activities than PE programs because their children were highly involved in after school sport programs in and out of school (i.e. school sport team, Special Olympics, community sport league).

4. Working as a Team

The last theme reveals that teachers and parents must work together to increase children’s development. Parents specifically expressed that each member has a different form of expertise in terms of educating the children with disabilities so it is essential for them to share their knowledge each other. They should be respected as a team member in their children's education. In order for them to make a team effort, the line of communication between GPE teachers and parents must be opened and both parties must converse frequently.

a. I'm a Part of Team

Although the parents have not had a close relationship with the GPE teacher, they felt that they were welcomed and supported by the GPE teacher. Parents viewed that the collaboration between parents and teachers could produce better outcome for their children.

b. Communication is a Key

Parents considered communication as a critical ingredient to assist their children's education. By utilizing ways of communication (e.g., phone, email, face-to-face) on a regular basis, teachers would get better understanding of the children and be able to plan instructions correctly. In the meantime, parents get better understanding of the program and their children's progress.
Meaning of Parental Involvement in Physical Education for Students with Developmental Disabilities

Summary of Thematic Analysis

Please complete and return this form

Name: __________________________________________

[ ] YES, I can see my experiences in the themes as they are described.

[ ] NO, I cannot see my experiences in the themes as they are described.

What, if anything, would you like to change/add/delete?

1. Being an Advocate for My Child

2. Contributing to Shape My Child’s Development

3. Open Relationship But Not Active

4. Working as a Team

___________________________________________
Signature/Date

Thank You
Appendix H: Preliminary Study
**Figure H.1. Copy of IRB Approval**

<table>
<thead>
<tr>
<th>Principal Investigator</th>
<th>Co-Investigator</th>
<th>Co-Investigator</th>
<th>Protocol Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Dr. Samuel R. Hodge</td>
<td>Name: Jihoun An</td>
<td>Name:</td>
<td>Exploring Teachers’ Perceptions of Parental Involvement in Physical Education</td>
</tr>
<tr>
<td>Department or College: School of Physical Activity and Educational Services</td>
<td>Campus Address (room, building, street address): 212 Pomerene Hall, 1760 Neil Ave, Columbus, OH 43210</td>
<td>Campus Address (room, building, street address): 300 Pomerene Hall, 1760 Neil Ave, Columbus, OH 43210</td>
<td></td>
</tr>
<tr>
<td>Phone: (614) 292-8364</td>
<td>Phone: (614) 599-2216</td>
<td>Phone:</td>
<td></td>
</tr>
<tr>
<td>E-mail: <a href="mailto:hodge.14@osu.edu">hodge.14@osu.edu</a></td>
<td>E-mail: <a href="mailto:an.58@osu.edu">an.58@osu.edu</a></td>
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</tr>
<tr>
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Source of Funding: Not Applicable

For Office Use Only:
- Research has been determined to be exempt under these categories: 
- Approval may begin as of the date of determination listed below.
- The proposed research does not fall within the categories of exemption. Submit an application to the appropriate Institutional Review Board for review.

Date of determination: 1/24/07

Signature: Janet G. Schultz
Office of Responsible Research Practices
Parental Involvement in General Physical Education:
Elementary GPE teachers’ Perspectives

A preliminary study was carried out guided by the question how does parental involvement manifest in physical education because the researcher’s interests concern the phenomenon of parental involvement. In exploring the phenomenon of parental involvement in school contexts, it is essential to obtain the perspectives of GPE teachers because they are influential figures within the immediate environment that children interact with (Bronfenbrenner, 1979). In addition, many children with disabilities have been included in GPE programs so it is necessary to obtain the perspectives of GPE teachers as the voices of program providers. Therefore, the purpose of the preliminary study was to explore the meaning teachers constructed regarding parental involvement in GPE. To that end, the study focused on gaining an understanding of (a) the value teachers placed on parental involvement in GPE programs, (b) the meaning teachers ascribed to the Individualized Education Program (IEP) process in relation to parental involvement, and (c) their experiences associated with the IEP process and their relationships with the parents of children with disabilities. For the preliminary study, the data were collected between January to June 2007.

Participant Selection

GPE teachers were recruited using criterion sampling to secure those who have had experiences of parental involvement. The researcher was able to secure nine GPE teachers initially; however, only four teachers – two females and two males – agreed to participate in the study. All four GPE teachers were from suburban elementary schools in a large metropolitan area in the Midwestern region of the United States (US). Pseudonyms were used to protect the identity and ensure confidentiality of the participants.

The participants were recruited with the support of the practicum coordinator and supervisors in the Physical Education Program at a local university. The researcher contacted the practicum coordinator of the adapted physical education (APE) program and university supervisors of student teachers within the physical education teacher education (PETE) program and asked them to share the purpose of the study with local in-service GPE teachers, who matched the study criteria, were willing to participate in the study, and had experiences that would help the researcher answer the research questions. Those who were interested left their names with the practicum coordinator or supervisors. The researcher then contacted the teachers who were interested to discuss the project in more detail. The experiences of both female and male GPE teachers were the primary focus of the study. The criterion for inclusion of participants was that these GPE teachers (a) had taught at elementary schools, (b) had taught children with disabilities in inclusive settings for
at least for 2 years, and (c) had been involved in an IEP process. The four teachers were: Amy, Kim, Bob, and Sam (pseudonyms)

AMY’s Story

Amy was a 57 year-old White female teacher who had 31 years of teaching experience in physical education. Amy who has a bachelor’s and master’s degree in physical education started her teaching career as a secondary physical education teacher and taught for five years as such. She moved to the elementary level and continued her teaching. She had taught children with various disabilities in her physical education classes for 27 years (e.g., students with ADHD/ADD, autism, cerebral palsy, chronic disorders, Down Syndrome, learning disability, intellectual disabilities, muscular dystrophy, and seizure disorder). At the time of this study, she was a faculty member at Green Elementary School, which was within the Northwest City District. Because Green Elementary School was located between urban and suburban communities, the student population was very diverse. Twenty five percent of the school population was English Second Language learners. About 10% of the students were identified as having disabilities. The school also provided free/reduced lunch to students, and there were Title I classes as well. Amy was the only teacher who taught physical education in the school and provided the program to Kindergarten through 5th grade students. The physical education class was provided once a week for 50 minutes on a four-day rotation. Class sizes ranged from 15 to 26 with one or two students with disabilities included in each class.

KIM’s Story

Kim was a 36 year-old White female teacher who had 14 years of teaching experience in physical education. She had also taught students with disabilities in physical education from the beginning of her teaching career. Kim was a physical education teacher at White Elementary School within the Northwest City School District. Specific to her educational background, Kim held a bachelor’s degree in physical education and master’s degree in exercise science. She was the only physical education teacher at White Elementary and provided physical education for grades K to 5. Physical education was provided to students once a week for 50-minutes and additionally 65-minutes on Friday in which a whole class in each grade participated in physical education together (1st, 2nd, 3rd, 4th, 5th, and a multi-age group). Class sizes ranged from 19 to 27 and one or two students with disabilities were included in each class. Kim had experience teaching children with autism, Asperger’s syndrome, cerebral palsy, Down Syndrome, intellectual disabilities, and seizure disorder.

7 Title I – Improving the Academic Achievement of the Disadvantaged (Public Law 107-110 of No Child Left Behind Act (NCLB) of 2001, Section 101) (U.S. Department of Education, 2002).
BOB’s Story

Bob was a 42 year-old White male teacher who had 16 years of teaching experience in elementary physical education. He earned his Bachelor’s degree in Health and Physical Education and Master’s degree in Elementary Education. He also had completed APE endorsement program in 2007 at local university. He was a faculty member at Blue Elementary school, which was within Jackson City School District. He was the only physical education teacher at the school and provided physical education for K to 5th grade students. The kindergarten students attended physical education once a week for 30-minutes while the first to fifth grade students attended classes twice a week for 30-minutes. Class sizes ranged from 20 to 23 where there were one or two students with disabilities included in each class. Bob had taught students who had cognitive delays, health impairments, amputations, visual impairments, kabuki syndrome, Asperger’s syndrome, and learning disabilities.

SAM’s Story

Sam was a 27 year-old White male teacher who had 3 years of teaching experience in elementary physical education. He earned his Bachelor’s degree in physical education and was a master’s student at a local university majoring in APE. Sam was a faculty member at Red Elementary, which was within Southeast City School District. He also was the only physical education teacher at Red Elementary School, providing physical education to Kindergarten to 6th grade students. Physical education classes were 45-minute, on a four-day rotation, with each class containing 16 to 24 students. In each class, there was one or two students with disabilities included (e.g., autism, Asperger’s syndrome, learning disabilities, severe emotional disorder, Turner syndrome).

The physical education teachers involved in this study had from 3 to 31 years of experience teaching. Also, their experiences in working with students with disabilities varied over a wide range of years from 3 to 27. The schools sizes ranged from 430 to 500 students. At Green and White Elementary Schools about 10 percent of the students who had some type of disabilities. Blue Elementary had about three percent and Red Elementary had around four percent of student populations having disabilities. Commonly, there were one or two children with disabilities included in the PE classes and all gymnasiums were accessible for students with disabilities. Three teachers had paraprofessional assistance for their classes. As for IEP meetings, Amy and Kim would attend these meetings occasionally, but Bob and Sam did not. All four teachers also mentioned that they received consultation from APE specialists when they had children with disabilities in their classes. Their relationships with the APE specialists were noted as positive and supportive. The teachers’ demographic information is summarized in Table 3.1 and the schools and PE programs information is summarized in Table 3.2.
Data Generation

Data were gathered using a demographic questionnaire, semi-structured interviews, artifacts (photographs, documents), and researcher’s journals. For the purpose of building rapport with the study participants, the researcher visited each school where the GPE teachers worked and had an informal meeting with all participants individually to provide a research study package, including recruitment letter, consent form, participant demographic information form, and interview guide. A brief overview of the research goals and procedures were explained to the teachers and the interview schedule was also set up at those meetings.

Demographic information. The researcher used a brief demographic questionnaire to identify the teachers’ educational backgrounds, teaching experiences (e.g., age, degrees, years of teaching in school, years of teaching students with disabilities), and the characteristics of school contexts (number of students, number of PE session per week, school district and school, type of disabilities they taught, gym accessibility, and IEP meetings attendance) and further to provide a detail description of the participants.

<table>
<thead>
<tr>
<th></th>
<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>F</td>
<td>F</td>
<td>M</td>
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<td>Age</td>
<td>57</td>
<td>36</td>
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<td>27</td>
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<td></td>
<td>APE Endorsement</td>
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<tr>
<td>Years of Teaching</td>
<td>31</td>
<td>14</td>
<td>16</td>
<td>3</td>
</tr>
<tr>
<td>Years of Teaching CWD</td>
<td>27</td>
<td>14</td>
<td>16</td>
<td>3</td>
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Note. F = Female, M = Male  CWD = Children with disabilities

Table H. 1. Participant Demographic Information
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<tr>
<th>Grades Taught</th>
<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
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<tr>
<td></td>
<td>K - 5</td>
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**Frequency of PE**

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<th>Sam</th>
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<tbody>
<tr>
<td>50 min/lesson</td>
<td>50 min/lesson</td>
<td>30 min/lesson</td>
<td>45 min/lesson</td>
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<td>4-day rotation</td>
<td>1/week</td>
<td>1/week (kindergarten)</td>
<td>4-day rotation</td>
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<tr>
<td>65 min/lesson</td>
<td>Extension Friday</td>
<td>2/week (1st to 5th G)</td>
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<td></td>
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<tr>
<td>(in every 6 wks)</td>
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**District/School**

<table>
<thead>
<tr>
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<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
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<tbody>
<tr>
<td>District A:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Green Elementary</td>
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</tr>
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<tr>
<td>Blue Elementary</td>
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<td>District C:</td>
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</tr>
<tr>
<td>Red Elementary</td>
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**School Size by No. of Students**

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<th>Bob</th>
<th>Sam</th>
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<tr>
<td></td>
<td>453</td>
<td>500</td>
<td>430</td>
<td>460</td>
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**No. of Students with Disabilities**

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<th>Bob</th>
<th>Sam</th>
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<tbody>
<tr>
<td>46 (10.2%)</td>
<td>52 (10.4%)</td>
<td>14 (3.3%)</td>
<td>20 (4.4%)</td>
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**PE Class Size**

<table>
<thead>
<tr>
<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
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<tbody>
<tr>
<td>15-26</td>
<td>19-27</td>
<td>20-23</td>
<td>16-24</td>
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**Students with Disabilities per Class**

<table>
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<tr>
<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or 2</td>
<td>1 or 2</td>
<td>1 or 2</td>
<td>1 or 2</td>
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**Access of Gym**

<table>
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<th>Amy</th>
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<th>Bob</th>
<th>Sam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accessible</td>
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**Type of Disabilities**

<table>
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<th>Amy</th>
<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
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</thead>
<tbody>
<tr>
<td>ADHD/ADD</td>
<td>Autism</td>
<td>Amputation</td>
<td>Asperger's Syndrome</td>
</tr>
<tr>
<td>Autism, Cerebral Palsy, Chronic Disorders, Down Syndrome Learning Disability</td>
<td>Asperger's Syndrome</td>
<td>Cognitive Delay (=Intellectual Disability)</td>
<td>Autism</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>Cerebral Palsy</td>
<td>Health</td>
<td>Learning</td>
</tr>
<tr>
<td>Muscular Dystrophy, Seizure Disorders</td>
<td>Down Syndrome</td>
<td>Impairments</td>
<td>Disabiliy</td>
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<td></td>
<td>Seizure Disorder</td>
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<td>Severe Emotional Disorder</td>
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<td>Intellectual Disability</td>
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<td>Turner Syndrome</td>
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<td></td>
<td>Visual Impairment</td>
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**Paraprofessional**

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**IEP meeting**

<table>
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<tr>
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<th>Kim</th>
<th>Bob</th>
<th>Sam</th>
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<tr>
<td>occasionally</td>
<td>occasionally</td>
<td>never</td>
<td>rarely</td>
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Note. Accessible means in compliance with ADA standards.

Table H. 2. School Information
Interviews. All four GPE teachers completed two face-to-face interviews, which ranged from 30 to 60-minute each. Interview schedules were arranged on a weekly interval, giving the participants time to review the first interview prior to the second interview so that the researcher and participant were able to talk about the contents of the first interview as well. The probes used in the interviews were: (a) tell me about your physical education program; (b) how would you describe parental involvement in your physical education program; (c) what value would you place on parental involvement in physical education; (d) tell me about your experiences in the IEP process and your roles in IEP meetings; and (e) tell me about your relationships with the parents of children with disabilities. A total of eight interviews were completed in eight weeks. The interviews were all audio-recorded and transcribed verbatim. Interview transcripts were sent to the teachers via email two days after the interview was completed. The researcher asked them to review the interview transcripts for accuracy and identify for any misrepresentations or omissions. During the second interview, the researcher had dialogue with the participants about issues from the first interview sessions in order to confer the accuracy of meaning; then the researcher and teachers talked about the documents and photos that all participants brought into the session.

Artifacts. All four GPE teachers were asked to bring artifacts, including school documents (e.g. letters, memos, meeting agendas and notes, IEPs, notes sent home, newsletters, and lesson plans) and photographs, if they had any, relative to their communication with the parents of students with disabilities during the second interview. All four teachers provided school documents (IEPs, lesson plans, newsletters, behavior management plans, IEP-PE, report cards) and all but Sam provided photographs (yearly gym show, track and field meet, and physical education class session). All documents were copied with the permission of the teachers. Photographs were scanned and saved into a data folder stored in the researcher’s computer.

Researcher’s Journal. The researcher wrote a journal entry after each interview was completed. She sat down in a quiet place after each interview and recorded her reflections about what was said that day, ideas for further probing with subsequent participants, and preliminary thoughts about themes emerging from the stories.

Data Analysis

Both the interview transcripts and researcher’s journals were subjected to line-by-line thematic analysis (van Manen, 1997). Thematic analysis identifies common structures of the particular experiences under study and is the primary mechanism by which understanding was achieved (van Manen, 1997). It entailed reading the interview transcripts and the researcher’s journals numerous times. In particular, revealing phrases were highlighted and coded with meaningful labels. Codes that are
conceptually similar were gathered together into thematic statements, giving fundamental meaning to the experiences (Patton, 2002). The photographs and documents data were used to verify the thematic statements. Data were analyzed using the following steps:

1. the interviews were transcribed verbatim;
2. the transcribed interviews were repeatedly read to gain a broad understanding of the findings;
3. the researcher sought statements and phrases of significance that spoke directly to the research question during the reviewing process; and
4. the data were sorted by highlighting, coding and categorizing according to their similarities (e.g., values/perceptions, parents’ roles, relationships with the parents, and IEP process) and distinguishing elements, specific words and phrases were grouped and organized into preliminary themes.

Trustworthiness of Data

Trustworthiness for the preliminary study was obtained using Lincoln and Guba’s (1985) four criteria: Credibility, Transferability, Dependability, and Confirmability. Strategies to establish trustworthiness were summarized in Table 3.3. These criteria are defined later in this chapter (see Dissertation study).

- **Credibility** was enhanced by data triangulation (i.e., data from different female and male teachers at different schools) and member checking (Meadows & Morse, 2001). All four teachers reviewed their interview transcripts for accuracy after each interview. A summary of the thematic analysis was also sent to the teachers for review to determine and confirm that their experiences were accurately represented. All GPE teachers but Sam, reviewed it and then their comments were also returned via email.

- **Transferability** was increased by providing the description of teachers and their schools (thick description) and utilizing a purpose sampling (i.e., maximum sampling strategy) (Patton, 2002).

- **Dependability** or soundness to the findings was established by utilizing multiple data sources (i.e., interview transcripts, visual artifacts, documents, researcher’s journals).

- **Confirmability** was established through audit trails (Creswell, 1998). An audit trail permits external examination of the research process.
### Table H.3. Criteria for Trustworthiness

<table>
<thead>
<tr>
<th>Trustworthiness Criteria</th>
<th>Application to the Preliminary Study</th>
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</thead>
<tbody>
<tr>
<td>Credibility or Verification</td>
<td>Data Triangulation</td>
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<tr>
<td></td>
<td>- female and male teachers</td>
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<td></td>
<td>Member Checks</td>
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<tr>
<td></td>
<td>- Interview transcripts</td>
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<tr>
<td></td>
<td>- Summary of thematic analysis</td>
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<tr>
<td>Transferability</td>
<td>Thick Description</td>
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<td></td>
<td>- Participants’ demographic information</td>
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<td>- Description of schools and PE programs</td>
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<td></td>
<td>Purposeful Sampling</td>
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<td>- Maximum variation sampling</td>
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<td>Dependability or Validation</td>
<td>Multiple Data Sources</td>
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<tr>
<td></td>
<td>- Interviews, visual artifacts, documents, and field notes</td>
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<tr>
<td>Confirmability</td>
<td>Audit Trail</td>
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</tbody>
</table>

**Findings of the Preliminary Study**

The purpose of the preliminary study was to explore the meaning teachers construct regarding parental involvement in GPE. More specifically, the preliminary study was to describe (a) the value GPE teachers placed on parental involvement, (b) the meaning GPE teachers ascribed to the experiences of parental involvement in schools, (c) GPE teachers' experiences associated with the IEP process, and (d) their relationships with the parents of children with disabilities. Three themes emerged from the thematic analysis of the data and these were: (a) invaluable process, (b) parents are supportive but not active, and (c) IEP process as a pathway to building connections. The themes were also supported by sub-themes that further explicate the experiences of the GPE teachers (Table 3.4).

**Invaluable process** captures the interpretation of teachers' understanding of parental involvement in physical education. Parental involvement is an important and necessary component of children's educational experiences in terms of promoting skill development and increasing students' engagement in physical education. Owing to parental involvement, GPE teachers can better understand students' needs and create various opportunities to participate in class. They also perceived that when parents were involved in their children's physical education, the students demonstrated better performance. Students benefited from parental involvement by it promoting their skills (e.g., health and social benefits, skill development) and it enhanced their participation (active engagement) in physical education. In addition, parental involvement is a form of teamwork. Having the
support of parents (e.g., communication, program assistance), GPE teachers can more effectively solve problems, modify activity, and offer a wide range of opportunities to children who have disabilities.

Second theme, parents are supportive not active, expresses the degree to which parents were involved in physical education. These GPE teachers consistently stated that they received support from the parents of children with disabilities. For example, parents would come to school to observe their children’s performances if an invitation were sent home to them. Parents volunteered at school events if the GPE teacher requested their support. However, parents’ support in the GPE programs was passive in terms of only taking place when teacher’s request was made. Additionally, their involvement was limited to class observation and volunteering for field events (e.g., track and field meet, Jump Rope for Heart, Gym Show). No regular interactions were maintained between the GPE teachers and the parents of the children with disabilities. Communication with the parents of the children with disabilities was limited as a result of absences in the IEP meetings. This limited communication resulted in restricting the GPE teachers’ relationships with the parents of children with disabilities. GPE teachers had to rely on other school personnel in getting necessary support for the children with disabilities (i.e., special education teacher, APE specialist).

Lastly, the GPE teachers highlighted the importance of the IEP process in terms of promoting parental involvement. The theme, IEP process as a pathway to building connections, reveals that their involvement in the IEP process can establish a close partnership with the parents of children with disabilities. In particular, IEP meetings allow GPE teachers to advocate the importance of physical education and share information about students’ progress and teachers’ concerns to other IEP members, including parents, directly. By attending IEP meetings, GPE teachers can enrich their understanding about students (e.g., students’ interests and needs, parents’ expectations, students’ learning goals). Relating to students’ IEP information, GPE teachers can implement specific goal setting to course unit and appropriate instructional strategies (e.g. behavioral management, modifications and modified equipment, physical assistance from peers without disabilities or paraprofessional).
<table>
<thead>
<tr>
<th>THEME</th>
<th>SUBTHEMES</th>
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</thead>
<tbody>
<tr>
<td><em>Invaluable Process</em></td>
<td>• Students Do Better</td>
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<tr>
<td></td>
<td>• This is Teamwork</td>
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<tr>
<td><em>Parents are supportive not active</em></td>
<td>• Participation as response</td>
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<tr>
<td></td>
<td>• Lacking consistent direct communication</td>
</tr>
<tr>
<td><em>IEP process as a pathway to building connection</em></td>
<td>• Communication medium between parents and teachers</td>
</tr>
<tr>
<td></td>
<td>• Better understanding about students</td>
</tr>
<tr>
<td></td>
<td>• Resources for GPE instruction</td>
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Table H. 4. Summary of Themes