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A Comparison Study of Parents' Perceptions of Quality in Early Childhood Programs

Juanita Ortiz
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A COMPARISON STUDY OF PARENTS' PERCEPTIONS
OF QUALITY IN EARLY CHILDHOOD PROGRAMS

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ABSTRACT

A Comparison Study of Parents' Perceptions of Quality in Early Childhood Programs

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Research has demonstrated that high quality early childhood education (ECE) programs result in short and long-term benefits that are critical for children to reach their full potential and narrow the achievement gap. Parental involvement has been accepted as integral to quality ECE programs, and parental perception drives parental involvement. Perceptions and contributions of parents and caregivers including those who do not speak English have not been adequately addressed in the research. Furthermore, research has not addressed how parental perception regarding quality in ECE programs may vary according to whether their child has or does not have a disability.

This study examined parents and caregivers perceptions of quality and cultural sensitivity in their children's ECE programs and how perceptions may vary between parents and caregivers of children with and without disabilities. Of the 215 participating parents and caregivers, 51% spoke primarily Spanish, and their children— ages 3-5, with and without disabilities—attended early childhood, early childhood special education and inclusion classrooms in at-risk schools in a large, urban school district in the Southwest United States. Parents and caregivers' perceptions of ECE program quality were assessed with a 22-item questionnaire that was available in English and Spanish versions. Responses were recorded on a 5-point Likert-type scale.

The results were consistent with earlier research demonstrating parents could perceive quality indicators of ECE programs (Karrby, & Giota, 1995). This study extended previous research by demonstrating that Spanish speaking parents provided with a questionnaire translated into their home language also could accurately perceive quality and cultural sensitivity indicators in ECE programs. Parents and caregivers especially those who speak Spanish could make particularly valuable contributions to their children's success as the nation is projected to embark on its first year of educating a majority minority population (Duncan, 2014) consisting largely of Spanish-speaking families (U.S. Census, 2012).

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Dedicated to my sons, who have inspired me to be the best that I can be

Rakim Ortiz Robinson and Koltess Ortiz Robinson

May God bless both of you as you find your paths in life.

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LIST OF ABBREVIATIONS

CAB	Carolina Abecedarian Project
CEC	Council for Exceptional Children
CPC	Chicago Child-Parent Centers
DAP	Developmentally Appropriate Practice
DEC	Division for Early Childhood of Council for Exceptional Children
DOE	Department of Education
EAHCA	Education for All Handicapped Children Act
ECE	Early Childhood Education
ECSE	Early Childhood Special Education
ESEA	Elementary Secondary Education Act
FAPE	Free Appropriate Public Education
HSPP	High/Scope Perry Preschool Project
IDEA	Individuals with Disabilities Education Act
IDEIA	Individuals with Disabilities Education Improvement Act
IEP	Individual Education Program
IFSP	Individual Family Service Plan
LEA	Local Educational Agencies
MRI	Magnetic Resonance Imaging
NAEYC	National Association of the Education of Young Children
NCLB	No Child Left Behind
OSEP	Office of Special Education Programs
PARC	Pennsylvania Association for Retarded Children
PTI	Parent Training and Information
QRIS	Quality Improvement Rating System
RTT	Race To The Top
UDL	Universal Design for Learning

CHAPTER 1

INTRODUCTION

This descriptive comparative cross-sectional quantitative study examined ECE quality and cultural sensitivity from the perspective of parents and caregivers whose children were enrolled in publicly funded ECE programs located in the southwest United States. This study also examined how parental perception regarding quality and cultural sensitivity in ECE programs may vary according to whether their child has or does not have a disability which research has not addressed. For the purpose of this study, *high quality ECE* was defined as utilizing research-based best practice referred to as Developmentally Appropriate Practice (DAP) within regular education, special education, and inclusion early childhood programs.

Parenting variables inform parental perception (Cryer, Tietz, & Wessels, 2002) and can increase parental involvement, which will positively impact student performance (Anderson, & Minke, 2007; Marcon, 1999; Miedel, & Reynolds, 1999). Parent perception is defined as parental beliefs about child development associated with social-cultural variables, values, and belief systems (Scher, & Tirosh, 1997). Perception leads to parents understanding and knowledge of quality ECE. For this study, *Parental involvement*, also known as parental engagement, is defined as parent participation in academic learning and other student activities including a regular, two-way communication with educators (U.S. Department of Education, 2003). Parent involvement is a characteristic of quality early childhood programs. Quality ECE programs provide parent involvement which foster meaningful communication among

schools, teachers, and parents and provide volunteering, training and education opportunities for parents.

Further research on parental perception is critical given its influence on early academic success (Children's Aid Society, 2014; Ceglowski, 2004). The perceptions and contributions of parents and caregivers, including those who do not speak English (Enyeart, Diehl, Hampden-Thompson, & Scotchmer, 2006), have not been adequately addressed in the research (Ceglowski, 2004; Emlen, Koren, & Schultze, 1999; McNaughton, 2004; Zionts, Zionts, Harrison, & Bellinger, 2003). The 2014-2015 school year marks the first year the nation is projected to educate a majority minority population (Duncan, 2014) that is largely Spanish speaking (US Census, 2012). Longevity studies such as High/Scope Perry Project (HSPP) (Schweinhart, & Weikart, 1980), Carolina Abecedarian Project (CAP) (Campbell, Pungello, Miller-Johnson, Burchinal, & Ramey, 2001) and the Chicago Child-Parent Center Project (CPC) (Reynolds, Temple, Roberston, & Mann, 2002) have demonstrated that high quality ECE programs produce positive short and long-term benefits. Longevity studies and major events and issues over the last 53 years have influenced ECE programs in place today.

Background

Legislation supported through federal, state and local funding along with significant events have shaped ECE. In 1962, the landmark study HSPP focused on the effectiveness of a high quality early childhood program, which included comprehensive parent involvement services and opportunities. The study demonstrated that quality preschool programs can produce positive short-term and long-term outcomes for children

living in poverty (Schweinhart, Barnes, Weikart, Barnett, & Epstein, 1993). Follow-up data is still being collected on long-term outcomes.

In 1964, President Johnson's "war on poverty" legislation influenced ECE by advancing and originating programs to educate at-risk children. President Johnson believed ECE was an important strategy to reduce poverty (Caro, 2012) and help students acquire necessary skills to begin kindergarten.

The Elementary Secondary Education Act of 1965 (ESEA) addressed inequality of educational opportunity for underprivileged children (ESEA, 1965). Title I was established under ESEA, which provided funding to educate all children in schools with high percentages of low income students. Funding was used to provide support services such as preschool programs, libraries, and audio visual equipment. Over the years, funds have been used to add services such as family literacy programs, bilingual education programs, and migrant education. These programs emphasized the need for parental involvement. ESEA also influenced special education with the creation of Title VI, which created the Bureau of Education for the Handicapped known today as Office of Special Education (OSEP) (Legal Information Institute, n.d.).

The Economic Opportunity Act of 1965 created Head Start whose main goal was to provide educational opportunities including preschool programs for at-risk students (Office of Head Start, n.d.). Head Start began as a summer school academic program that provided medical, psychological, and health services to families. Head start programs provided a comprehensive parental involvement component including parent meetings, volunteering opportunities, health services and family advocates. Head Start was the first nationwide program to demonstrate that services provided to disadvantaged children

could enhance future school performance (Office of Head Start, n.d.) and provide substantial savings by reducing future expenses (Bryant, & Graham, 1993). For more than 50 years, Title I and Head Start have established the importance of ECE.

In 1966, ESEA was amended and established grants to help states develop, increase, and improve education services for children with disabilities (ESEA, 1965). Also in 1966, James S. Coleman's report, *The Equality of Educational Opportunity* (1966), referenced the achievement gap for the first time. Coleman used student performance to measure education equality. He initially found that at-risk African American students performed better in well-integrated classrooms. He also found that school and home environment factors influenced student performance. Home environment factors include parent involvement.

In 1972, Congress investigated the status of children with disabilities and found that more than a million children with disabilities did not receive education services. Also in 1972, two influential court cases, *Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvania (1972)* and *Mills v. Board of Education (1972)*, clarified that students with disabilities were entitled to the same education services that typical peers received (Mills, 1972; PARC, 1972). Section 504 of the Rehabilitation Act of 1973 prohibited discrimination against individuals on the basis of disability for programs or activities that received federal funding (U.S. Department of Health and Human Services, 2006).

The Education for All Handicapped Children Act of 1975 (EAHCA) stated that children have a right to education, and it established a process by which states and Local Educational Agencies (LEA) would be held accountable for providing services (EAHCA,

1975). EAHCA also mandated all school districts must ensure children with disabilities have access to Free and Appropriate Public Education (FAPE).

In 1980, President Carter established the Department of Education (DOE) to develop policy and administer federal funds for public school education (Peters, & Woolley, 1979). In 1983, a task force under the DOE released *A Nation At Risk* (U.S. Department of Education, 1983), which reported that public education was not well organized, not well funded, and lacked quality indicators.

In 1986, EAHCA (Public Law 99-457) extended FAPE to children ages 3 to 5 and established early intervention services for infant and toddlers ages 0 through 2 referred to as Part H. EAHCA also mandated Individualized Family Service Plans (IFSP) to identify services and supports to enhance the development of children with developmental delays. IFSPs are family focused services provided to the family including parent training and education to ensure children reach developmental goals. EAHCA and Section 504 clarified that students and parents have rights. Also in 1986, the National Association of the Education of Young Children (NAEYC), the largest organization in the United States that represents early childhood educators, published DAP, an approach grounded in research on effective teaching and how young children learn (Bredekamp, & Copple, 1997). DAP was a researched based framework that set the standard for early childhood programs

In 1989, during President George H.W. Bush's administration, governors from most states met at an Education Summit and established six goals for the nation: all students would start school ready to learn in safe schools, increased high school graduation rates, competency in english, math, history, geography, and science

demonstrated in the fourth, eighth, and twelfth grades, U.S. students would rank first in the world in science and math, and adults would be literate. As a result of the summit, authority over educational issues began to shift from local to federal government (States' Impact on Federal Education Policy, n.d.).

In 1990, EAHCA (P.L. 101-476) was amended and renamed as Individuals with Disabilities Education Act (IDEA). IDEA included transition services, outcome-based measures, and parental involvement (IDEA, 1991). Early Intervention Part C, formerly Part H, mandated interagency systems of early intervention services that were coordinated, comprehensive, and multidisciplinary (20 U.S.C. §631(a)(5)(b)(1)). In 1992, the Americans with Disabilities Act of 1990 (ADA), a federal civil rights law, stated that people with disabilities were entitled to equal access to state and local public services and public accommodations (ADA.gov, n.d.).

In 1994, under the administration of President Clinton, the Goals 2000: Educate America Act was passed. It established the National Education Standards and Improvements Council which provided an independent, voluntary certification of academic state standards and resources to states and communities to ensure that all students reached their full potential. The goals included that children would start school ready to learn, high school graduation rates would increase, and every school would promote parental involvement. The act focused on outcome-based education (States' Impact on Federal Education Policy, n.d) and supported parent involvement. One of the most important ideas resulting from this act was the understanding that parents are their child's first teacher. This act also strengthened parent involvement by requiring schools to create partnerships with parents.

The re-authorization of IDEA in 1997, Public Law 105-17, (20 U.S.C. §1431) required students with disabilities be included in state district-wide assessments and regular education teachers would participate on Individualized Education Program (IEP) teams. The revision to IDEA strengthened early childhood services through Part C, Part B, and section 619 programs. Part C infants and toddlers services provided programs for children birth through age 2 that are developmentally delayed or at a substantial risk of delay. Part B requires FAPE for children with disabilities age 3-21 years. Section 619 provides grants to all state education agencies for services to eligible children with disabilities (IDEA, 1997).

ESEA was reauthorized as the No Child Left Behind (NCLB) Act of 2001 and was signed into law by President Bush. NCLB promoted various education goals, and among them were parental involvement goals. The Act required schools to create partnerships between schools and families, provided a definition for parental involvement, and funded parent involvement activities. The federal government recognized that parents with children with disabilities needed parent training and support; Parent Training and Information (PTI) programs were funded and located in every state.

IDEA was re-authorized as the Individuals with Disabilities Education Improvement Act (IDEIA) of 2004 to provide an education that met a child's unique needs and prepared the child for further education and independent living. The act protected the rights of parents and their children with disabilities. IDEIA strongly supported parent rights and involvement in the special education services their children received. The act also required more accountability from local and state level agencies in the form of outcome based data.

In 2010, under the Obama administration, Race to the Top (RTT) was funded to improve early learning and development programs for children. RTT provided financial resources to states to increase the enrollment of children in high quality ECE programs. RTT encouraged states to design and implement integrated system of services for children. RTT guidelines required assessments reports on early childhood conform to the National Research Council policies. States responded by improving, creating, and implementing Quality Improvement Rating Systems (QRIS) (U.S. Department of Education, n.d.).

Various federal and state funded programs providing services to at-risk families were intended to increase academic achievement and overall well-being of young children: Home Instruction for Parents and Preschool Youngsters/Parents As Teachers (HIPPY/PAT), state-funded Pre-K, Early Head Start, and Early Start (U.S. Department of Health Resources and Services Administration, n.d.). These programs focused on parent involvement with training and education for parents to support them in helping their children improve pre academic skills prior to entering kindergarten and help close the achievement gap. Many educational policies have been recommend to close the achievement gap among them quality ECE programs (Heckman, 2011; Heckman, & Masterov, 2004; Lee, & Burkam, 2002; Lynch, 2005; Magnuson, & Waldfogel, 2005; Rolnick, & Grunewald, 2003), which incorporate high quality teachers (Sanders, & Rivers, 1996), cultural responsive instruction (Delpit, 2006; Garcia & Jensen, 2009), parent involvement (Sanders, & Rivers, 1996), and reflective practice (Barnett, 2004a). Sufficient research exists to confirm that high quality pre-school programs with these

characteristics have positive effects on academic outcomes including narrowing the achievement gap (Rolnick, & Grunewald, 2003).

Achievement Gap

The achievement gap is defined as differences in scores on state and national achievement tests between various student demographic groups (Anderson, Medrich, & Fowler, 2007). Research data on the achievement gap has been collected for over 47 years and has demonstrated that a gap exists for lower socioeconomic status students and some diverse students in the United States and globally (Spence, 1995). Most students of low socioeconomic status perform lower than higher socioeconomic peers; the gap widens as the income decreases (Denny, Itkonen, & Okamoto, 2007; Garcia, & Jensen, 2009). Children of low socioeconomic families are least likely to attend preschool (Barnett, 2011; Lopez, 1999). The 2010 national Census data showed an increase in children under 5 living in poverty: more than one out of every five children in the United States lives in poverty (U.S. Census, 2012). The majority of these children are from families with diverse backgrounds. For children living in poverty, only about half receive early childhood services (Frede, & Barnett, 2011). As family income increases, so does the enrollment of their preschool children (Barnett, 2011; U.S. Census Bureau, 2012).

The achievement gap can be seen on a variety of measures, such as standardized test scores, grade point average, high school dropout rates, college enrollment rates, and college completion rates. Research has shown the achievement gap, which often is first measured by standardized tests in elementary school, is actually a “school readiness” gap that begins well before students reach kindergarten (Burchinal et al., 2011; Halle et al., 2009). This early disparity in performance is critical, as research has shown once students

are behind, they do not catch up (Chapin, 2007). Children who perform poorly on tests of cognitive skills before starting kindergarten are likely to be low performers throughout their school years (Chapin, 2007). The achievement gap is an underlying issue that has influenced education funding and legislation in the United States. The importance of high quality ECE programs has been established by longitudinal studies and research on brain development. The trajectory of a child's academic performance can be improved with high quality early childhood programs.

Quality Early Childhood Education: The Critical Years

Early childhood is a time of significant cognitive, social, emotional, and physical growth (Bredekamp, & Copple, 1997). Early childhood is characterized as the ages from birth to age 8 (NAEYC, 2009). Early childhood development is generally divided into three age categories (Bredekamp, & Copple, 1997); birth to age 2, 3 to age 5 and, 6 to age 8. The first age category birth to age 2 includes infants and toddlers. The most important factor for young infants (birth to 8 months) begins with attachment which is acquired during infancy (Brandt, Perry, Seligman, & Tronick, 2013). Between the ages of 9 to 18 months, infants become mobile and are mostly concerned with exploration. Between 18 and 36 months, the central focus of development is identity, as children become more independent. During this period infant and toddlers are building a foundation for language. Stimulation and nutrition are essential for development during the first two years of life (Brandt et al., 2013).

The second age category of early childhood development age 3 to 5 includes preschoolers. According to Bredecamp and Copple (1997), this period of development is characterized by rapid gross motor development (e.g., jumping, hopping, skipping),

refined movement of small muscles for object manipulation, major increases in vocabulary, use of language, abstract representation of mental constructs, and the development of relationships with other young children. According to Brandt et al. (2013), one of the core strengths at this age is social emotional development, such as self-regulation, as children begin to have the ability to notice and control urges. Parents are the first to establish external regulation while children begin to self-regulate. Another core strength at this age is affiliation, children begin to form the ability to join others and contribute to a group (Brandt et al., 2013). During this age, children also begin to experience self-awareness and tolerance. Self-awareness includes the capacity to begin to recognize and value the abilities and strengths of others. Tolerance builds on self-awareness as children begin to build the capacity to understand and accept others are different from them. The early years are a prime time for children to develop social emotional skills which are critical for all children (Derman–Sparks & ABC taskforce, 1989). Cognitive, social emotional, language, and motor skills are developing at unprecedented rates during the preschool years.

The final category of early childhood development includes children who are 6 to 8 years of age. According to Bredekamp and Copple (1997), children's development during this time includes refined gross and fine motor skills. Children are able to perform more controlled movements and sequence motor skills. In the cognitive area, students begin to demonstrate greater reasoning, problem solving, and assimilation skills. During these years in the communication area, children's vocabulary increase at a rapid pace. Written skills develop as students are able to express themselves better. Socially, primary-aged children begin to understand others' perspectives, are concerned with

fairness, and monitoring their own behavior. According to Brandt et al. (2000), students reach a level of respect which is based on the core strengths: attachment, self-regulation, affiliation, self-awareness, and tolerance. Respect is having the capacity to respect oneself and others. The early years are a critical time of development for children and high quality programs are necessary to help children develop to their full potential.

According to Bronfenbrenner (1982), research studies on high quality preschool programs have shown positive long-term effects. These programs were successful because they provided concrete resources such as education, parental involvement, healthcare, and food (Bronfenbrenner, 1982). Bruner (1983) stated that what happens in the home is extremely important to a child's development. Children can benefit most from high quality care and learning experiences (Davis, 2009; Love, Schochet, & Meckstroth, 1996) during early childhood --the most active years of brain development (Nelson, 2000).

Longitudinal studies have demonstrated high quality early childhood programs that contained comprehensive parental involvement components produce positive short and long-term benefits (Muenning, Schweinhart, Montie, & Neidell, 2009; Reynolds et al., 2002; Schweinhart et al., 1993). These longevity studies demonstrated short-term benefits such as increased academic achievement, lower rates of special education services, lower rates of grade retention, and lower rates of teenage pregnancy. Long-term benefits included higher high school graduation rates, higher college enrollment, higher incomes and lower incarceration rates and lower rates of public assistance. Parental perceptions are critical as they drive parental involvement. The studies have

demonstrated that parental involvement is essential to achieve positive short and long-term benefits in high quality ECE programs.

The most positive gains were seen in children from low socioeconomic households especially children from diverse backgrounds who attended high quality preschools that provided parents with training and support. Research has established that quality early childhood programs that include parental involvement provide short and long-term benefits (Bloom, 1984; Bronfenbrenner, 1982; Niles, & Peck, 2008; Schweinhart, & Weikart, 1997; Weikart, 1971). Parental involvement which is associated with perception is an important component of DAP which has been accepted in the field of early childhood as the framework for high quality early childhood programs.

NAEYC defines high quality ECE as an environment that is safe and nurturing while promoting physical, social, emotional, and cognitive development of children and being responsive to family needs. DAP is a broad framework which includes three core considerations related to knowledge of child development, the individual child's strength and the social and cultural context. DAP contains twelve principles of child development and learning, five guidelines for effective teaching and ten suggested teaching strategies (NAEYC, 1986).

Quality early childhood programs are measured through quality indicators. Research has identified two distinct sets of indicators, process and structure (Harms et al., 2005; Cryer, Tietze, Burchinal, Leal, & Palacios, 1999). Process quality indicators refer to experiences children encounter in the early childhood program such as interactions, materials, and activities. Structure quality indicators refer to characteristics of the early childhood program such as adult-child ratio, small group size, and class size (Espinosa,

2002). High quality preschool programs demonstrate several characteristics, among them highly qualified teachers, low staff to child ratios, small group instruction (Bloom, 1984), child –directed experiences (Schweinhart & Weikart, 1997), high teacher expectations for students as well as the families (Ramey, & Campbell, 1984; Schweinhart et al.,1993), parent involvement, culturally responsive instruction (NAEYC, 1986) and reflective practice (Barnet, 2004a).

Culture and Climate

Culture and climate are important factors for high quality early childhood programs. Culture is described as a set of common expectations such as unwritten rules, belief systems, and customs that staff conform to in a school. The culture produces the climate of the school. Climate can be thought of as a state of mind, fluid, flexible and easy to change and grounded in perception Gruenert (2008). Culture and climate influence parents’ perceptions and involvement in their children’s school.

Cultural sensitivity is associated with culture and climate, it refers to understanding that cultural differences as well as similarities exist and have an effect on values, learning, and behavior (Stafford, Bowman, Ewing, Hanna, & Lopes-De Fede, 1997). Cultural sensitivity is derived from the field of multicultural education which is based on promoting equitable education to all students (Nieto, 1992). Multicultural refers to diverse students representing many dimensions including ability, age, income, language, race, ethnicity and lifestyles (Banks, 2013).

Early childhood programs especially those serving at- risk students must value students, their language, families, heritage, and culture (Bridges & Dagys, 2012; Cardenas & Cardenas, 1977; Division of Early Childhood, 2010). This is especially

important as a growing number of school districts across the country are becoming majority minority districts (Duncan, 2014) with predominately Spanish speaking families (U.S. Census, 2012). According to Denny et al., (2007) many education practices and beliefs are outdated; many of these educational and socializing practices promote inequities and impede learning for diverse students (Banks, 2013; Bruner, 1975; Diaz, 2001). Schools have a tendency to cling to traditional values and beliefs that pose obstacles to research based best practices and limit student engagement and performance. Historically and currently, these values and beliefs have influenced policies and practices (Banks, 2013) that have disenfranchised diverse families (Valencia & Black, 2002). Cultural sensitivity (Ford, 2014), cultural knowledge, and culturally responsive instruction are an essential part of high quality early childhood programs.

Early Childhood Special Education

The perceptions of parents of children with disabilities in ECE programs are critical. Families with students between the ages of three-five with disabilities represent 13.24% of the population (U. S. Department of Education, 2014). According to OSEP in 2011, nationally 745,349 children received special education services as documented with an IEP (U. S. Department of Education, 2014). Students with disabilities are those who have qualified for special education services under the IDEA. Special education services can range from individual therapy sessions each week to a full day pre-school program.

Council of Exceptional Children's (CEC) Division of Early Childhood (DEC) and NAEYC (2009) published a joint position statement which defined high quality inclusion programs. High quality inclusion programs include access, participation, and support

including family involvement. Access refers to programs that provide a broad range of learning opportunities, activities, settings and environments. Some examples include Universal Design for Learning (UDL) for example, removing physical and structural barriers in the classroom or adding technology which can help children participate in activities. Participation refers to staff promoting belonging and engagement by using a variety of instructional strategies such as varying intensity, individualizing play, and learning activities. Support refers to programs providing opportunities for education and training such as professional development for staff, parent education, and parent training. Support also refers to quality frameworks including standards and professional competencies that reflect guidelines for inclusive practices (NAEYC/DEC, 2009).

Early intervention is based on best practices and long-term research studies that support the idea that children are at their optimal learning capacity during preschool years (Edie & Schmid, 2007). Research findings have long-established the earlier the intervention the more positive effect on the child's development (Davis, 2009). Early intervention can make a difference in the lives of young children with disabilities. For students receiving early childhood special education services, programs offer the opportunity to remediate disabilities and extended learning opportunities needed for academic success (Odom, Teferra, & Kaul, 2004).

Families with children with disabilities may encounter increased stress due to difficulty in coping with the disability (Friend, 2011) which may impact their perception of ECE. Families often have increased medical expenses, higher divorce rates, and difficulty in obtaining needed resources. Families with children with disabilities have higher rates of single parent homes (Bloom, Cohen, & Freeman, 2011). These families

also constitute a larger percentage of diverse students (Bloom et al., 2011). Students of low socioeconomic status are more likely to be eligible for special education services (Bloom et al., 2011). The early childhood years are important to the development of pre academic skills for students with disabilities. This prime learning period is even more critical for students with disabilities (Davis, 2009).

Parental perception is critical for parents of children with and without disabilities as it improves parental involvement, helps students reach their full potential, increases students' academic performance, increases teacher quality, and improves long-term positive outcomes for students including narrowing the achievement gap. Although quality ECE is important, existing research on parental perception of quality ECE programs is limited. Several studies have demonstrated parents may rate quality of ECE programs higher than professionals in terms of quality of the environments (Barnett, 2004a; Cryer et al., 2002; Cryer & Burchinal, 1997; Karrby & Giota, 1995). However, research has not addressed how parental perception may vary according to whether their child has or does not have a disability. Consequently, the results of this study have implications for ECE and special education researchers, practitioners, and policymakers.

Statement of the Problem

Parental perceptions' related to the quality of early childhood programs are critical because parental perceptions inform parental involvement. Quality early childhood programs which include parental involvement result in positive outcomes for children including narrowing the achievement gap and help all students perform at their optimal level. Research has existed for over 50 years that demonstrates that quality pre-school programs have short and long-term positive effects (Schweinhart et. al, 2005). The

most positive achievements are seen in children from low socioeconomic households when have parent involvement opportunities (Schweinhart & Weikart, 1997).

Research Questions

These questions were designed to examine parents and caregivers' perceptions concerning the quality and cultural sensitivity of ECE programs their children with and without disabilities attended.

The research questions were:

- 1- Do parents and caregivers perceive that their children attend quality early childhood programs?
- 2- Is there a difference in parental perception in the quality of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?
- 3- Do parents and caregivers perceive that their children attend culturally sensitive early childhood programs?
- 4- Is there a difference in parental perception in the cultural sensitivity of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

Purpose of the Study

The purpose of this study was to examine parental perceptions of ECE programs relating to quality and cultural sensitivity. Responses of parents and caregivers of children with and without disabilities were compared. Data were synthesized to create a clear picture of how parents and caregivers perceived ECE programs. The results of this

study will have implications for the field of ECE, special education researchers, practitioners, and policymakers.

Significance of the Study

Research that examines parent perceptions of quality and cultural sensitivity of ECE programs is critical in the field of ECE. Parents and caregivers who have knowledge and understanding of quality early childhood programs may perceive quality ECE programs correctly. Parental perceptions are closely associated with parental involvement (Green, Walker, Hoover-Dempsey, & Sandler, 2007) which leads to positive academic and lifelong success for children. ECE programs that have comprehensive parent involvement components have positive outcomes that are critical to help narrow the achievement gap (Schweinhart & Weikart, 1997). Consequently, as the demographics of school age children shifts this study is important for enhancing researchers' understanding of parent perceptions related to quality and cultural sensitivity in ECE.

Limitations

The participants in this study were limited to families who had children age 3 to 5 attending publicly funded ECE programs such as Title I, State-Funded Pre-K, Early Childhood Special Education (ECSE), and Head Start. The parents' perceptions of the educational system for grades K-12 is important, but was beyond the scope of this study. Due to the design of the study the use of non-probability convenience samples may not have been representative of the population and may limit generalization of the findings. The questionnaire instrument developed for the study lacked demographic questions related to race, ethnicity or type of disability which may have assisted in the interpretation of the data.

Definitions of Terms

Achievement gap: Differences in scores on state and national achievement tests between various student demographic groups (Anderson et al., 2007).

Caregiver: An individual that ensures that children are healthy, safe, and equipped with the skills and resources to succeed as adults (American Psychology Association, n. d.)

Climate: The collective mood and moral of the staff (Gruenert, 2008).

Culture: A set of common expectations such as unwritten rules, belief systems, and customs that staff conforms to in a school (Gruenert, 2008).

Cultural sensitivity: Being aware that cultural differences as well as similarities exist and have an effect on values, learning, and behavior (Stafford et al., 1997).

Developmentally Appropriate Practice: An approach to teaching grounded in the research on how young children develop and learn and in what is known about effective early education (NAEYC, 2009).

Early Childhood Education: Any part- or full-day group program in a center, school, or home that serves children from birth through age 8 (NAEYC, 2009).

General Education Classroom: A classroom where general education students are educated (National Dissemination Center for Children with Disabilities, n.d.).

Highly Qualified Teachers: A teacher who is fully certified and/or licensed by the state, holds at least a bachelor degree from a four-year institution, and demonstrates competence in each core academic subject area taught (US Department of Education, 2004).

High Quality Early Childhood Program: Programs that utilize research-based best practices within special education and regular education programs, including providing a safe, nurturing environment that promotes the physical, social, emotional, and cognitive development of young children while responding to the needs of the families (NAEYC, 2009).

High Quality Inclusion: Early childhood programs that include access, participation, and support (DEC/NAEYC, 2009).

Multicultural Education: A field of study and an emerging discipline whose major aim is to create equal opportunities for diverse students (Banks, & Banks, 1995).

Parental Involvement: Also referred to as parental engagement, it is the participation of parents in regular, two-way, and meaningful communication involving student academic learning and other school activities such as parent education and training (U.S. Department of Education, 2003).

Parental Perception: Parental beliefs about child development associated with social-cultural variables, values, and belief systems (Scher & Tirosh, 1997).

Process quality indicators: Process quality indicators refer to experiences children encounter in the early childhood program such as interactions, materials, and activities (Espinosa, 2002).

Socioeconomic Status: Conceptualized as the social standing or class of an individual or group. It is often measured as a combination of education, income, and occupation (American Psychological Association, 2013).

Structure quality indicators: Characteristics of early childhood programs such as adult-child ratio, group size, and class size (Espinosa, 2002).

The study examined parents' perceptions of quality and cultural sensitivity of ECE programs. The study also examined the perception differences between parents and caregivers who had children with and without disabilities. Research has not adequately addressed parental perception related to quality of ECE and how parental perception of programs' quality may vary according to whether their child has or does not have a disability. This study adds to the current body of research on quality early childhood programs by examining ECE quality from the perspective of parents and caregivers whose children were enrolled in a public ECE program. The next chapter will review the literature in the areas of parental perceptions, quality early childhood education and early childhood special education.

CHAPTER 2

LITERATURE REVIEW

This chapter will review, analyze, and summarize the existing literature related to parental perception and quality early childhood programs for general and special education students. A systematic search through computerized data bases included the Professional Development Collection, Education Resources Information Center (ERIC), Education Full Text, Education: A Sage Collection, Child Development and Adolescent Studies, and Journal Storage (JSTOR). The following descriptors were used: early childhood, early childhood special education, early childhood quality programs, parental involvement, parent perception, culture and climate, high quality inclusion and cultural sensitivity. In selecting research literature for this study, the following criteria were followed: (a) related to parental perception and parental involvement, (b) defined quality early childhood programs, (c) related to culture, climate, and cultural sensitivity in early childhood programs, (d) defined quality early childhood special education programs.

Issues Related to Parent Perception

According to Anderson and Minke's (2004) parents and teachers reported different perceptions of parent involvement. Educators saw parent involvement as helping the school reach its goals, but many parents, especially those of diverse backgrounds, saw schools as solely responsible for education. According to Scher and Tirosh (1997), parenting is deeply rooted in cultural traditions, practices, beliefs, and attitudes. Sociodemographic factors are associated with perceptions, expectations (Scher & Tirosh, 1997) and satisfaction. It is critical that researchers examine parental perception of satisfaction and dissatisfaction of ECE programs.

According to McNaughton (1994), parent satisfaction is essential, although it is rarely investigated. McNaughton (1994) reviewed current practices in the measurement of parent satisfaction of early childhood programs. Only 14 articles were included in the study and the criteria for selection included articles published between 1986 and 1992. The articles examined early childhood services for children ages birth to 6 with parent satisfaction as a dependent variable. The tools used to measure satisfaction varied from quantitative to qualitative measures such as telephone and personal interviews as well as questionnaires. Each of the tools was individually developed.

McNaughton's (1994) findings overall demonstrated that parent satisfaction results were high. Although some studies did differentiate the level of satisfaction, only three studies reported dissatisfaction. The author stated parent satisfaction measurement was in its infancy. He also reported that research on the measurement of parent satisfaction was limited as was research to guide the collection and interpretation of data. He suggested future studies utilize a Likert scale with varying degrees of satisfaction, such as, 1-not satisfied to 5-very satisfied. McNaughton (1994) recommended collecting demographic data such as socioeconomic level, age, and parent role which would be instrumental in assisting with interpretation of data. McNaughton (1994) suggested participants should be guaranteed anonymity and provided detailed explanation of the purpose of the study along with the use of the data. McNaughton (1994) stated parent satisfaction research can be used as a formative decision making tool to develop programs that effectively meet the needs of parents. Research can also help measure the relationship between parent satisfaction and parent behavior which may be viewed differently depending on the role of the individual (McNaughton, 1994).

Zionts et al. (2003) examined parent perceptions related to cultural sensitivity in special education programs. The authors interview 24 African American families with children with moderate to severe emotional or cognitive disabilities to explore satisfaction with cross cultural sensitivity within special education systems. The authors used a semi-structured phone interview to collect the data. The major themes that emerged from the study were lack of respect for parents and children, negativity toward parents and children, need for more community assistance information, desire for more cultural understanding, lack of staff demonstrating acceptance, concern of teacher quality and training, and need for improved parent teacher partnerships. The findings demonstrated that parents were dissatisfied with programs, 64% of parents felt a lack of respect toward them and their children, 50% of parents perceived negativity towards them and their child, and 57% reported no evidence of cross cultural sensitivity. Authors recommended more research to understand parent perceptions.

According to Green et al. (2007) parental involvement enhances school outcomes for children. The study examined parents' motivational beliefs, perceptions of invitation to involvement, and perceived life contexts believed to predict parental involvement. The study examined how variables such as socioeconomic status, parent's age, and children's grade levels impacted involvement. Parental involvement was shaped and influenced by role construction based on experiences and beliefs. The Hoover-Dempsey and Sandler model of the parent involvement process examined parent involvement from parents' perspectives and was based on five levels. First, parent's effectiveness of helping the child succeed in school. How parent's decision to become involved in school is influenced by demands and opportunities for parent involvement. Second, parent

involvement choices are influenced by whether teacher or child invite parent, parent's skills and knowledge, family employment and other demands. Third, how instruction such as reinforcement, modeling, and open- and closed-ended options impact parental involvement. Fourth, parents' use of developmentally appropriate involvement strategies and the fit between parent's actions and school expectations. Fifth, child outcomes related to skills, knowledge, and effectiveness for doing well in school.

Participants in the Green et al. (2007) study included 853 parents whose children attended a metropolitan public school system in the United States with a diverse population. A questionnaire utilizing the Likert scale was used to gather data on a variety of areas such as parents' motivational beliefs, perceptions of invitations, perceptions of life contexts, involvement practices, and children's age-related differences. The researchers found parental involvement decreased as students grew older and were impacted by specific teacher invitations. Parental home involvement was impacted by the parents' perceptions of time and energy, their children's invitation, and the parents' self-efficacy. Self-efficacy was a strong predictor of home involvement but a negative predictor of school involvement. The author's recommended future research examines the development of parent involvement motivations and their impact, especially for families at each grade level. The researchers concluded that examining parental perceptions is critical to general education and special education students.

Anderson and Minke, (2007) examined parent involvement related to the Hoover-Dempsey and Sandler model of parental decision making. The study included 431 participants who attended three elementary schools in a large urban school district with a diverse population. The study included a variety of measures with items that covered

themes such as role construction, sense of efficacy, resources, specific teacher invitation, and parent involvement practices. The finding revealed parents reported more involvement at home than at school. Specific teacher invitations were the single most influential effect on parent involvement behavior. Parent resources did not impact parent involvement decisions. According to the authors, research on parent decisions related to parental involvement was just beginning to be explored and understood.

According to Spann, Kohler, and Soenksen (2003) parent involvement leads to positive outcomes for children with disabilities. The study examined families' involvement and perceptions of their children's special education services. The study included 45 families in the Mideastern United States who had children with Autism. The children ranged from 4-18 years of age. The parents were interviewed with a 15 item questionnaire. The items related to educational placement, type of special education services received, frequency and nature of parents' communication with school personnel, parent's knowledge about the involvement in their child's education, and overall satisfaction with school services. The results included that parents' home –school communication was related to child performance and occurred on a regular basis with the special education teachers and paraprofessionals more often than general education teachers. Communication was received through face-to-face contact, meetings, notes, and phone calls. Results demonstrated a high percentage of parents (44%) perceived staff was doing little to nothing to address their child's most current needs. Parental levels of satisfaction decreased as student age increased for all areas, including communication, IEP process, and addressing the needs of children. The authors recommended further research examining parent satisfaction and perception.

Emlen et al. (1999) designed a study to develop a tool to measure parents' perception of assessment of childcare quality. He also examined social and economic aspects of families that account for childcare quality. He examined how parents' data, interests and voices contribute to policy in ECE. Emlen et al. (1999) concluded there is a need for parent measures on the quality of childcare especially a need to capture parent's specific detailed perceptions of their child's experience in childcare. The study included 862 participants who completed a survey that consisted of eight scales and total of 55 items the questionnaire took 15-20 minutes to complete. There were 222 participants with children with disabilities and the median age of the children in the study was 3. The results revealed parents overall reported higher levels of childcare quality. Emlen et al. (1999) reported flexibility and accessibility of childcare accounted for differences in quality of care ratings.

Emlen et al. (1999) examined one subset sample of parents whose children attend a quality childcare center and one subset sample of parents who children attended a lower quality childcare center. The responses demonstrated that parents rated the quality indicators high in the high quality center and the parents of the low quality center rated the center low on the quality indicators. Parents' correct responses suggest that some parents are able to rate quality in childcare centers correctly.

According to Fantuzzo, Perry and Childs (2006) parents' demographic factors impact satisfaction ratings. The study used a scale of parent satisfaction and educational experiences to measure satisfaction. The study included 648 parents who had children in preschool, kindergarten and first grade in an urban area. The study measured satisfaction with teacher contact, classroom contact and school contact experiences. Results indicated

married parents were more satisfied with teacher contact while employed parents were found to be more dissatisfied across all three areas. The study also found higher satisfaction rates among parents with preschoolers than older students. Recommendation for future studies included examining relationship between satisfaction and family involvement behaviors and examining how they may change over time.

Cleveland, Susman-Stillman, Halle and Blasberg (2013) conducted a three year study to examine how parents and providers perceive ECE quality which can provide information to improve QRIS. Parents were asked to rate the importance of quality components such as family sensitive caregiving practices, DAP, cultural sensitivity and strategies to support social emotional development. The sample size was 19 families. Data was collected using surveys during a semi-structured phone interview. The authors concluded that parents rated DAP and practices of family sensitivity as important. Parents were asked which constructs within the indicators would be easy for providers to implement. Parents were able to identify and discuss what indicators they thought would be easy to implement such as providing materials for children as toys are readily available in any childcare center. Approaches of cultural responsive caregiving did not rate as high. Researchers suggested that parents may not have been comfortable discussing culturally responsive indicators and may not have seen them as a part of quality in ECE programs.

Future recommendations include examining parents' views about family sensitive caring and culturally responsive care giving practices. According to Cleveland et al. (2013) parent perceptions are critical as they inform programs and policymakers and

QRIS frameworks. Parent perceptions can also provide opportunities for parent education and collaboration to improve ECE programs. It is vital that parents support and use QRIS.

In summary, the existing research on satisfaction related to perception revealed that research on measurement of parent perception was limited; although research on parent perception is essential, it is rarely investigated (Anderson & Minke, 2004; Emlen et al., 1999; McNaughton, 1994.) Existing research also found that parental involvement was shaped and influenced by role construction, based on experiences and beliefs (Anderson & Minke, 2007; Green et al., 2007). Furthermore, parenting is deeply rooted in cultural traditions, practices, beliefs, and attitudes. Sociodemographic factors were associated with perceptions and expectations (Scher & Tirosh, 1997) and satisfaction.

Issues Related to Quality ECE

Longitudinal Studies

The quality of ECE has been researched since the 1960's utilizing longitudinal research studies beginning with the classic HSPP study. The HSPP examined how high quality preschool programs produced positive short and long-term outcomes for children living in poverty who were at high risk of failing in school (Schweinhart et al., 1993). The study began in 1962 and followed 123, 3 and 4 year-old children who were at risk of school failure. The hypothesis of the study was that human intelligence and the ability to do well in school could be improved with high quality preschool programs. Participant selection was based on socioeconomic levels, such as head of household income and ratio of the number of rooms in the home to the number of people living in home. Researchers administered the Stanford-Binet Intelligence Test on participants. Participants were then assigned to two groups attending preschool or not attending preschool. The preschool

program, which 58 of the children attended, consisted of 2½-hour programs, 5 days a week for 7½ months. Students received high quality early childhood preschool services including comprehensive parental involvement components focused on empowering parents, monthly parent meetings and home visitation. The program provided staff to assist families in locating and accessing community resources. The monthly meetings focused on child development and helped parents learn how to support their children. Teachers received extensive training and visited each family in their home for 1½ hours a week where teachers modeled activities for parents. The study collected data in three areas: scholastic success, socioeconomic success, and social responsibility.

During the initial phase, the study demonstrated children who were enrolled in a quality preschool program scored higher on achievement tests. In subsequent years the study demonstrated that students were less likely to be retained at grade level, and require special education. Schweinhart et al. (1993) followed the HSPP students' progress into adulthood. The researchers found at age 15, participants demonstrated lower rates of special education services, higher scores on measures of achievement, and fewer delinquent behaviors (36% compared to the control group's 52%). At age 27, the participants demonstrated higher rates of monthly earnings, home ownership, second car ownership, higher levels of schooling completed, higher projected lifetime earnings and increase tax revenue for society. Participants had lower rates of public assistance, social services, and incarceration. The program's return on investment was calculated at \$7.16 for every dollar invested in preschool (Schweinhart et al., 1993). At age 40, participants continued to demonstrate positive long-term benefits. The program return on investment

was updated to \$12.90 for every dollar invested in preschool (Belfield, Nores, & Barnett, 2006).

Campbell et al. (2012) conducted the CAB, it was a systematic controlled scientific study of the potential benefits of a child-centered prevention-oriented intervention program. The CAB also established that intensive ECE can overcome developmental delay and school failure for low income children. The purpose of the project was to demonstrate that a team of multidisciplinary educators could prevent the developmental retardation of disadvantage children (Campbell et al., 2001). The program provided services for children from 6 weeks to 5 years of age, and it focused on development of children's cognitive, social emotional, and motor skills. One hundred nine (109) participants were selected using results from a high-risk index that included sociodemographic risk, parental education, family income, marital status of parents, parental Intelligence Quotient (IQ), and use of public assistance. Of 109 families, two were Caucasian and 107 were African American. Seventy-six percent (76%) of families were female head of household, and 66% of mothers did not have a high school diploma. All participants were from low income families. Social service referrals were provided for all subjects in both control and experimental groups. Participants in the experimental group received health care, transportation, parent training, high quality day care/preschool, meals, and snacks. Students were engaged in activities focused on cognitive, social, and emotional development with an emphasis on language. A resource teacher was assigned to each family. The resource teacher provided a range of services including preparing homework activities aligned with the class curriculum, tutoring

children during the school year and summer, training parents, advocating for families in the school and community, and providing home visits.

Early findings demonstrated enhanced cognitive development for students receiving services. By age 3 participants in the experimental group demonstrated higher IQs, participants showed increased academic performance during elementary school years. At age 15 participants displayed higher reading and math achievement scores, lower grade retention rates, lower teen pregnancy, and less depression. At age 21, participants had greater probability of college enrollment, higher paying jobs, less drug use, entered parenthood at a delayed age as compared to control group (Ramey et al., 1982). The follow-up study at age 30, demonstrated continued long term benefits. Findings revealed that 83 % of preschool students had earned a high school diploma compared to 72% for students who did not attend preschool. Of students who had attended preschool 23% had earned a bachelor's degree compared to 6% of students who had not received preschool services. Students who did not receive services were six times more likely to use public assistance. No significant differences were found in other areas such as age at marriage, employment income, and incarceration rates. The return on investment was calculated at a savings of \$2.50 for every dollar spent in early childhood services (Muenning et al., 2011). The studies demonstrated that the trajectory of a child's future can be changed with quality ECE programs.

Reynolds, Temple, Robertson and Mann (2001) conducted the CPC study which was a multisite federally funded study that examined the effects of early and extensive intervention in Chicago Parent Centers. The study was a quasi-experimental design with an alternative intervention. The program focused on literacy, highly-trained staff and

intensive parental involvement. The goals of the project included understanding the effects of the program on academic and behavioral development, monitoring academic achievement and future expectations. The study consisted of 989 participants, who received services from age 3 to 9 in 25 schools located in high-poverty neighborhoods. The preschool program provided services for 3 hours a day, 5 days a week, 9 months out of the year and a 6-week summer session. The early childhood program contained a teacher with a master's degree in each classroom who used child-initiated curriculum, teacher-directed activities, whole and small-group instruction, field trips, and literacy focused activities. The parent involvement component included home visitation, volunteering, attending meetings, training, field trip participation and health services. The program had a school-community representative for community outreach. The program promoted the idea that parents should be an active and consistent participant in their child's education.

During elementary years participants demonstrated higher cognitive school readiness skills in kindergarten, higher achievement rates in reading and math, lower rates of grade retention, and fewer placements in special education. At age 21, participants demonstrated higher school achievement rates, high school graduations rates and lower rates of remedial services, grade retention, special education services, and juvenile arrests (Reynolds et al., 2002). The finding at age 26 demonstrated that 23% of students who had attended preschool needed school remedial services and 38% of students who did not attend preschool needed school remedial services. Juvenile arrest by age 19 occurred 16.9 % of students who attended preschool and 25.1% for students who did not attend preschool. The high school graduation rate was 79.9% for students who

attended preschool and 72.9% for those who did not attend preschool. Felony arrests were made for 13.3% for students who attended preschool and 17.8% for students who did not attend preschool. Public assistance was received by 60.8% students who attended preschool and 67% for those students who did not attend preschool. At age 28, participants continued to demonstrate positive long-term outcomes such as being less likely to have developed substance abuse problems or be incarcerated. Students in the preschool program demonstrated greater school achievement, higher high school graduation rates, higher college attendance rates, lower rates of remedial services, juvenile delinquency, and child maltreatment (Reynolds, Temple, Ou, Arteaga, & White, 2011). The return on investment was 18% for every dollar invested in preschool. According to the authors, the implications of the study included the fact that evidence for high quality early childhood programs was growing and students demonstrated improved academic readiness.

Clearly, high quality preschool programs have demonstrated how effective they are for helping students increase academic performance and lifelong success. These high quality programs included parent support and training, which are vital to high quality early childhood programs. High quality early childhood programs are critical due to the importance of brain development during the first five years of a child's life (Edie & Schmid, 2007; National Research Council and Institute of Medicine, 2000). Research has demonstrated that early childhood years are the most intensive period of cognitive, social, motor, language, and brain development during the human lifespan (Rule, 2000; Shonkoff, 2009). It is during the early years that the foundation for future learning is being created by biological growth.

Researchers have used imaging tools such as Magnetic Resonance Imaging (MRI) and ultrasound technology to confirm the brain develops at a quicker rate or slows down based on interactions in the environment (Edie & Schmid, 2007). During these early years, a child's brain is most sensitive to the influences of the external environment (Thompson & Nelson, 2001). The environment and interaction or lack of it has significant effects on brain development (Rule, 2000). The importance of early experience and the effects of detrimental environments are underestimated (Bruner, 1983). According to Brandt et al. (2013) when basic skills are not mastered during the early years, the foundation for learning more elaborate skills may become out of reach for students. Brandt et al. (2013) also found that the effect of the childhood environment can have favorable or unfavorable effects on the development of the brain, and if basic needs are not met it can result in severe long-term consequences for brain function. Rapid brain development affects cognitive, physical, social, and emotional growth. The early years are the most optimal time for learning (Bloom, 1984). It is when children form the foundation for future learning and lifelong success (Brandt et al., 2013; Rule, 2000). What happens during these early years determines whether children reach their full potential. It is critical that early childhood programs are prepared to meet the needs of children. Children who attend quality preschool programs arrive at kindergarten with higher cognitive abilities (Frede & Barnett, 2011).

According to Barnett (2004a) preschool education can yield high rates of return; policies need to be selected that will ensure that the public is receiving an adequate return on its investment. He reported that programs targeting children from a low socioeconomic status will have the largest return on investment. The relationship between

family poverty level and school readiness is evident as children of low socioeconomic levels enter school at a disadvantage with lower social and cognitive abilities. Research has demonstrated that both short and long-term benefits are results of quality early childhood programs. Short term benefits include increased cognitive abilities, higher scores on IQ tests, and positive effects on social and emotional measures. Reduced retention in grade levels and special education services has also been documented. Long-term benefits include higher levels of high school graduation, college attendance and higher incomes as adults.

Barnett (2004b) concluded that the quality of early childhood programs varies among private, public, and home providers. Evidence suggests that most programs are educationally weak which impacts their effectiveness. Quality programs include qualified teachers, small class size, low teacher to child ratio, rigorous curriculum, reflective practice and intensive individualization. Programs that lack quality characteristics result in modest gains. High quality programs also include educating and informing parents to support the development of their children. Barnett (2004b) and Cryer & Burchinal (2007) noted that research suggests that parents are not good judges of quality early childhood programs. Parents face a difficult task when selecting quality preschool programs as they are not able to observe the program directly, and children are too young to report on the quality of the program (Barnett, 2004b). Early childhood programs need to provide high quality programs to ensure that children will obtain the maximum benefit of attending. Barnett (2004a) recommends policy makers and parents need to become informed about quality programs and the country should implement free public education programs for all four year olds.

Defining Quality ECE

Quality ECE has been defined differently by various stakeholders (administrators, teachers, and parents). These multiple perspective should be taken into consideration when defining quality ECE (Dahlberg, Moss, & Pence, 2007; Katz, 1999). According to Cryer (1999) quality ECE is defined with major themes such as DAP, safe and healthy environments, positive interactions, positive relationships and positive social–emotional opportunities. Cryer (1999) reported that the definition of quality ECE has come under fire by some researchers that stated that DAP promoted individual child centered approaches that may differ from diverse groups that are family centered (Powell, 1994; Williams, 1994). According to Cryer (1999) parents have reported safety, health and interactions as the most important aspects of quality ECE. In order to validate the definition of quality, Cryer (1999) suggested documentation of global processes with assessments. These assessments would measure process and structural indicators. Process quality indicators are mainly based on interactions and experiences. Structural quality refers to indicators such as group size and adult-child ratios.

Cryer and Burchinal (1997) examined parent and professionals' quality ratings in EC programs. The study included 727 parents of infant and toddlers and 2,407 parents of preschoolers. Early Childhood Environmental Rating Scale (ECERS) (Harms, Clifford, & Cryer, 1980), Infant Toddler Environmental Rating Scale (ITERS) (Harms, Clifford, & Cryer, 1990) and parent questionnaires were used to collect data. The parent questionnaire asked how important the items were and how well their child's program performed the task. One of the major findings of the study was that parents reported higher quality ratings for EC programs than professionals who rated the programs.

Ceglowski's (2004) examined how a statewide focus group defined quality in ECE. The study included 11 interviews and 38 focus groups for a total of 333 participants. The focus groups included a broad range of stake holders such as parents, staff, administrators, legislators, and licensing staff. Quality early childhood program indicators in the study included characteristics such as individual attention, low teacher-child ratios, program structure, communication with parents, teacher training, culturally responsive instruction, and safety. The core question defining quality early childhood programs was "What is best for the child"? The study revealed that parents make childcare choices based on availability due to work schedules; choices are not based in terms of quality. Ceglowski (2004) suggested that the definition of quality early childhood programs should be expanded to include parents' views and perceptions. For example, the parents' main indicator of quality was communication between staff and parents, which was not an indicator of quality mentioned by any of the other stake holders. The author recommended that future studies examine the construct of quality and include other perspectives such as those of the parents, which are valid and unstudied. All perspectives should be taken into account when assessing the quality of early childhood programs.

According to Love et al. (1996) the quality of care in most early childhood centers in the United States is mediocre. The authors' synthesized data from research studies over the past 20 years and began with the positive outcomes associated with quality ECE programs, as demonstrated in longitudinal studies. Next, Love et al. (1996) discussed the review of the literature related to quality early childhood programs. The authors reported that the dimensions of quality associated with child well-being are structural indicators.

These indicators include teacher education, training, staff-child ratios, group size, low staff turnover rates, and wages. The structural indicators are important because they are the foundation of quality ECE programs. The authors recommended stronger designs and analytic techniques of research studies and the need to control for family demographics.

Shlay, Tran, Weinraub, & Harmon (2005) investigated how low income African Americans evaluate and define quality. The study was a factorial survey designed to examine how participants evaluate and make tradeoffs of quality ECE characteristics. Participants included 143 parents, 99.3% were female the mean age was 31.2, and 80.1% were employed. The parents defined quality with many of the same constructs that professionals used to describe quality ECE programs. The results demonstrated that parents' defined quality in terms of environmental characteristics such as staff qualifications, experience, training, and individual attention given to children. Parents associated quality with race and income level and wanted diverse classroom racially and economically. The authors suggested that parents may choose lower quality care because quality care is not accessible or available to them. Future recommendations include measuring parents' preferences for different childcare characteristics and comparing child care preferences by income, race and ethnicity.

According to Cryer et al. (2002) parents agreed with professionals on the indicators they used to define quality early childhood programs. The study compared ECE programs located in the United States, which had 2,407 participants in 388 centers and Germany, which had 392 participants from 103 centers. For the purpose of this literature review only U.S. information will be reported. The participants included 85% female respondents with the majority of participants from Caucasian upper and middle

income families with some college education. Twenty eight percent (28%) of participants were single parents and 70% were married while 20% received childcare subsidies. The ECERS (Harms et al., 1980) was used by trained professionals, and compared to responses from a parent questionnaire, which was designed to assess the degree to which parent's value specific aspects of the EC programs, as defined by ECERS, and whether parents believed these aspects were present in the classroom. Overall, Cryer et al. (2002) found that parents gave higher quality ratings to EC programs than professionals, and more educated parents gave lower quality ratings to programs. The authors recommended parent training which was needed to help parents better identify quality ECE programs. Identifying quality ECE programs was essential for both professionals and parents. Equally important was creating the infrastructures that are required to maintain high quality ECE programs.

Glantz and Layzer (2000) concluded that ECE programs need to improve quality, review subsidy systems to include quality incentives, increase wages, and require more rigorous licensing regulations. The study was initially conducted in several phases in four states with 100 sites. The final phase included 401 centers and 749 classrooms. To examine quality, the researchers used the ECERS (Harm et al., 1980) and the ITERS (Harms et al., 1990) along with the Caregiver Interaction Scale (CIS) (Arnett, 1989), and the Teacher Involvement Scale (Howes & Stewart, 1987). The major finding was that most centers were mediocre. Cognitive and social development was linked to quality ECE programs. Quality ECE programs were associated with indicators such as staff-child ratios, teacher education, training, and wages. The authors determined that higher levels of quality in ECE programs were related to rigorous licensing regulations which included

structural indicators. Quality indicators similar to those seen in DAP were critical in helping to identify and define quality EC programs.

NAEYC is the largest and oldest association in the United States that represents early childhood educators. NAEYC has also set standards for degree granting institutions for over 25 years. In 1985, NAEYC established a voluntary accreditation process for ECE programs. To be accredited programs must achieve a level of professional standards as determined by NAEYC. According to NAEYC (2009) research has identified quality indicators for early childhood programs. These quality indicators include measuring process and structure indicators in the early childhood classroom environment. Process refers to experiences that children encounter in the early childhood program such as interactions and activities. Structure indicators include staff/child ratio, group size, staff education and training.

NAEYC has developed three core considerations including child development knowledge, individuality, and social and cultural context. The first core consideration, child development knowledge, involves understanding typical development in children. Educators who are knowledgeable about child development can provide experiences that will provide optimal learning for children. The second core consideration, individuality, is related to knowing what is individually appropriate for each child. Educators who understand the child's strengths and family context can best meet the learning needs of the child. The third core consideration, social and cultural context, relates to understanding the social and cultural context in which the child lives. Educators need to take into consideration the cultural values, morals, language, and experiences the children have at home, so that they can provide learning experiences that are relevant and

meaningful. The second and third core considerations highlight the importance of cultural sensitivity.

The DAP framework (NAEYC, 2009) includes 12 principles of child development and learning. These principles include that children develop in a sequential manner proceeding at varying degrees based on their experiences and maturation. Children learn through a variety of play that becomes more complex as they grow older. These types of play such as symbolic representation can motivate children to learn and develop areas such as self-regulation, language and social skills. Children need secure relationships with educators who are informed about children's social and cultural environment. DAP also includes five guidelines for effective teaching which include creating a community of learners by establishing reciprocal relationships with families. Guidelines also include planning curriculum and assessment to enhance children's development. There are ten suggested teaching strategies such as acknowledging children which can include encouraging effort and persistence, providing specific feedback, providing information and asking questions. Modeling for children in areas such as attitudes, ways of approaching a problem, how to do something correctly. Creating or adding challenges to a task and giving direction for children's behavior and action.

Assessment of Quality

Katz (1994) determined there are five perspectives of quality. The first, top-down perspective assessed the program based on the perception of the administrators and licensing agencies. This traditional view examined observable indicators such as the setting, staff, and materials. Programs who rate high on these observable indicators have demonstrated that their children perform higher on pre academic and social skill

measures. The second, bottom–up perspective examined the program from the children’s point of view in terms of how they experience the program. This approach requires assessors to make inferences on how the children are experiencing the program. The third, inside/outside perspective assessed the program from the families’ experiences of the program. The author stated that ideally the quality of an ECE program should be in part based on the parents’ perceptions of services provided to them and their children. The fourth, inside perspectives examined how staff members experience the program. Staff members judge the program based on organizational climate and relationships with colleagues and parents. The fifth, ultimate perspective considers how program quality serves the community and society. Quality ECE programs impact the community and society as children who attend quality ECE programs will have positive long-term outcomes. The author recommends the use of all perspectives in quality early childhood programs.

Harms et al. (2005) developed the ECERS-R, which is a program quality assessment instrument designed for preschools; it measures structure and quality processes. The scales measure mainly process quality through observation. Process quality has been associated with childhood outcomes more than structure quality. Process quality includes interactions between educators, parents and children and interaction with materials, activities, space and schedules. Structure quality includes staff to child ratio, group size, and cost of care.

The ECERS-R is based on the premise that all children have three basic needs associated with health, safety, positive relationships and experiences related to stimulation and learning opportunities. These basic needs are observed in the classrooms

and measured through indicators in the environment related to interactions, curriculum, and schedules. The scales are based on 43 items, which are grouped into seven subscales, which include personal care routines of children, furnishings and displays for children, language reasoning experiences, fine and gross motor activities, creative activities, social development, and adult needs. Many DAP indicators are evident in the ECERS-R scales.

The early childhood field has accepted the ECERS-R and DAP as standards for quality early childhood programs. The ECERS-R has established reliability and validity. ECERS-R has been used in the field of early childhood to measure quality programs for over 25 years in many states and in several countries around the world. Many states are using the ECERS-R as part of their QRIS and health department licensure to ensure quality early childhood programs for all children.

Cryer et al. (1999) conducted a study to examine the relationship between structural and process quality in early childhood programs. Four countries Germany, Portugal, Spain, and the United States participated in the study. Childcare centers were selected to represent a broad range of participants including full and part-time sites, profit and non-profit agencies, rural and urban locations. One classroom was selected from each site that provided preschool to children 3-5 years old. Center participation included 388 centers in the United States, 103 centers in Germany, 80 centers from Spain and 88 in Portugal. The ECERS (Harms et al., 1980) was used to measure global process quality. The CIS (Arnett, 1989) was used to measure interaction between staff and children. Structural quality was measured through surveys and interviews. Researchers concluded that process quality can be impacted by the structural quality indicators that can be regulated. The findings showed that in the United States teacher quality measures such as

education, experience, teacher/child ratio, space, age and wages correlated positively with ECERS.

According to Karrby and Giota (1995), parents rated the quality of ECE programs as high as professionals. The study focused on parent's concept of quality and the relationship between professionals and parents rating of quality in daycares. Forty sites participated in the study with 340 parents completing the questionnaire in the United States and Sweden. Children in the daycares ranged from ages 3-6. Demographics of participants included 45% mothers and 32% fathers had secondary educations. Forty percent (40%) of mothers worked full-time, and 22.5 % were single parents. Forty-six percent (46%) of parents reported children were in daycare to benefit the child not as a necessity for parents to work. It should be noted that Switzerland subsidizes 90% of childcare expenses for all families. The researchers used a questionnaire for parents, and professionals used the ECERS (Harms et al., 1980). Researchers reported statistical significance between quality ratings of parents and professionals. In high quality EC programs both parents and professionals rated the EC programs high. This outcome provided evidence of the validity of ECERS.

Cate et al. (2010) examined quality indicators and practices for administrators, practitioners, and parents. Quality Inclusion assessments were discussed in the compilation, these assessments included the Preschool Assessment of Classroom Environment Scale (Rabb & Dunst, 1997), Choosing Quality Childcare for a Child with Special Needs (National Association of Child Care Resource & Referral Agencies, 2009), DEC recommended Practices (Division for Early Childhood, 2010), Questions to Consider in UDL Observations of Early Childhood Environments (Cunconan-Lahr &

Stifel, 2007), Quality Inclusive Early Childhood Programs: 10 Things to Look for (Nylander, 2009), and Preschool and Kindergarten Inclusion Readiness Checklist (Watson & McCathren, 2009). Some of the instruments were for administrators and practitioners, and other instruments were designed for parents. All instruments measured similar quality indicators for children with and without disabilities. Quality indicators included program philosophy and mission statements, high quality teachers, on-going professional development, use of centers, use of DAP, teaching and learning in child-directed activities, low staff to child ratios, and an emphasis on parent involvement. Classroom Observation Rating Tools include the ITERS (Harms et al., 2006), ECERS-R (Harms et al., 2005), Inclusive Practice Profile (ICP) (Soukakou, 2007), Classroom Assessment Scoring System (Class) (Pianta, La Paro, & Hamre, 2008), The SpecialLink Early Childhood Inclusion Quality Scale (Irwin, 2009), and What to look for in a Quality Inclusive Pre-kindergarten (Pre-K) classrooms (Technical Assistance & Training System, 2008-2009). Most tools measured the physical environment, curriculum and teaching. Although they vary on number of indicators, lay out and scoring all tools measured high quality early childhood programs. For individual child-focused considerations, several checklists were discussed, such as, the Playmate & Friends Questionnaire for Teachers (Goldman & Buysse, 2005), Head Start Center for Inclusion Member of the Class: Teacher Guide (Head Start Center for Inclusion, n.d), and CARA's Kit: Checklist of Priorities and Concerns (Milbourne & Campbell, 2007). The checklists measure how effectively staff was promoting social emotional skills. For collaborative inclusive practices, the compilation included examples of tools to evaluate effectiveness, including the Partnerships for Inclusion Self-Assessment Tool (NH Partnership Technical

Assistance Network, 2009), the Preschool Inclusion: Self Evaluation Tool (Preschool Technical Assistance Network, 2009), and Inclusion Planning Checklist: Center-Based Early care and Education Programs (Special Quest, 2008). The final section in the compilation examined QRIS from several states used to monitor and increase quality of care for children. Although QRIS frameworks have varied among states, the nation as a whole is moving toward the use of QRIS frameworks for higher quality early childhood programs.

Buyse and Hollingsworth (2009) designed a study to measure the Quality of Inclusive Practices using the ICP (Soukakou, 2007). The instrument measured classroom quality such as classroom practices that are sensitive and inclusive for each and every child. The ICP was correlated with the ECERS-R (Harms, et al., 2005) to provide construct validity. The objectives of the study included acceptability of assessment related to a quality rating system, effectiveness of training, psychometric properties of assessment, and inclusive quality characteristics. Assessors used the ECERS-R (Harms, et al., 2005) and the North Carolina License Rated Assessment Project process (North Carolina License Rated Assessment Project, 2015) and focus groups to collect data. Findings included that assessments were consistent with quality rating systems and training was demonstrated to be at 85% reliability for the last three assessments. The psychometric properties including internal consistency, inter-rater reliability, structural validity, construct validity and accuracy were satisfactory.

Peisner-Feinberg et al., (2014) reviewed research studies to examine how well measures of quality reflected the needs of the diverse children being served. Children who are Dual Language Learners (DLL) learn a home language while learning English in

their preschool years, DLL vary in demographic characteristics, such as, language, race, ethnicity, country of origin, and immigration status. The study aimed to understand the current state of knowledge regarding the quality of care being received by DLL and, as importantly, how quality was being measured. The researchers defined quality as being measured by process and structural quality features. The authors selected 10 research studies from over 300 potential studies that focused on measuring quality in early childhood programs. Criteria for selection included researchers had to measure quality, use instruments that were publicly available, and assessments that were developed for general use. Measures used in these studies included DLL specific measures such as Bilingual Teacher Behavior Rating Scale (B-TBRS) (Solari, Landry, Crawford, Gunnewig, & Swank., 2009), Classroom Assessment of Supports for Emergent Bilingual Acquisition (CASEBA) (Freedson, Figueras-Daniel, & Frede, 2009), Early Language and Literacy Classroom Observation Addendum for English Language Learners (ELLCO-A) (Castro, 2005), Measures of Early Language and Literacy Environment (ELLE) (Mathematica Policy Research, 2010), Language Interaction Snapshot (LISn) (Atkins-Burnett, Sprachman, & Caspe, 2010), Observation Measures of Language and Literacy Instruction: Quality Rating of Language and Literacy Instruction/Classroom Literacy Opportunities Checklist/Snapshot (OMLIT, OMLIT-QUILL, OMLIT-CLOC, OMLIT-Snapshot) (Goodson, Layzer, Smith, & Rimdzius, 2006), and Supports for English Language Learners Classroom Assessment (SELLCA) (National Institute for Early Education Research, 2005). Peisner-Feinberg et al. (2014) found that DLL specific measures captured different dimensions of the environment; however in regards to quality, assessments generated similar results for both DLL and peers. Recommendations

included using other quality measures in more diverse settings, improved methodologies, and inclusion of cultural perspectives in environmental ratings.

Culture and Climate

Gruenert (2008) stated that many administrators believe that culture and climate are the same thing. Culture is described as a set of common expectations such as unwritten rules, belief systems, and customs that staff conform to in a school. Culture can be viewed as the personality of the school, a limited way of thinking which can take years to evolve and is based on views and ideals. Culture produces the climate of the school. Climate is the attitude of the school. The attitude includes the collective mood and moral of the staff. Climate can be thought of as a state of mind, fluid, flexible and easy to change and grounded in perception. Culture and climate are associated with cultural sensitivity which is being aware that cultural differences as well as similarities exist and have an effect on values, learning, and behavior (Stafford et al., 1997). Cultural sensitivity originated in the multicultural education field. The multicultural education field is evolving, research is emerging to clarify practice and assessment criteria. Multicultural education is vital in all grade levels but especially, for early childhood programs. A quality early childhood program promotes cultural sensitivity that values students' diverse backgrounds (DEC, 2010) by promoting culturally responsive instruction. Culturally responsive instruction is defined as teachers engaging in self-reflection and using their knowledge of students' culture to select strategies for instruction (Wisniewski, Fawcett, Padak, & Rasinski, 2012). Research has established that cultural sensitivity is an important component of quality of early childhood programs (NAEYC, 1986).

Banks (2013) reviewed the historical perspective of multicultural education. In 1962, the ethnic studies movement began as a response to the civil rights movement. African Americans began to demand their histories, struggles, and contributions be taught in schools. In the following years, Mexican Americans, Native Americans, Puerto Ricans and Asian Americans began to make the same demands. Many educators acknowledged the demands by creating curriculum based on holidays and heroes as well as highlighting food, cultural dress, and music. The multiethnic education phase began when educators realized that school reform was necessary to educate students to understand the ways other diverse groups' histories were meaningful and contributed to American history.

Banks (2013) stated that although curriculum reform was necessary, educators realized that many school variables had to be changed to improve academic achievement for diverse students. The school variables included school policy, community partnerships, teaching styles, teaching strategies, attitudes, perceptions, beliefs and school culture. During the 1960s and 1970s, the cultural deprivation theory influenced the development and practices in education for low income and minority students; in the 1990s it was reintroduced and widely criticized. According to Banks, culture deprivation theorists see the problem as the culture of students instead of the culture of the school. Multicultural education expanded multiethnic education to include gender, exceptionality, religion, etc. and included a social action component. Multicultural education is now viewed in a global context as Banks (2013) described his work as global citizenship education which examines multicultural education worldwide.

Nieto and Bode (1992) discussed the characteristics of multicultural education. These characteristics included that education is antiracist, pervasive, socially just, a

process, a critical pedagogy and that basic education is important for all students. Nieto suggests that multicultural education is a process of comprehensive school reform for all students; it rejects discrimination; affirms pluralism; and it permeates the school's curriculum, instructional strategies, and student- family- teacher interactions. According to Ford (2014), multicultural education is for all students and either validates their cultural group or exposes them to cultural groups they are unaware of. The goal is to prevent stereotypes and unlearn negative stereotypes students may have been exposed to in the home, neighborhoods, community and media. Multicultural education provides an opportunity to expose student to amended history that includes accomplishments and contributions of diverse groups. Multicultural education also provides the opportunity to use high-quality books, literature, and media to learn about the lives, customs, and values of diverse groups. Multicultural concepts should be embedded throughout the curriculum across every subject. Multicultural education is grounded in social justice and equity. Ford (2014) believes that multicultural education is a progressive approach to transforming education. One of the aspects of multicultural transformation is the culture and climate of the classroom, school and educators which impact student learning.

According to Derman-Sparks and the ABC Taskforce (1989) the early childhood years are critical to the development of social emotional skills and a healthy identity. It is during these early years that concepts of self are being formed. The four goals of the anti-bias education (Derman-Sparks & Edwards, 2010) are first, each child will demonstrate positive social identities such as confidence and family pride. Second, each child will demonstrate deep and caring human connections using accurate language for human differences; and third, each child will recognize, understand and describe unfairness and

have the appropriate language and skills to respond. Fourth, each child will demonstrate appropriate skills to act, with others or alone, against prejudice and discrimination. The anti-bias curriculum is developmentally appropriate (NAEYC, 1986). The anti-bias curriculum has several components to inform the educator of the need for reflection and to process their feelings, attitudes, and dispositions about valuing diversity. The anti-bias curriculum is focused on creating classroom and school culture that welcomes, validates, and respects students' diversity to ensure optimal learning experiences for all children.

According to Bridges and Dagys (2012) communities in Illinois need to address the growing population of Latino children. The state passed a mandate to address the increasing diversity, foster bilingual skills and early learning for young English Language Learners (ELL). Like many other states across the country Illinois department of education will require ECE teachers to obtain additional Bilingual/English as a Second Language (ESL) endorsements by 2014. The authors conducted a survey across the state to determine how the early childhood staff is responding to the growing diversity. The participants consisted on 307 administrators representing 351 programs. Illinois provides preschool for all children. Participants in the study involved 64,482 children and 2,599 teachers. One of the characteristic of high-quality ECE is high quality teachers, of the 72% of teachers who reported education levels 15% had A.A., 54% had B.A. and 54% were Illinois State Board of Education (ISBE) certified. The key findings were that less than 6% of educators had the training to work with ELL students and fewer than 25% of teachers were interested in pursuing qualifications, 45% of administrators suggested that there was little need for their teachers to be ESL certified. Recommendations included redefining quality in terms of the students that are served. Bridges and Dagys (2012)

suggested that the definition of quality early childhood needs to shift to address the increasingly diverse population in classrooms. The authors stated that ECE provides a strong start for children and that the quality paradigm, teacher preparation and training to support quality ECE must shift. In the state of Illinois one out of every five children under the age of 5 is Latino and nationally Latinos make up 20% of the Kindergartners (US Census, 2012). The authors concluded that quality ECE is necessary so children have a great start in school, work and life. The authors also reported there is no comprehensive measure of cultural competency the next best option is the state mandated ELL certifications.

The National Center for Cultural Competence whose mission includes, evaluating culturally, and linguistically competent service delivery systems, has created a cultural and climate tool for the healthcare field that measures cultural sensitivity. The Cultural Competence Health Practitioner Assessment (CCHPA) was developed at the request of the Bureau of Primary Health Care (BPHC), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Service (DHHS) at Georgetown University by the Center for Child and Human Development. According to the National Center for Cultural Competence, the CCHPA was developed to improve high quality services to culturally and linguistically diverse individuals in underserved communities and intended to promote cultural and linguistic competence for practitioners (National Center for Cultural Competence, n.d.).

Enyeart et al. (2006) concluded that Spanish speaking parent perceived less communication and opportunities for parent involvement than English speaking parents. The findings were part of a larger study which included English and Spanish surveys to

measure communication practices and parent involvement. Measures of communication included whether parents received phone calls, notes, emails, newsletters, memos or notices from teachers. The results indicated that Spanish speaking families across all income levels reported receiving less communication than English speaking families. Measures of parent involvement opportunities consisted of whether the school had meetings, open house, parent teacher conferences, class or school events that parents could attend and if they were invited to volunteer. Spanish speaking families reported lower levels of parent involvement opportunities than English speaking families. Spanish speaking families reported no differences across income levels in parental involvement opportunities. The researchers noted that for English speaking families higher income families reported higher levels of communication and opportunities for involvement. The study indicated there are differences in communication and parent involvement opportunities for English and Spanish speaking families.

With the growing number of school districts across the country becoming majority minority it is essential that cultural sensitivity is examined (Bridges & Dagys, 2012) in ECE programs. It is important that staff embrace diversity, demonstrate cultural knowledge, and integrate culturally responsive instruction in ECE programs. According to Secretary of Education, Arne Duncan (2014) majority minority students are projected to enroll in public schools for the 2014-2015 school year. This will mark the first time educators will be expected to educate majority minority students in public schools across the United States.

In summary, high quality ECE programs include parental involvement components. Longitudinal studies have demonstrated that short and long-term benefits

are the result of high quality early childhood programs that include comprehensive parental involvement components (Campbell et al., 2012; Reynolds et al., 2001; Schweinhart & Weikart, 1980). Quality is defined by NAEYC's DAP (2009) which has been generally accepted by the early childhood field. Research has produced mixed results between professionals and parents definition of quality (Ceglowski, 2004). According to Ceglowski (2004) parent's main indicator for quality was communication with staff which was not an indicator for professionals. According to Cryer (1999) both professionals and parents reported that safety and child interactions were the most important aspects of quality. According to Shlay et al. (2005) parents defined quality with the same constructs as professionals including safety, staff qualifications and attention given to children. Researchers indicated the need to include parents' perceptions in defining quality (Ceglowski, 2004; Katz, 1993). Assessment of quality is measured through process and quality indicators (Espinosa, 2002; Harms et al., 2010). Several tools have been developed to measure quality in general education, special education and inclusion settings (Cate et al., 2010) including how well these tool reflect the needs of DLL (Peisner-Feinberget et al., 2014) including cultural sensitivity. Cultural sensitivity is important to ECE because of the demographic shift across the country. As more school districts become majority minority educators will need to address the changing needs in ECE programs.

Issues Related to Early Childhood Special Education

According to a joint position statement on early childhood inclusion from the DEC and NAEYC (2009), *early childhood inclusion* is defined as access, participation, and supports. The goal of inclusive programs for all children with and without disabilities

is to experience development and learning to their full potential while having a sense of belonging with positive social relationships. Access refers to having many learning activities and opportunities including providing a variety of options from intentional teacher directed lessons to daily routines. Settings can vary from public programs to faith based programs. Environment can include the use of technology and UDL. Participation refers to staff promoting belonging and engagement. Children with disabilities vary in support needed to fully participate. Staff needs to provide a broad range of modifications and adaptations using a variety of teaching strategies to meet the individual needs of the children. Supports refer to on-going professional development for all to increase knowledge base of skills and dispositions needed to create high quality inclusion programs. Support also refers to training for parents. Quality frameworks are also described as supports encompassing policies, guidelines, quality standards, and state learning standards.

High quality inclusion is vital for children with disabilities. Programs need to merge high quality early childhood and high quality inclusion with professional development to ensure staff is providing high quality services to all children and families (Buysse & Hollingsworth, 2009). Many similar characteristics found in high quality early childhood programs are found in high quality inclusion programs such as highly qualified teachers, parent involvement and culturally responsive instruction. Inclusion programs may utilize a co-teaching model, in which two teachers share responsibility for teaching in the same classroom (Friend, Cook, Hurley-Chamberlain, & Shamberger, 2010). Approximately one-third of ECE students with disabilities are receiving special education services in general education settings (Odom, Buysse, & Soukakou, 2011). According to

Education Law Center (2010) the percentage of children receiving special education services in general education setting in State Funded Pre-K programs across the nation range from 4% to 72% with the national average at 33%. Children with disabilities benefit from receiving special education services in the general education setting (Phillips & Meloy, 2012).

Odom et al. (2011) reviewed the history of early childhood inclusion and synthesized the research. One of the major themes was the definition of inclusion, which has had multiple meanings, the field of early childhood has generally accepted the definition of *inclusion* as children belonging, participating, and reaching their full potential in a diverse society. Inclusion also takes many different forms from full day to half day to faith –based to publicly funded programs. Inclusion programs are beneficial to children with and without disabilities. High quality inclusion includes collaboration, specialized instruction, interventions, supports, professional development, and family involvement. Odom et al. (2011) reported that two categories have emerged from the literature to define quality early childhood programs they include the quality of the curriculum and intentional teaching. Structural process such as the environment, ratios and teacher qualifications were also important. According to the authors to measure quality there needed to be a shift from focusing on accountability and standards to measuring practices that result in positive outcomes. Standards that measure quality programs for children with disabilities should be integrated with standards that measure general education early childhood programs. The authors concluded that due to the large increase in diverse students, inclusion programs will need to increase differentiated instruction.

According to Phillips and Meloy (2012) children with disabilities made significant gains in inclusive preschool programs. Researchers examined an early childhood program located in Oklahoma which is one of the few states that has universal pre-K. Attendance for 4 year olds was reported at 71%, higher than any other state. The program was also full inclusion and a high-quality program. The participants included 3,048 kindergarten and pre-K students as well as children with and without disabilities. The Woodcock Johnson Test of Achievement III was administered during the first week of school. A parent survey was also used to collect demographic data. The demographic data included mother's highest education level, race, gender, internet access and whether the father lived at home. Socioeconomic status was measured using the free and reduced lunch rate at the schools. The findings showed that children who had participated in Pre-K had significantly higher scores. Both students with and without disabilities showed a similar increase in school readiness. The increase in scores may also be attributed to several factors such as full day programs which Oklahoma provides. Teachers were highly qualified and held at least a bachelor's degree and 90% of children with disabilities attended a full-day program.

Odom and Diamond (1996) conducted a review of literature regarding early childhood programs that include children with disabilities. Articles reviewed were from 1990-1996. The literature review was organized by Bronfenbrenner's ecological systems framework (Bronfenbrenner, 1977). Inclusion was defined as the majority of students in the classroom were typically developing students. The authors identified family perspective as the meso-system level variable in Bronfenbrenner's framework. The authors noted that families have fears, concerns, and positive feelings about inclusion.

The authors reported that parents with children with and without disabilities held high satisfaction rating of their children in inclusion settings. Parents with children with and without disabilities also reported inclusive programs had a positive effect on their children's development including social skills. Odom and Diamond (1996) noted that parent reported concerns such as their children being rejected by peers, lack of qualified staff and difficulty in finding inclusion services. Demographic variables such as gender, ethnicity, education and employment status were found to impact ratings of barriers. The authors' recommended future research examines demographic variables related to parent perceptions.

In summary, the field of childhood special education has multiple definitions for inclusion (Odom et al., 2011) the early childhood special education field has generally accepted NAEYC and DEC (2009) definition specified in their joint position statement referring to access, participation, and support. An important part of the definition includes parent involvement specifically parent training and education. Measures of quality for inclusion programs and special education programs also included process and structure indicators similar to general education measures. Similar characteristics defined high quality programs in general education, special education and inclusion programs. These characteristics included high quality teachers, low staff/child ratio, parent involvement, small group instruction, cultural responsive instruction, and child directed activities. According to Phillips and Meloy (2012) children with disabilities made significant gains in inclusion preschool programs. Odom and Diamond (1996) reported that parents with children with disabilities reported high satisfaction rates of inclusion programs. Parents also reported concerns and fears about inclusion programs. This

chapter reviewed, analyzed, and summarized the existing literature related to parental perception and quality early childhood programs for general and special education students. The next chapter will review the methodology which was designed to examine ECE quality from the perspective of parents whose children were enrolled in a publicly funded ECE program.

CHAPTER 3

METHODOLOGY

As presented in the literature review, limited research addresses how parents and caregivers perceive ECE program quality and cultural sensitivity, and whether perceptions may vary according to whether their child has or does not have a disability. Consequently, this descriptive comparative cross-sectional quantitative study examined ECE quality from the perspective of parents and caregivers whose children were enrolled in a public ECE program located in the Southwest United States. In a cross-sectional survey design, data is collected at a single point in time about present views on an issue (Creswell, 2008). The non-experimental differential method was selected because the researcher had no control over the assignment of participants due to pre-existing conditions, which makes the participants nonequivalent. The perceptions of quality and cultural sensitivity were assessed using a questionnaire. The methodology of the research study will be described in greater detail in the following sections of this chapter: (a) research questions, (b) participants, (c) setting, (d) instrumentation, (e) design and procedure, (f) treatment of the data, (g) ethical considerations, and (h) limitations and delimitations.

Research Questions

The research questions follow:

- 1- Do parents and caregivers perceive that their children attend quality early childhood programs?

- 2- Is there a difference in parent and caregiver perceptions in the quality of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?
- 3- Do parents and caregiver perceive that their children attend culturally sensitive early childhood programs?
- 4- Is there a difference in parent and caregiver perceptions in the cultural sensitivity of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

Participants

The study population included families with children between the ages of 3 to 5 who attended ECE programs in public preschools or Head Start in the Southwest United States. Sampling units were the families participating in the study.

The study setting was in a Southwestern state with 643,790 children under age 6, and 18% (115,226) of those children were living in poverty, which was defined as 100% below the federal poverty level (U.S. Census, 2012). OSEP reported in 2011, 6.68% of children or 7,598 children statewide received special education services. Due to economic conditions, increasing numbers of families were living in poverty (U.S. Census, 2012). The state's population of over 2 million included 28.2 % Spanish-speaking individuals which is higher than the national average of 21% of the population who are Spanish speaking (U.S. Census, 2012). The U.S. Census (2012) also reported that 1 out of every 6 U.S. residents is Hispanic and projects that by 2060, 1 out of every 3 U.S. residents will be Hispanic. The local school district was a majority minority district with increasing numbers of ELL.

The 215 participating parents and caregivers represented 10 public elementary schools and Head Start programs, which included 21 general education programs, 10 ECSE programs, and eight inclusion programs. All programs were located at low income Title I and Head Start sites. The majority of the sample participants were female (89.1%), 10.9% were male, 51.8% were Spanish speaking, and 11.4% had children with an active IEP. See Table 1 for characteristics of the participants.

Table 1
Participant Demographics

Characteristic	<i>N</i>
Child's IEP status	
No IEP	190
IEP	25
Gender	
Female	192
Male	23
Language	
English	105
Spanish	110

Note. IEP = Individual Education Plan

Three criteria were used to select participants. First, participants were parents and caregivers whose children, ages 3-5, were receiving educational services from early childhood programs. Second, participants were parents and caregivers whose children, ages 3-5, were attending special education programs and had a current IEP. Third, participant families were able to complete the questionnaire in English or Spanish.

Setting

The school district had 238 elementary schools of which 155 were Title I elementary schools. Title I elementary schools provide educational services to at-risk,

low income students. To be designated as a Title I school, elementary schools must demonstrate need based on the number of students qualifying for free and reduced lunch. The local school district provided 384 early childhood special education programs, 29 inclusion programs located in elementary schools across the community and 70 general education programs located in at-risk neighborhoods. Head Start served the community with 11 sites which include inclusion programs in at-risk neighborhoods.

Instrumentation

The data were collected through questionnaires, which were available in a paper format. Questionnaires were used for three reasons. First, they are a way of measuring characteristics of some members of an actual population and can be used to make limited generalizations about the population as a whole. Second, questionnaires can illustrate the need for change in policies and laws in relation to the social environment. Third, questionnaires can be used to determine individual opinions about policy issues and practices (Czaja & Blair, 1996).

The questionnaire used in this study, the *Parent Perception Survey* (See Appendix A), was developed by the researcher; questions were derived from two existing instruments, the ECERS-R (Harms et al., 2010) and the CCHPA (National Center for Cultural Competence. n.d.). The ECERS-R (Harms et al., 2010) is a quality assessment instrument and is used by many NAEYC accredited programs and is designed for preschools. Many research based best practices also identified as DAP are evident in ECERS-R scales. The early childhood field has accepted ECERS-R and DAP as standards for quality early childhood programs. ECERS-R has been used in the field of early childhood to measure quality programs for over 25 years. The ECERS-R has 43

items, which are grouped into seven subscales that include personal care routines of children, furnishings and display for children, language reasoning experiences, fine and gross motor activities, creative activities, social development, and adult needs. The *Parent Perception Survey* (See Appendix A) questionnaire contained 12 quality- related questions.

The second instrument, the CCHPA (National Center for Cultural Competence. n.d.) included six subscales such as values and belief systems, cultural aspects of epidemiology, clinical decision-making, life cycle events, cross-cultural communication, and empowerment/health management. Existing research has not addressed the need for a cultural sensitivity instruments examining cultural sensitivity in ECE programs. The cultural sensitivity statements contained in the *Parent Perception Survey* (Appendix A) documented the need for an instrument and research related to culture, climate, and cultural sensitivity. Use of the cultural sensitivity items will also add to the body of research in the field of ECE and multicultural education and the need to establish assessment tools to evaluate education programs in the area of cultural sensitivity. The *Parent Perception Survey* (Appendix A), questionnaire contained 10 cultural sensitivity related questions. The *Parent Perception Survey* (Appendix A), contained a total of 22 items related to quality and cultural sensitivity and used a Likert scale. The 5- point Likert scale captured the participants' intensity of feelings for a given statement and helped identify distinctions between the underlying phenomenon being investigated. The scale was 1-never, 2-sometimes, 3-often, 4-always, and 5-not sure.

Design and Procedure

Phase One: Instrumentation Development

The researcher developed the questionnaire with two demographic questions: the first question determined if the ECE students had an IEP and the second question determined the gender of the parent or primary caregiver. The questionnaire also contained 12 items that measured parents' and caregivers' perception of quality and 10 items that measured parents' and caregivers' perception of cultural sensitivity.

Phase Two: Study Preparation

The instrument and protocol for human subjects were submitted to the university Institutional Review Board (IRB) for approval. In addition, the instrument and a request to conduct the survey were submitted to the local school district selected as the research site.

Phase Three: Implementation

The local school district and Head Start provided access to families of general education and special education students. The early childhood sites were selected by convenience sampling. The researcher selected elementary schools that had the highest number of ECE programs including general education, special education and inclusion classrooms. The researcher requested voluntary participation of elementary schools in the study. Once administrators had agreed to participate, participants were contacted through the programs their children attended. The researcher met with potential participants for the research study during a monthly parent meeting. Information was presented in both English and Spanish concerning the research study, paper formatted questionnaires and informed consent forms. Questionnaires, consent forms, and contact information were sent to parents who were not able to attend the parent meeting. For parents and caregivers who preferred assistance with reading the questionnaire, the researcher was available to

read the questionnaire in English and Spanish. The researcher presented and collected the completed questionnaires over a 30 day time period, most parents and caregivers returned questionnaires to the researcher during a parent meeting. The researcher followed-up with teachers to collect any questionnaires that had been sent home.

Treatment of the Data

Data from the paper questionnaires were coded and entered into Statistical Package for the Social Sciences (SPSS) version 21 (IBM Corporation, 2012) statistical software. Subjects were assigned to one of two groups. Group 1 consisted of families with children who attended general education programs, the “No IEP” group. Group 2 consisted of families with children who received special education services, the “IEP” group.

The data were submitted to screening and assumption testing procedures. To determine the survey’s reliability, the researcher used Cronbach’s Alpha to measure the internal consistency between groups of attributes based on the inter-correlation items. The stronger the correlation between a group of items, the greater the likelihood that those items measured the same underlying construct. Using SPSS, the researcher computed statistics on the large data set over multiple variables. The software allowed the researcher to isolate variables to analyze the differences between groups. Statistical significance was set at .05. Validity and reliability were established by examining the threats to external validity. The margin of error was calculated to ensure the results of the study were valid. Data were analyzed using independent samples *t*-test, which are specifically designed for two-group analysis. Descriptive statistics measures, such as frequencies, were used to identify patterns and trends and to summarize the collected

data. The responses of the questionnaire determined parent perceptions regarding ECE programs.

Sample size of the study had been determined by examining the literature regarding sample sizes. Most quantitative studies utilize fewer than 200 participants; more than 200 subjects improve power marginally (Ross, 2005). The determined sample size of 212 was considered sufficient to show a significant difference in the dependent variables. Due to the number of calculation combinations being utilized in the study, the Bonferroni analysis was applied to safeguard against Type I errors.

Ethical Considerations

The ethical considerations for using human subjects were addressed through the IRB review process. Specific issues included research purpose, informed consent, participation criteria, procedures, risks, benefits, voluntary status, confidentiality, and contact information provided to all participants.

Limitations and Delimitations

Limitations

One limitation of the design was that data were collected at one point in time, but perceptions can change over time. When data are collected in this manner, causality of the relationship between variables cannot be determined. Another possible limitation was that the survey design and questions asked may have contributed to a low response rate and to misunderstanding of statements in the questionnaire. Another limitation was that participants self-selected to participate in the study and created a sampling bias.

Delimitations

It is important that perceptions of all parents of early childhood students be examined. However, due to the scope of the study, only students' aged 3-5 were included. The design was suitable because the potential relationships between the study's variables have not been compared previously. Only limited generalizations can be made due to convenience sample which may not be representative of the population.

This chapter reviewed the research questions, participants, setting, instrumentation, design and procedure, treatment of the data, ethical considerations, and limitations and delimitations. The next chapter will present the analyses and results, organized by research question.

CHAPTER 4

RESULTS

Four questions guided this study of parent perceptions of quality and cultural sensitivity of ECE programs. The first question was to determine if parents and caregivers perceived that their children attended quality early childhood programs. The second question was to examine how parent perceptions related to quality may have varied according to whether their child had or did not have a disability. The third question determined whether parents and caregivers perceived that their children attended culturally sensitive early childhood programs. The fourth question was to examine how parent perceptions related to cultural sensitivity may have varied according to whether their child had or did not have a disability. The parents' and caregivers' perceptions were measured using the *Parent Perceptions Survey* (Appendix A). The questionnaire examined ECE program quality from the perspective of parents whose children were enrolled in a public ECE programs.

Data Analysis

Prior to data analysis, data were submitted to screening and assumption testing procedures. For the purposes of analyzing the categorical independent variable (children's IEP status), data were coded as "1" for children with "No IEP" and "2" for children with an "IEP." Data were evaluated for univariate normality using skewness and kurtosis values and histograms with normal curve overlay for each variable (parents' and caregivers' perceptions of the *quality* of programs and parents' and caregivers' perceptions of the *cultural sensitivity* of programs) by group separately (parents and caregivers with children with an *IEP* and those with *typical children*—that is, no IEP).

Histograms provide a visual representation of the distribution of the data by group for each outcome variable respectively, whereas skewness and kurtosis values provide a numeric index of the normality or non-normality of the data, with values greater than 2 indicating non-normality of the distribution of that group's distribution. According to Tabachnick and Fidell (2011), the farther these two values are from 2, the more severe the violation of normality. Moreover, they recommend that when conducting between-group analyses, like those in the present study, data screening and assumption testing be done for each group and dependent variable separately, as each one has an independent distribution from the others.

All of the dependent variables under study approximated a normal distribution because skewness and kurtosis values for each of the outcome variables for each group separately were less than the absolute value of 2. Data were further screened for univariate outliers using box-and-whisker plots. The box-and-whisker plots indicated 5 outliers for the "No IEP" group. Tabachnick and Fidell (2011) caution that outliers unduly influence group means, and thus, not dealing with them leads researchers to draw inaccurate and imprecise conclusions and inferences from their data. In other words, outliers bias group means, standard deviations, test statistics, and effect sizes. Therefore, to eliminate these biasing effects, these 5 outliers were removed from the data, leaving 215 cases (190 in the "No IEP" group and 25 in the "IEP" group) available for analysis. Finally, both dependent variables met the assumption of the homogeneity of variance (both *p*-values for *Levene's Test* were $> .05$). Having met all requisite assumptions, data analysis proceeded as planned.

Results by Research Questions

Research Question 1. Do parents and caregivers perceive that their children attend quality early childhood programs?

Descriptive statistics and internal consistency reliability coefficients (Cronbach's α) for parents' perception of quality early childhood programs (see Table 2) shows the mean for all parents and caregivers was 3.23 out of the possibility of 4. The internal consistency reliability coefficients of ($\alpha = .71$), acceptable level suggested that participants were responding to the items on the scales consistently. Table 3 shows the mean and standard deviation by item. *Frequency Counts and Percentiles for Responses by Item of the Quality in Early Childhood Programs* (Appendix B) shows frequency and percentages that indicate the majority of parents and caregivers rated the quality indicators at "always" for all items, indicating that overall parents and caregivers of children with and without disabilities perceived that their children attended quality early childhood programs.

Table 2

Descriptive Statistics and Internal Consistency Reliability Coefficients (Cronbach's α) for Parents' and Caregivers' Perceptions of the Quality in Early Childhood Programs

Scale	<i>M</i>	<i>SD</i>	α
Perceptions of the Quality of Early Childhood Programs	3.23	0.63	0.71

N = 215

Table 3

Descriptive Statistics of the Sample by Item of the Quality in Early Childhood Programs

Item	<i>M</i>	<i>SD</i>
1	3.56	1.07
2	3.48	1.07
3	3.61	0.83
4	3.74	0.83
5	3.78	0.77
6	3.28	1.29
7	2.65	1.66
8	3.79	0.69
9	3.23	1.45
10	2.07	1.84
11	2.45	1.84
12	3.53	1.01

N=215

Research Question 2. Is there a difference in parent and caregiver perceptions in the quality of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

In order to address the research questions regarding mean differences between parents and caregivers with children with and without disabilities, several independent-samples *t*-tests were conducted between the groups. The Bonferroni adjustment to control for the familywise Type I error rate inflation was used (*adjusted p* = .025). There were no statistical significant differences in perceptions of quality of early childhood programs between parents and caregivers with children with and without disabilities (*p* = .89, Cohen’s *d* < .10). Results indicated a very small effect size; the effect size quantifies the size of the difference between groups. According to Cohen (1988), the following should be used as guides to interpret effect sizes, Cohen’s *d*: .30 to .49 is small; .50 to .79 is moderate; and ≥ .80 is large. Descriptive statistics by IEP status groups (“No IEP”,

“IEP”) can be found on Table 4. The difference in means was .02 from 3.26 for parents and caregivers of children with typically developing children and 3.28 for parents and caregivers with children with disabilities. The descriptive mean and standard deviation for each item for both groups can be seen in Table 5. The results indicate that parents and caregivers with children with disabilities perceived that their children attended quality early childhood programs only slightly more than parents and caregivers of typically developing children.

Table 4

Estimated Marginal Means for Parents’ and Caregivers’ Perceptions of the Quality in Early Childhood Programs by IEP Status Group

Scale	No IEP (<i>n</i> = 190)		IEP (<i>n</i> = 25)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Perceptions of the Quality of Early Childhood Programs	3.26	0.58	3.28	0.52

N = 215

Table 5

Descriptive Statistics by Item for Each Group of the Quality in Early Childhood Programs

Item	No IEP (<i>n</i> = 190)		IEP (<i>n</i> = 25)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
1	3.54	1.09	3.72	0.89
2	3.51	1.05	3.28	1.21
3	3.58	0.86	3.80	0.50
4	3.72	0.87	3.92	0.28
5	3.82	0.66	3.48	1.33
6	3.34	1.22	2.88	1.72
7	2.65	1.65	2.60	1.76
8	3.79	0.70	3.76	0.60
9	3.23	1.44	3.24	1.51
10	2.07	1.84	2.08	1.87
11	2.40	1.85	2.80	1.83
12	3.50	1.05	3.80	0.50

N = 215

Results for Research Question 3. Do parents and caregiver perceive that their children attend culturally sensitive early childhood programs?

Descriptive statistics and internal consistency reliability coefficients (Cronbach's α) for the cultural sensitivity of early childhood programs are shown in Table 6. The internal consistency reliability coefficients of ($\alpha = .80$) good level suggested that participants were responding to the items on scale consistently. Overall, parents and caregivers perceived that their children attended culturally sensitive programs. Parents and caregivers rated the programs with a mean of 2.94 out of a possible high score of 4.0 (Table 7). Most parents and caregivers rated the cultural sensitivity indicators at "often" or "always" see *Frequency Counts and Percentiles by Item of the Cultural Sensitivity in Early Childhood Programs* (Appendix C).

Table 6

Descriptive Statistics and Internal Consistency Reliability Coefficients (Cronbach's α) of the Cultural Sensitivity in Early Childhood Programs

Scale	<i>M</i>	<i>SD</i>	α
Perceptions of the Cultural Sensitivity of Early Childhood Programs	2.94	0.92	0.80

Table 7

Descriptive Statistics of the Sample by Item of the Cultural Sensitivity in Early Childhood Programs

Item	<i>M</i>	<i>SD</i>
13	3.43	1.27
14	2.63	1.81
15	2.50	1.85
16	3.42	1.22
17	3.55	1.11
18	1.76	1.90
19	2.79	1.71
20	2.97	1.57
21	3.32	1.32
22	3.47	1.14

Results for Research Question 4. Is there a difference in parent and caregiver perceptions in the cultural sensitivity of the ECE program among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

In order to address the research questions regarding mean differences between parents and caregivers with children with and without disabilities, several independent-samples *t*-tests were conducted between the groups. The Bonferroni adjustment to control

for the familywise Type I error rate inflation was used (*adjusted p* = .025). The results obtained from the t-test indicated that parents and caregivers who had children with disabilities reported lower scores on cultural sensitivity indicators (M = 2.75, SD = 0.95) than parents and caregivers who had children without disabilities (M = 3.02, SD = 0.85) (Table 8). Table 9 shows the mean and standard deviation by item for each group. The According to Cohen (1988), the following should be used as guides to interpret effect sizes, Cohen's *d*: .30 to .49 is small; .50 to .79 is moderate; and $\geq .80$ is large. The small effect size, Cohen's *d*=0.30, indicates that parents' and caregivers' of children without disabilities perceived the cultural sensitivity of ECE programs to be higher than parents and caregivers of children with disabilities.

Table 8

Estimated Marginal Means for Parents' and Caregivers' Perceptions of the Cultural Sensitivity in Early Childhood Programs by IEP Status Group

Scale	No IEP (<i>n</i> = 190)		IEP (<i>n</i> = 25)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Perceptions of the Cultural Sensitivity of Early Childhood Programs	3.02	0.85	2.75	0.95

N = 215

Table 9

Descriptive Statistics by Item for Each Group of the Cultural Sensitivity in Early Childhood Programs

Item	No IEP ($n = 190$)		IEP ($n = 25$)	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
13	3.43	1.28	3.48	1.16
14	2.64	1.81	2.60	1.87
15	2.46	1.86	2.76	1.81
16	3.50	1.12	2.80	1.71
17	3.54	1.13	3.68	0.95
18	1.87	1.90	0.96	1.74
19	2.82	1.67	2.56	1.96
20	2.97	1.56	2.92	1.63
21	3.38	1.26	2.80	1.73
22	3.54	1.03	2.96	1.72

$N = 215$

Interestingly, the results of parents' and caregivers' perceptions of cultural sensitivity reached *practical*—albeit not *statistical*—significance, $t(213) = 1.44$, $p = .15$, Cohen's $d = 0.30$, parents and caregivers who had children with disabilities perceived lower levels of cultural sensitivity ($M = 2.75$, $SD = 0.95$) than those who had children without disabilities (i.e., not with an IEP; $M = 3.02$, $SD = 0.85$). Practical significance means the difference between samples is large enough to be meaningful or useful in the real world (Kirk, 1996). In the present study, the .27 difference in means between groups suggested that parents and caregivers of children with disabilities are less satisfied with the level of cultural sensitivity, which is supported by research that parents and caregivers of children with disabilities are less satisfied with ECE programs (Spann et al., 2003).

The effect size, Cohen's d , indicates that parents' and caregivers' perceptions of cultural sensitivity of ECE programs were 0.30 standard deviations higher than if they had children without disabilities. Evidently, parents and caregivers with children with

disabilities perceive that ECE programs are not as culturally sensitive to them or their children’s needs as parents and caregivers of children without disabilities.

Inspection of the correlation matrix (see Table 10) indicated that all correlations were positive and statistically significant. Interestingly, the correlation between perceptions of quality and perceptions of cultural sensitivity was significantly stronger among parents with children with disabilities than parents of children without disabilities, tentatively suggesting that cultural sensitivity may be a more important consideration among this sample of parents and caregivers than the actual quality of the program.

Table 10

Zero-Order Correlation Coefficients, Pearson’s r, for Parents’ and caregivers’ Perceptions of the Quality and Cultural Sensitivity in Early Childhood Programs

Scale	1	2
1. Perceptions of the Quality of Early Childhood Programs	-	.49*
2. Perceptions of the Cultural Sensitivity of Early Childhood Programs	.67*	-

Note. Correlations above the diagonal are for the “No IEP” group ($n = 190$) and those below the diagonal are for the “IEP” group ($n = 25$).

* $p < .01$ (one-tailed)

This chapter reviewed data analysis and results of the *Parent Perceptions Survey* (Appendix A). The research questions were designed to examine parents and caregivers’ perceptions related to quality and cultural sensitivity in early childhood programs. The questions were also designed to measure how parents’ perceptions may vary depending

on whether their children had or did not have disabilities. The results were organized by research question. The next chapter discusses the results, implications, limitations, and future research.

CHAPTER 5

DISCUSSION

Quality early childhood programs are vital because they provide short and long-term positive benefits, such as higher levels of academic achievements, high school graduation, income as adults, and lower rates of grade retention, special education services, juvenile delinquency, teenage pregnancy, incarceration, and public assistance (Campbell et al., 2001; Reynolds et al., 2002; Schweinhart & Weikart, 1980). Positive benefits can only be realized in high quality early childhood programs, which include specific characteristics that are not evident in all preschool programs. These characteristics include parent involvement (Schweinhart et al., 1993) which is driven by parent perceptions, DAP (NAEYC, 2009), culturally responsive instruction, highly qualified teachers, low staff-to-child ratios; and small group instruction (Bloom, 1984), child-directed experiences (Schweinhart, Weikart, & Learner 1998), high teacher expectations for students as well as for parents (Ramey & Campbell, 1984; Schweinhart et al., 1993) and reflective practice (Barnett, 2004a). Parental perceptions of high quality early childhood programs that result in short and long-term benefits are essential to guarantee that all preschool students have the opportunity to realize their full potential.

The purpose of this study was to examine parental perceptions of ECE programs related to parents and caregivers' knowledge and understanding of quality and cultural sensitivity. This chapter includes a discussion of the results for each research question, implications, limitations, and recommendations for future research. Parents and caregivers of children with and without disabilities completed the questionnaire developed for this study, the *Parent Perception Survey* (Appendix A). Perceptions of

these two groups of parents and caregivers were then compared. The questionnaire measured response with a Likert scale.

Parents' Perceptions of Quality Early Childhood Programs

The setting for this study consisted of publicly funded ECE programs in the Southwest United States. Participants were parents and caregivers of children ages 3 to 5 with and without disabilities; whose children attended various programs. The parents and caregivers were surveyed to ascertain their perceptions of quality early childhood programs, which included the program's cultural sensitivity. The results of the four research questions follow.

Research Question 1. Do parents and caregivers perceive that their children attend quality early childhood programs?

Result 1. The results indicated that parents and caregivers of children with and without disabilities perceived their children attended quality early childhood programs which is consistent with previous research (Cryer & Burchinal, 1997; Cryer et al., 2002; Emlen et al., 1999; Karrby & Giota, 1995; McNaughton, 1994). The majority of the parents and caregivers who participated in the study had children enrolled in general education preschool programs such as Title I, Head Start, State-Funded Pre-K and inclusion classrooms. This finding supports Emlen et al.'s (1999) results that parents with and without disabilities reported high levels of quality in ECE programs. The findings also support Odom and Diamond's (1996) results that parents of children in inclusion classrooms rated ECE programs with high levels of satisfaction. The general education and inclusion programs that participated in the study required parent's attendance at monthly meetings and volunteering in the classroom. Parents' and caregivers' knowledge

and understanding of quality programs may have been enhanced while parents and caregivers participated in their monthly meetings and volunteered, as mandated by program guidelines. The lowest rated items whole group (item 10), modifications (item 11) and discipline (item 7) were items that may not have been evident at all times in the classroom. As volunteering may have been conducted at random times throughout the day, parents and caregivers may not have been able to observe these items in the classroom.

The study revealed that parents and caregivers can perceive quality ECE programs. Parents and caregivers demonstrated that they have knowledge and understanding of quality ECE programs. Parents and caregivers were able to rate structural and process quality indicators in the programs their children attended. Research has shown that parents and professionals both reported specific aspects of care as being more important (Cryer & Burchinal, 1997; Cryer et al., 2002). Similarly parents and caregivers in the present study had some of the highest ratings in interactions (item 8) and safety (item 4). According to Cryer and Burchinal (1997) both parents and professionals placed more value on specific aspects of quality of care. In the present study families were able to identify quality indicators such as DAP correctly which supports Emlen et al, (1999) who concluded that some parents could rate programs correctly.

The present study did not support findings of previous research (Cryer & Burchinal, 1997) that parents may not be able to identify quality in early childhood programs. Nevertheless, results of this study indicated parents and caregivers perceived the ECE programs their children attended were quality programs which supported

research findings that parents can define quality in ECE programs (Emlen et al., 1999; Shlay et al., 2005).

Research Question 2. Is there a difference in parental perception in the quality of ECE programs among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

Result 2. This result supports existing research that parents view ECE programs positively (Cryer & Burchinal, 1997; Cryer et al., 2002; Karrby & Giota, 1995; McNaughton, 1994). Both groups of parents and caregivers rated the early childhood programs high on the Likert scale. Parents and caregivers of children with disabilities rated the quality indicators slightly higher than parents and caregivers of children without disabilities which does not support existing research (Zionts et al. 2003) that parents with children with disabilities are dissatisfied with ECE programs. The items with the lowest rated difference in mean score were schedule (item 9) and whole group (item 10). Many of the sites participating in the survey were general education and inclusion sites which have either general education students or a majority of general education students with some special education students. Parents and caregivers attending these programs are required to volunteer and attend parent meetings regardless of whether their child has an IEP or not. Volunteering may allow for parents and caregivers to observe the types of questions posed to students, whether the daily schedule is posted, modifications and how long whole group lasted. Very few parents and caregivers of students with disabilities attending self-contained classrooms participated in the study. Most students in self-contained classrooms are bused to school. Parents and caregivers are encouraged but not required to attend monthly parent meetings or volunteer. The items with the highest

rating differences were questions (items 6) regarding staff's use of open-ended questions and modifications (item 11). Item 11 was rated with higher scores by parents and caregivers of children with disabilities than parents and caregivers of children without disabilities indicating that parents with children with disabilities perceive their children's needs in the classroom are being met.

Research Question 3. Do parents and caregivers perceive that their children attend culturally sensitive early childhood programs?

Result 3. The results indicated that parents and caregivers of children with and without disabilities perceived that their children attended culturally sensitive ECE programs. This result is consistent with research that parents have a high regard for ECE programs (Cryer & Burchinal, 1997; Cryer et al., 2002; Karrby & Giota, 1995; McNaughton, 1994).

Item 18 regarding program representation in the community had the lowest mean score, and also the highest "I don't know" responses. The result may indicate that parents and caregivers are not aware of the agencies and services available to them in their communities, which supports existing research that parents want information and assistance in utilizing community support services (Zionts et al., 2003). The items with the highest mean scores were home language (item 17) and value of home language (item 22). More than 50 % of parents and caregivers who participated in the study reported being Spanish speaking evidently they were very satisfied with program information and services being available in Spanish. Spanish speaking parents and caregivers who accounted for a majority of parent respondents demonstrated that they were able to identify cultural sensitivity indicators when presented with a questionnaire in Spanish.

The present study does not support findings from previous research that Spanish speaking parents are not satisfied with communication from school and teachers (Enyeart et al., 2006).

The questionnaire used in the present study consisted of 10 items that were related to cultural sensitivity. These indicators are essential in measuring how students' and families' diverse needs are being met. Cultural sensitivity is an important part of DAP and the overall framework of quality ECE programs. Cultural sensitivity indicators capture different dimensions of the environment which is consistent with previous research (Peisner-Feinberg et al., 2014).

Research Question 4. Is there a difference in parental perception in the cultural sensitivity of the ECE program among parents and caregivers of students with disabilities and parents and caregivers of typically developing students?

Result 4. The results demonstrated that although parents and caregivers of children with disabilities rated the program overall high in cultural sensitivity indicators, the mean score was lower than parents and caregivers children without disabilities which support existing research that parents of children with disabilities rate programs with more dissatisfaction (Shlay et al., 2005; Spann et al., 2003; Zionts et al., 2003). Parent's dissatisfaction with culturally sensitive indicators may reflect Bridges and Dagys' (2012) results that teachers are not trained to work with diverse populations.

One of the lowest rated items (Item 14) the knowledge the teacher has in terms of how special education is regarded in different cultures is consistent with findings in Zionts et al.'s (2003) study that parents desire more understating of cultural differences from educators. Some of the sites participating in the study were inclusion sites which

have both general education and special education students. Parents and caregivers whose children attend those programs are required to volunteer and attend parent meetings whether their children have an IEP or not. Volunteering may allow for parents and caregivers to observe the cultural sensitivity indicators in action. In self-contained classrooms students with disabilities are bused in and parents and caregivers are encourage but not required to attend parent meetings or volunteer. Therefore, some parents and caregivers may not have the opportunity to observe the class in session. This finding supports existing research that some parents of students with disabilities are dissatisfied with programs their children attend (Spann et al., 2003; Zionts et al., 2003).

Implications

These findings of the present study have both research and theoretical implications. This study is important for enhancing researchers' understanding of parent perceptions in quality ECE programs. Parents and caregivers perceptions of quality early childhood programs are important because perceptions drive involvement (Spann et al., 2003). Research has shown that ECE programs that have comprehensive parent involvement components have positive outcomes that are essential to help narrow the achievement gap (Campbell et al., 2001; Reynolds et al., 2002; Schweinhart et al., 1993).

The study demonstrated parents' and caregivers' knowledge and understanding of quality ECE programs which supports Cryer et al.'s (2002) finding that parents report that quality is important to them in the ECE programs their children attend. Parents and caregivers who attended parent meetings and volunteered had enhanced knowledge and understanding of quality ECE programs. It is necessary that parents and caregivers have knowledge and understanding of quality ECE programs because of the benefits these

programs produce. Parents' knowledge and understanding of ECE quality programs are also critical because parents are viewed as their child's advocate (Cryer et al., 2002). The role of advocate is important because parents are in a unique position to influence the ECE programs their children attend. Parents and caregivers may also contribute to program policies and design. Parents can also influence stakeholders and the decision making process to improve programs. Parent and caregiver perceptions may also be used as a formative assessment tool to improve programs.

The present study addressed parental perceptions of cultural sensitivity. The results of the study demonstrated that parents rated the programs cultural sensitivity high which is consistent with existing research (Cryer & Burchinal, 1997; Cryer et al., 2002; McNaughton, 1994). The present study also documented the need for assessment tools with a cultural perspective for the growing diverse population in ECE programs which is consistent with previous research (Bridges & Dagys, 2012; Peisner-Feinberg et al., 2014). One of the largest growing segments of the diverse population is the Spanish speaking segment. The study demonstrated that Spanish speaking parents and caregivers were able to identify quality in the ECE programs their children attended. The needs of the growing majority minority population must be addressed to improve and support quality ECE programs and QRIS frameworks across the country to ensure quality ECE programs for all children.

This present study addresses the gap in existing literature regarding how parent perceptions may vary depending on whether or not their child has a disability. Educational researchers may be interested in the findings that perceptions differed in parents and caregivers of children with and without disabilities. The present study

revealed that overall both groups of parents and caregivers rated the quality and cultural sensitivity of programs high. Results in the cultural sensitivity section indicated that parents and caregivers with children with disabilities rated the ECE programs lower than parents and caregivers of children without disabilities. The overall mean score for cultural sensitivity indicators were lower than the overall mean score for quality indicators which extends existing research that parents rate cultural sensitivity lower than quality (Cleveland et. al., 2013). The data may indicate that parents and caregivers do not see overt examples of cultural sensitivity indicators as they did for quality indicators in the early childhood programs their children attended which supports existing research (Zionts et al., 2003). Consequently, this study is important for enhancing researchers' understanding of parent perceptions in quality ECE programs.

Limitations

Results of the study also revealed limitations including lack of statistical significance due to a low sample size. There were not enough participants in the sample to detect the very small effect. Another limitation of the study was the small effect size. The effect is small due to a combination of issues between the sample size and sampling bias. There was not enough variability in the responses of participants to create a greater standardized mean difference. The sampling bias may have been created by parents and caregivers who self-selected to participate in the study. Very few parents and caregivers of students with disabilities attending self-contained classrooms participated in the study.

Future Research

The current study adds to the body of early childhood and early childhood special education literature related to how parents and caregivers of children with and without

disabilities perceive quality ECE programs and cultural sensitivity. Based on the findings of this study, three recommendations are discussed for future research. First, replicate similar types of studies on a larger scale with more demographic items to assist in interpretation of results. Second, develop culturally sensitive assessments to address perceptions and practices that support high quality early childhood programs to benefit all students. Third, conduct research studies that examine cultural sensitivity in order to meet the needs of the growing majority minority school populations.

This study examined parental perception of the quality and cultural sensitivity of public ECE programs. Previous research has clearly illustrated that realizing positive short and long-term benefits for students in ECE requires programs that are high quality (Campbell et al., 2001; Reynolds et al, 2002; Schweinhart et al., 1993). Furthermore, research has also found that high-quality ECE programs help students reach their full potential, increase student academic performance, and narrow the achievement gap. High quality programs embody specific characteristics such as high quality teachers, DAP, cultural sensitivity, reflective practices and parental involvement which is driven parental perception. Findings revealed that parents and caregivers including Spanish speaking parents and caregivers perceived that their children attended high quality and culturally sensitive early childhood programs. Parent's and caregivers' ability to identify quality ECE programs is critical because these programs create positive outcomes. Parents and caregivers who possess knowledge and understanding of quality ECE programs are needed in the decision making process to help improve programs, influence policy and advocate for high quality programs and QRIS frameworks. Understanding parental perceptions of quality indicators are necessary to ensure that all preschool programs are

high quality and can deliver the short and long-term benefits needed to maximize students' potential and narrow the achievement gap.

APPENDIX A
PARENT PERCEPTION SURVEY

Parent Perception Survey

The purpose of this research project is to measure parent's perceptions about the quality and cultural sensitivity of early childhood programs. This is a research project being conducted by Juanita Ortiz-Robinson, doctoral student at the University of Nevada, Las Vegas. Your participation in this research study is voluntary. You may choose not to participate. If you decide not to participate in this study, you may withdraw at any time. The procedure involves filling a survey that will take approximately 15 minutes. Your responses will be confidential and we do not collect identifying information. If you have any questions about the research study, please contact Juanita Ortiz-Robinson.

Does your child have an Individual Education Program (IEP)? Yes No
 What gender is the primary caregiver? Female Male (circle one)
 For the following questions, please place an "X" in the box that best answers the statement. Sample

	Never	Sometimes	Often	Always	Not Sure
		X			
	Never	Sometimes	Often	Always	Not Sure
1. There are at least five centers in the classroom. (For example, fine motor/writing, art, library, music, sand/water, dramatic play, nature/science, math/numbers, and computers)					
2. Students' work is displayed at students' eye level in the classroom.					
3. Staff greets parents and each student by name in the home language.					
4. Sufficient supervision is available for students' safety. (1 staff for every 10 students at all times)					
5. Books are available for students. (At least 25 books in the classroom including books with real life pictures)					
6. Staff uses open-ended questions and what, where, when and why questions.					
7. Staff uses discipline methods that do not include punishment. (For example. no time out or behavior management program using stoplight- red, yellow, green concept)					
8. Staff shows warmth and respect to students.					
9. Daily schedule is posted in the classroom.					
10. Whole group time is limited to short periods of time. (10 minutes or less)					
11. Modifications are made for students with disabilities in the classroom. (For example, space for a wheelchair in the classroom)					
12. Parents are encouraged to volunteer in the classroom.					
13. The teacher is aware of the students' culture.					
14. The teacher knows the way special					

education services are regarded in different cultures. (For example, stigmatized, ostracized, or accepted)					
15. The school/early childhood program has a mission and or policy statement on cultural diversity.					
16. The school contains décor, such art work reflecting cultural diverse groups. (For example, artwork displayed in the school lobby and cafeteria)					
17. The early childhood program post signs and sends home materials in the home language. (for example, newsletters, calendars and homework)					
18. The school/early childhood program is represented in community agencies or organizations that assist in serving diverse groups. (such as Latin Chamber of Commerce, NAACP, etc.)					
19. Members of different cultures are represented in the school/early childhood program staff.					
20. The early childhood program provides parent education or training activities on diversity.					
21. Materials used in the classroom reflect different cultures. (For example, dolls, books and posters displayed in the classroom)					
22. The early childhood program promotes and values the home language. (For example, shelves and displays are labeled in Spanish and English)					

Questionario de percepción de los padres

El propósito de este proyecto de investigación es medir las percepciones de los padres sobre la calidad y la sensibilidad cultural de los programas de niñez temprana. Este es un proyecto de investigación que es realizado por Juanita Ortiz-Robinson, estudiante de doctorado en UNLV. Su participación en este estudio de investigación es voluntaria. Usted puede elegir no participar. Si usted decide no participar en este estudio, usted podrá retirarse en cualquier momento. El procedimiento consiste en rellenar una encuesta que durará aproximadamente 15 minutos. Sus respuestas serán confidenciales y no recopilamos información de identificación. Si usted tiene alguna pregunta sobre el estudio de investigación, por favor póngase en contacto con Juanita Ortiz-Robinson al (702) 782-6096.

¿Tiene su niño/niña un Programa Individual Educativo (IEP)? Sí No

Por favor marque con una "X" en la caja que mayor corresponda a las siguientes preguntas.)

Ejemplo

	Nunca	A veces	Seguido	Siempre	No estoy seguro
		X			
	Nunca	A veces	Seguido	Siempre	No estoy seguro
1. Hay por lo menos cinco centros en el salón de clase. (Por ejemplo Motora fina/escritura, arte, biblioteca, música, arena/agua, juego dramático, naturaleza/ciencias, matemáticas/números, y computadoras)					
2. El trabajo de los estudiantes se exhibe al nivel de la vista de los alumnos en el salón de clase.					
3. El personal saluda a los padres y a cada estudiante por su nombre en su lenguaje nativo.					
4. Hay suficiente supervisión disponible para la seguridad del estudiante. (Está una maestro/a con cada 10 estudiantes todo el tiempo)					
5. Hay libros disponibles para los estudiantes. (Por los menos 25 libros en el salón de clase incluyendo libros con fotografías de la vida real)					
6. El personal acostumbra hacer preguntas abiertas como ¿que?, ¿donde?, ¿cuando?, y ¿porque?					
7. Usa el personal métodos disciplinarios que no incluyen castigo. (Por ejemplo, no castigos o programas de manejo de comportamientos usando el concepto del semáforo, rojo amarillo, verde)					
8. El personal demuestra cordialidad y respeto a los estudiantes.					

9. El horario está colocado diariamente en el salón de clase.					
10. El tiempo del grupo entero está limitado a un corto período de tiempo. (10 minutos o menos)					
11. Las modificaciones son hechas para los estudiantes con incapacidades en el salón de clase. (Por ejemplo, espacio para una silla de ruedas en el salón de clase).					
12 A los padres se les anima para ser voluntarios en el salón de clase.					
13. El/La maestro/a es consciente de la cultura de los estudiantes.					
14. El/La maestro/a conoce la forma de los servicios de educación especial relacionados a las diferentes culturas. (Por ejemplo, estigmatizados, obstruidos o aceptados)					
15. El programa de temprana infancia de la escuela tiene una misión o política establecida. sobre diversidad cultural.					
16. La escuela contiene decoración, como trabajos artísticos que reflejan grupos con cultura diversa (Por ejemplo, trabajos de arte exhibidos a la entrada de la escuela y la cafetería).					
17. El programa de temprana infancia exhibe letreros y envía materiales en el lenguaje que los niños hablan en casa. (Por ejemplo, cartas de noticias, calendarios y tarea)					
18. El programa de temprana infancia de la escuela y personal es representado en agencias comunitarias y organizaciones que asisten y dan servicio a grupos diversos. (Tal como la Cámara de Comercio Latina, NAACP, etc.)					
19. ¿Miembros de diferentes culturas están representados en el programa de temprana infancia de las escuela y personal?					
20. El programa de temprana infancia provee educación a los padres o actividades de entrenamiento relacionados a diversidad.					
21. Los materiales del salón reflejan diferentes culturas. (Por ejemplo, muñecas, libros cartulinas exhibidos en el salón de clase)					
22. El programa de temprana infancia promueve y valora el lenguaje que hablan los niños en sus casas.(Por ejemplo, repisas y letreros en Inglés y Español)					

APPENDIX B

FREQUENCY COUNTS AND PERCENTILES FOR RESPONSES BY ITEM OF THE
QUALITY IN EARLY CHILDHOOD PROGRAMS

Frequency Counts and Percentiles for Responses by Item of the Quality in Early Childhood Programs

Item	Raw Frequency (%)				
	Not Sure N (%)	Never N (%)	Sometimes N (%)	Often N (%)	Always N (%)
1. There are at least 5 centers in the classroom.	14 (6.5)	2 (0.9)	6 (2.8)	20 (9.3)	173 (80.5)
2. Students' work is displayed at students' eye level in the class.	13 (6.0)	1 (0.5)	14 (6.5)	28 (13.0)	159 (74.0)
3. Staff greet parents and each student by name in the home language.	3 (1.4)	3 (1.4)	21 (9.8)	21 (9.8)	167 (77.7)
4. Sufficient supervision is available for students' safety.	8 (3.7)	0 (0)	5 (2.3)	13 (6.0)	189 (87.9)
5. Books are available for students.	7 (3.3)	0 (0)	3 (1.4)	12 (5.6)	190 (88.4)
6. Staff uses open-ended questions and what, where, when and why questions.	22 (10.2)	2 (0.9)	19 (8.8)	22 (10.2)	150 (69.8)
7. Staff uses discipline methods that do not include punishment.	47 (21.9)	14 (6.2)	22 (10.2)	17 (7.9)	115 (53.5)

(continued...)

Frequency Counts and Percentiles for Responses by Item of the Quality in Early Childhood Programs (Continued)

Item	Raw Frequency (%)				
	Not Sure N (%)	Never N (%)	Sometimes N (%)	Often N (%)	Always N (%)
8. Staff shows warmth and respect to students.	3 (1.4)	3 (1.4)	6 (2.8)	13 (6.0)	190 (88.4)
9. Daily schedule is posted in the classroom.	32 (14.9)	0 (0)	13 (6.0)	12 (5.6)	158 (73.5)
10. Whole group time is limited to short periods of time.	88 (40.9)	3 (1.4)	18 (8.4)	17 (7.9)	89 (41.4)
11. Modifications are made for students with disabilities in the classroom.	71 (33.0)	8 (3.7)	6 (2.8)	14 (6.5)	116 (54.0)
12. Parents are encouraged to volunteer in the classroom.	9 (4.2)	5 (2.3)	13 (6.0)	23 (10.7)	165 (76.7)

N=215

APPENDIX C

FREQUENCY COUNTS AND PERCENTILES FOR RESPONSES BY ITEM OF THE
CULTURAL SENSITIVITY IN EARLY CHILDHOOD PROGRAMS

Frequency Counts and Percentiles for Responses by Item of the Cultural Sensitivity in Early Childhood Programs

Item	Raw Frequency (%)				
	Not Sure N (%)	Never N (%)	Sometimes N (%)	Often N (%)	Always N (%)
13. The teacher is aware of the students' culture.	23 (10.7)	0 (0)	7 (3.3)	16 (7.4)	169 (78.6)
14. The teacher knows the way special education services are regarded in different cultures.	66 (30.7)	0 (0)	8 (3.7)	14 (6.5)	127 (59.1)
15. The school contains décor, such art work reflecting cultural diverse groups.	72 (33.5)	1 (0.5)	12 (5.6)	8 (3.7)	122 (56.7)
16. The school contains décor, such as artwork reflecting cultural diverse groups.	19 (8.8)	2 (0.9)	12 (5.6)	19 (8.8)	163 (75.8)
17. The early childhood program post signs and sends home materials in the home language.	14 (6.5)	3 (1.4)	11 (5.1)	9 (4.2)	178 (82.8)
18. The school/early childhood program is represented in community agencies or organizations that assist in serving diverse groups.	111(51.6)	5 (2.3)	3 (1.4)	16 (7.4)	80 (37.2)

(Continued...)

Frequency Counts and Percentiles for Responses by Item of the Cultural Sensitivity in Early Childhood Programs (Continued)

Item	Raw Frequency (%)				
	Not Sure N (%)	Never N (%)	Sometimes N (%)	Often N (%)	Always N (%)
19. Members of different cultures are represented in the school/early childhood program staff.	54 (25.1)	1 (0.5)	12 (5.6)	17 (7.9)	131 (60.9)
20. The early childhood program provide parent education or training activities on diversity.	41 (19.1)	2 (0.9)	14 (6.5)	24 (11.2)	134 (62.3)
21. Materials used in the classroom reflect different cultures.	24 (11.2)	2 (0.9)	13 (6.0)	19 (8.8)	157 (73.0)
22. The early childhood program promotes and values the home language.	16 (7.4)	1 (0.5)	13 (6.0)	20 (9.3)	165 (76.7)
N=215					

APPENDIX D
SCRIPT FOR PARENT MEETINGS

Doctoral student: Hello, My Name is Juanita Ortiz-Robinson, I am a doctoral student at the UNLV. I am conducting a research project “Comparison Study of parents perception of early childhood programs” The purpose of this research project is to measure parent’s perceptions about the quality and cultural sensitivity of early childhood programs.

Your participation in this research study is voluntary. You may choose not to participate. If you decide not to participate in this study, you may withdraw at any time. The procedure involves filling a survey that will take approximately 15 minutes. Your responses will be confidential and we do not collect identifying information. If you have any questions about the research study, please contact me at (702) 782-6096 or Dr. Gelfer at (702) 895-1327.

I will now read the informed consent forms
(doctoral student will hold up form to indicate which form is being read)

INFORMED CONSENT

Department of Department of Education and Clinical Studies

TITLE OF THE STUDY: Comparison Study of Parent’s Perceptions of Early Childhood programs

INVESTIGATORS: Jeffery Gelfer and Juanita Ortiz

CONTACT PHONE NUMBER: (702) 895-1327

Purpose of the Study

The purpose of this study is to examine parental perceptions of early childhood programs relating to quality including cultural sensitivity.

Participants

Participants will be the primary caregivers, whose children are receiving educational services from the local public school district and have children between the ages of three to five.

Procedures

If you volunteer to participate in the study, you will be asked to complete a 15 minute questionnaire.

Benefits of Participation

There may be no direct benefit to you as the participant. However, we hope improve understanding of parent perceptions related to high quality early childhood programs.

Risks of Participation

This study may include only minimal risks as you may be asked questions you are uncomfortable answering.

Cost/Compensation

There will be no financial cost to you for participating in the study. The study will take 15 minutes. You will not be compensated for your will not be compensated for our time.

Contact Information

If you have any questions or concerns regarding the study you may contact Jeff Gelfer at 895-1327 or Juanita Ortiz at 782-6096. For questions, comments or concerns regarding the rights of research subjects or the manner in which this research study is being conducted you may contact the UNLV office for the protection of research subjects at 895-2794.

INFORMED CONSENT

Department of Education and Clinical Studies

TITLE OF THE STUDY: Comparison Study of Parent’s Perceptions of Early Childhood Programs

INVESTIGATORS: Jeffery Gelfer and Juanita Ortiz

CONTACT PHONE NUMBER: (702) 895-1327 about the study.

Voluntary Participation:

Participation in this study is voluntary. You may refuse to participate or withdraw from the study at any time. You are encouraged to ask questions

Confidentiality:

Information gathered in the study will be kept completely confidential. There will be no reference made in writing or verbally linking you to this study. All records will be stored in a locked facility at UNLV for at least 3 years after competition. After the 3 years all data collected will be shredded and discarded.

Participant Consent:

I have read the above information and agree to participate in this study. I am at least 18 years of age. A copy of this form has been given to me.

Signature of Participant

Date

Participant Name (Please Print)

Doctoral Student: I will now read all the questions in the survey and directions.

Does your child have an Individual Education Program (IEP)? Yes No
What gender Is the primary caregiver? Female Male
(circle one)

For the following questions, please place an “X” in the box that best answers the statement.

Sample

Never	Sometimes	Often	Always	Not Sure
	X			

1. There are at least five centers in the classroom. (For example, fine motor/writing, art, library, music, sand/water, dramatic play, nature/science, math/numbers, and computers)
2. Students’ work is displayed at students’ eye level in the classroom.
3. Staff greets parents and each student by name in the home language.
4. Sufficient supervision is available for students’ safety. (1 staff for every 10 students at all times)
5. Books are available for students. (At least 25 books in the classroom including books with real life pictures)
6. Staff uses open-ended questions and what, where, when and why questions.
7. Staff uses discipline methods that do not include punishment. (For example. no time out or behavior management program using stoplight- red, yellow, green concept)
8. Staff shows warmth and respect to students.
9. Daily schedule is posted in the classroom.
10. Whole group time is limited to short periods of time. (10 minutes or less)
11. Modifications are made for students with disabilities in the classroom. (For example, space for a wheelchair in the classroom)
12. Parents are encouraged to volunteer in the classroom.
13. The teacher is aware of the students’ culture.
14. The teacher knows the way special education services are regarded in different cultures. (For example, stigmatized, ostracized, or accepted)
15. The school/early childhood program has a mission and/or policy statement on cultural diversity.
16. The school contains décor, such art work reflecting cultural diverse groups. (For example, artwork displayed in the school lobby and cafeteria)
17. The early childhood program post signs and sends home materials in the home language. (for example, newsletters, calendars and homework)
18. The school/early childhood program is represented in community agencies or organizations that assist in serving diverse groups. (such as Latin Chamber of Commerce, NAACP, etc.)
19. Members of different cultures are represented in the school/early childhood program staff.
20. The early childhood program provides parent education or training activities on diversity.
21. Materials used in the classroom reflect different cultures. (For example, dolls, books and posters displayed in the classroom)

22. The early childhood program promotes and values the home language.
(For example, shelves and displays are labeled in Spanish and English)

Doctoral student: Thank you for taking the time to complete the survey.

(Doctoral student will collect all surveys and consent forms)

The process will be repeated in Spanish.

Estudiante de doctorado:

Hola, mi nombre es Juanita Ortiz-Robinson, y soy una estudiante de doctorado en la UNLV. Estoy realizando un proyecto de investigación "Estudio comparativo de la percepción de los padres de los programas de niñez temprana" el propósito de este proyecto de investigación es medir las percepciones de los padres sobre la calidad y la sensibilidad cultural de los programas de temprana infancia.

Su participación en este estudio de investigación es voluntaria. Usted puede elegir no participar. Si usted decide no participar en este estudio, usted podrá retirarse en cualquier momento. El procedimiento consiste en rellenar una encuesta que durará aproximadamente 15 minutos. Sus respuestas serán confidenciales y no recopilamos información de identificación. Si usted tiene alguna pregunta sobre el estudio de investigación, por favor comuníquese conmigo al (702) 782-6096 o Dr. Gelfer al (702) 895-1327.

Ahora voy a leer los formularios de consentimiento informado
(El estudiante de doctorado sostendrá una forma para indicar cual forma está siendo leída)

CONSENIAMIENTO INFORMADO
Departamento de Educación y Estudios Clínicos

TITULO del ESTUDIO: Estudio de Comparación de las Percepciones de los Padres en los Programas de Temprana Infancia.

INVESTIGADORES: Jeffery Gelfer y Juanita Ortiz

NUMERO TELEFONICO DE CONTACTO: (702) 895-1327

Propósito del Estudio

El propósito de este estudio es para examinar las percepciones de los padres sobre programas de Temprana Infancia relacionados con su calidad incluyendo su sensibilidad cultural.

Participantes

Los participantes serán los que están directamente al cuidado de los niños que están recibiendo servicios educacionales en las escuelas públicas locales del distrito escolar y que tengan niños entre las edades de tres a cinco años.

Procedimientos

Si usted participa voluntariamente en el estudio, se le pedirá que complete un cuestionario que durará 15 minutos.

Beneficios de Participación

Quizás no haya beneficio directo para usted como participante, sin embargo, nosotros esperamos comprender mejor las percepciones de los padres relacionadas a la alta calidad de los programas de Temprana Infancia.

Riesgos de Participación

Este estudio puede incluir solamente riesgos mínimos, pueden harcerles preguntas que al contestarlas se sientan desagutso.

Costo/Compensación

No habrá costo financiero para los que participen en este estudio. El estudio durará 15 minutos. Ni usted ni nosotros seremos recompensados por nuestro tiempo.

Información de Contacto

Si usted tiene preguntas o preocupaciones relacionadas con el estudio, puede comunicarse con Jeffrey Gelfer al 895-1327 o con Juanita Ortiz al 782-6096. Para preguntas, comentarios o preocupaciones con respeto a los derechos de los temas de investigación o de la manera en la que se está llevando a cabo este estudio de investigación, usted puede contactarse con la oficina de protección de los temas de investigación de UNLV al 895-2794

TITULO del ESTUDIO: Estudio de Comparación de las Percepciones de los Padres en los Programas de Temprana Infancia.

Participación Voluntaria

La participación en este estudio es voluntaria. Usted puede negarse a participar o retirarse del estudio a cualquier momento. Nosotros los animamos a hacer preguntas acerca del estudio.

Confidencialidad

La información que se reúna en el estudio será mantenida completamente confidencial; no habrá referencias verbales, ni por escrito, vinculadas con usted en este estudio. Todos los archivos serán almacenados con llave en el edificio de UNLV por lo menos tres años después de completarlos. Después de tres años toda la información recabada será triturada y descartada.

Consentimiento del Participante:

He leído la información citada y estoy de acuerdo en participar en el estudio y tengo por los menos 18 años de edad. Se me ha dado una copia de este formulario.

Firma del Participante

Fecha

Nombre del Participante (Por favor Letra de Imprenta)

Estudiante de doctorado: ahora voy a leer todas las preguntas en la encuesta y las instrucciones.

Cuestionario de percepción de los padres

El propósito de este proyecto de investigación es medir las percepciones de los padres sobre la calidad y la sensibilidad cultural de los programas de niñez temprana. Este es un proyecto de investigación que es realizado por Juanita Ortiz-Robinson, estudiante de doctorado en UNLV. Su participación en este estudio de investigación es voluntaria. Usted puede elegir no participar. Si usted decide no participar en este estudio, usted podrá retirarse en cualquier momento. El procedimiento consiste en rellenar una encuesta que durará aproximadamente 15 minutos. Sus respuestas serán confidenciales y no recopilamos información de identificación. Si usted tiene alguna pregunta sobre el estudio de investigación, por favor póngase en contacto con Juanita Ortiz-Robinson al (702) 782-6096.

¿Tiene su niño/niña un Programa Individual Educativo (IEP)? Sí No

Qué género tiene el cuidador ¿primario? Femenino Masculino

Por favor marque con una "X" en la caja que mejor corresponda a las siguientes preguntas. (Marque uno)

Ejemplo

Nunca	A veces	Seguido	Siempre	No estoy seguro
	X			

<p>1. Hay por lo menos cinco centros en el salón de clase. (Por ejemplo Motora fina/escritura, arte, biblioteca, música, arena/agua, juego dramático, naturaleza/ciencias, matemáticas/números, y computadoras)</p>
<p>2. El trabajo de los estudiantes se exhibe al nivel de la vista de los alumnos en el</p>

salón de clase.
3. El personal saluda a los padres y a cada estudiante por su nombre en su lenguaje nativo.
4. Hay suficiente supervisión disponible para la seguridad del estudiante. (Está una maestro/a con cada 10 estudiantes todo el tiempo)
5. Hay libros disponibles para los estudiantes. (Por los menos 25 libros en el salón de clase incluyendo libros con fotografías de la vida real)
6. El personal acostumbra hacer preguntas abiertas como ¿que?, ¿donde?, ¿cuando?, y ¿porque?.
7. Usa el personal métodos disciplinarios que no incluyen castigo. (Por ejemplo, no castigos o programas de manejo de comportamientos usando el concepto del semáforo, rojo amarillo , verde)
8. El personal demuestra cordialidad y respeto a los estudiantes.
9. El horario está colocado diariamente en el salón de clase.
10. El tiempo del grupo entero está limitado a un corto período de tiempo. (10 minutos o menos)
11. Las modificaciones son hechas para los estudiantes con incapacidades en el salón de clase. (Por ejemplo, espacio para una silla de ruedas en el salón de clase).
12 A los padres se les anima para ser voluntarios en el salón de clase.
13. El/La maestro/a es consciente de la cultura de los estudiantes.
14. El/La maestro/a conoce la forma de los servicios de educación especial relacionados a las diferentes culturas. (Por ejemplo, estigmatizados, obstruidos o aceptados)
15. El programa de temprana infancia de la escuela tiene una misión o política establecida. sobre diversidad cultural.
16. La escuela contiene decoración, como trabajos artísticos que reflejan grupos con cultura diversa (Por ejemplo, trabajos de arte exhibidos a la entrada de la escuela y la cafetería).
17. El programa de temprana infancia exhibe letreros y envía materiales en el lenguaje que los niños hablan en casa. (Por ejemplo, cartas de noticias, calendarios y tarea)
18. El programa de temprana infancia de la escuela y personal es representado en agencias comunitarias y organizaciones que asisten y dan servicio a grupos diversos. (Tal como la Cámara de Comercio Latina, NAACP, etc.)
19. ¿Miembros de diferentes culturas están representados en el programa de temprana infancia de las escuela y personal?
20. El progama de temprana infancia provee educación a los padres o actividades de entrenamiento relacionados a diversidad.
21. Los materiales del salón reflejan diferentes culturas. (Por ejemplo, muñecas, libros cartulinas exhibidos en el salón de clase)
22. El programa de temprana infancia promueve y valora el lenguaje que hablan los niños en sus casas. (Por ejemplo, repisas y letreros en Inglés y Español)

Estudiante de doctorado: Gracias por tomar el tiempo para rellenar la encuesta.

(Estudiante de doctorado recogerá todas las encuestas y los formularios de consentimiento)

APPENDIX E
PARTICIPANT INFORMED CONSENT FORM



Social/Behavioral IRB – Exempt Review Deemed Exempt

DATE: April 21, 2014
TO: Dr. Jeffery Gelfer, Educational & Clinical Studies
FROM: Office of Research Integrity – Human Subjects
RE: Notification of IRB Action
Protocol Title: Comparison Study of Parents' Perceptions of Early Childhood Programs
Protocol # 1404-4776M

This memorandum is notification that the project referenced above has been reviewed as indicated in Federal regulatory statutes 45CFR46 and deemed exempt under 45 CFR 46.101(b)2.

PLEASE NOTE:

Upon Approval, the research team is responsible for conducting the research as stated in the exempt application reviewed by the ORI – HS and/or the IRB which shall include using the most recently submitted Informed Consent/Assent Forms (Information Sheet) and recruitment materials. The official versions of these forms are indicated by footer which contains the date exempted.

Any changes to the application may cause this project to require a different level of IRB review. Should any changes need to be made, please submit a **Modification Form**. When the above-referenced project has been completed, please submit a **Continuing Review/Progress Completion report** to notify ORI – HS of its closure.

If you have questions or require any assistance, please contact the Office of Research Integrity - Human Subjects at IRB@unlv.edu or call 895-2794.

Office of Research Integrity – Human Subjects
4505 Maryland Parkway • Box 451047 • Las Vegas, Nevada 89154-1047
(702) 895-2794 • FAX: (702) 895-0805



INFORMED CONSENT

Department of Department of Educational and Clinical Studies

TITLE OF THE STUDY: Comparison Study of Parent's Perceptions of Early Childhood Programs

INVESTIGATORS: Jeffery Gelfer and Juanita Ortiz

CONTACT PHONE NUMBER: (702) 895-1327

Purpose of the Study

The purpose of this study is to examine parental perceptions of early childhood programs relating to quality including cultural sensitivity.

Participants

Participants will be the primary caregivers, whose children are receiving educational services from the local public school district and have children between the ages of three to five.

Procedures

If you volunteer to participate in the study, you will be asked to complete a 15 minute questionnaire.

Benefits of Participation

There may be no direct benefit to you as the participant. However, we hope improve understanding of parent perceptions related to high quality early childhood programs.

Risks of Participation

This study may include only minimal risks as you may be asked questions you are uncomfortable answering.

Cost/Compensation

There will be no financial cost to you for participating in the study. The study will take 15minutes. You will not be compensated for your will not be compensated for our time.

Contact Information

If you have any questions or concerns regarding the study you may contact **Jeff Gelfer at 895-**

1327or Juanita Ortiz at 782-6096. For questions, comments or concerns regarding the rights of research subjects or the manner in which this research study is being conducted you may

contact **the UNLV Office of Research Integrity – Human Subjects at 895-2794.**

Deemed exempt by the ORI-HS and/or the UNLV IRB. Protocol

1404-4776M Exempt Date: 04-21-14

TITLE OF THE STUDY: Comparison Study of Parent’s Perceptions of Early Childhood Programs

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate or withdraw from the study at any time. You are encouraged to ask questions

Confidentiality

Information gathered in the study will be kept completely confidential. There will be no reference made in writing or verbally linking you to this study. All records will be stored in a locked facility at UNLV for at least 3 years after completion. After the 3 years all data collected will be shredded and discarded.

Participant Consent

I have read the above information and agree to participate in this study. I am at least 18 years of age. A copy of this form has been given to me.

Signature of Participant

Date

Participant Name (Please Print)

***Deemed exempt by the ORI-HS and/or the UNLV IRB. Protocol
1404-4776M Exempt Date: 04-21-14***



UNIVERSITY OF NEVADA LAS VEGAS

CONSENIAMIENTO INFORMADO

Departamento de Educación y Estudios Clínicos

TITULO del ESTUDIO: Estudio de Comparación de las Percepciones de los Padres en los Programas de Temprana Infancia.

INVESTIGADORES: Jeffery Gelfer y Juanita Ortiz

NUMERO TELEFONICO DE CONTACTO: (702) 895-1327

Propósito del Estudio

El propósito de este estudio es para examinar las percepciones de los padres sobre programas de Temprana Infancia relacionados con su calidad incluyendo su sensibilidad cultural.

Participantes

Los participantes serán los que están directamente al cuidado de los niños que están recibiendo servicios educacionales en las escuelas públicas locales del distrito escolar y que tengan niños entre las edades de tres a cinco años.

Procedimientos

Si usted participa voluntariamente en el estudio, se le pedirá que complete un cuestionario que durará 15 minutos.

Beneficios de Participación

Quizás no haya beneficio directo para usted como participante, sin embargo, nosotros esperamos comprender mejor las percepciones de los padres relacionadas a la alta calidad de los programas de Temprana Infancia.

Riesgos de Participación

Este estudio puede incluir solamente riesgos mínimos, pueden harcerles preguntas que al contestarlas se sientan desagutso.

Costo/Compensación

No habrá costo financiero para los que participen en este estudio. El estudio durará 15 minutos. Ni usted ni nosotros seremos recompensados por nuestro tiempo.

Información de Contacto

Si usted tiene preguntas o preocupaciones relacionadas con el estudio, puede comunicarse con Jeffrey Gelfer al 895-1327 o con Juanita Ortiz al 782-6096. Para preguntas, comentarios o preocupaciones con respeto a los derechos de los temas de investigación o de la manera en la que se está llevando a cabo este estudio de investigación, usted puede contactarse con la oficina de protección de los temas de investigación de UNLV al 895-2794

TITULO del ESTUDIO: Estudio de Comparación de las Percepciones de los Padres en los Programas de Temprana Infancia.

Participación Voluntaria

La participación en este estudio es voluntaria. Usted puede negarse a participar o retirarse del estudio a cualquier momento. Nosotros los animamos a hacer preguntas acerca del estudio.

Confidencialidad

La información que se reúna en el estudio será mantenida completamente confidencial ; no habrá referencias verbales, ni por escrito, vinculadas con usted en este estudio. Todos los archivos serán almacenados con llave en el edificio de UNLV por lo menos tres años después de completarlos. Después de tres años toda la información recabada será triturada y descartada.

Consentimiento del Participante:

He leído la información citada y estoy de acuerdo en participar en el estudio y tengo por lo menos 18 años de edad. Se me ha dado una copia de este formulario.

Firma del Participante

Fecha

Nombre del Participante (Por favor Letra de Imprenta)

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EDUCATION

2015	Ph.D	University of Nevada Las Vegas Las Vegas, Nevada, USA Special Education
2006	M.Ed.	University of Nevada Las Vegas Las Vegas, Nevada, USA Early Childhood Special Education
1992	B.S.	University of San Francisco San Francisco, CA, USA Business Administration
1987	A.A.	Fashion Institute of Design and Merchandising San Francisco, CA, USA

COLLEGE TEACHING EXPERIENCE

Spring 2010	Orientation for Masters in Leadership on-line program TLDR 101 Sierra Nevada College Las Vegas, Nevada, USA
Fall 2008	Assessment in Early Childhood Special Education EDSP 473 University of Nevada Las Vegas Las Vegas, Nevada, USA

PROFESSIONAL EXPERIENCE

2008- Present	Project Facilitator, Early Childhood Special Education, Clark County School District, Las Vegas, NV
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2011-2013	Early Childhood Content Expert and Mentor Teacher, New Teacher Center, Santa Cruz, CA
2005-2008	Developmental Specialist, Nevada Early Intervention Services, Las Vegas, NV
2003-2005	Family Specialist, Nevada Early Intervention Services, Las Vegas, NV
2001-2003	Home Visitor, Head Start Economic Opportunity Board, Las Vegas, NV
1999-2001	Resource Specialist/Office Manager, Family to Family Connection, Las Vegas, NV

Software programs: SPSS, Microsoft Word, Excel, PowerPoint

Languages: English and Conversational Spanish

PRESENTATIONS

Ortiz-Robinson, Jany. (October, 2014) *Sound Beginnings*. Clark County School District, Professional Development, Las Vegas, NV.

Ortiz-Robinson, Jany. (September, 2014) *Whole Group Instruction*. Clark County School District, Professional Development, Las Vegas, NV.

Ortiz-Robinson, Jany. (September, 2014) *Early Childhood Small Learning Group Facilitator*. Clark County School District, Professional Development, Las Vegas, NV.

Ortiz-Robinson, Jany. (May, 2014) *Co-Teaching*. Clark County School District, Professional Development, Las Vegas, NV.

Ortiz-Robinson, Jany. (January-March, 2014) *Reflective Practice Facilitator*. Clark County School District, Early Childhood Conference, Las Vegas, NV.

Ortiz-Robinson, Jany. (January-March, 2014) *All About Words Book Study Co-Facilitator*. Clark County School District, Early Childhood Conference, Las Vegas, NV.

Ortiz-Robinson, Jany. (February, 2014) *Parent Family Engagement*. Clark County School District, Early Childhood Conference, Las Vegas, NV.

- Ortiz-Robinson, Jany. (February, 2014) *Panel Forum: Teacher Aide to Teacher Transition*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (September, 2013) *Behavior Management TACSEI-*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (January, 2013) *Cultural Diversity in Early Childhood*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (January, 2012) *Early Childhood Education and Cultural Diversity*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (January, 2012) *3-D Art*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (July, 2011) *Multicultural Education: Using a Multicultural Awareness Tool*. Presentation at the International Association of Special Education Conference, Windhoek, Namibia.
- Ortiz-Robinson, Jany. (March, 2011) *The Impact of Multicultural Education on Early Childhood*. Clark County School District, Early Childhood Conference, Las Vegas, NV.
- Ortiz-Robinson, Jany. (January, 2010) *Partnerships: Teachers, Parents and Administrators*. Presentation at the Hawaii International Conference on Education, Honolulu, HI.
- Ortiz-Robinson, Jany. (July, 2009) *The Continuum of Early Intervention Services*. Presentation at International Association of Special Education Conference, Alicante, Spain.
- Ortiz-Robinson, Jany. (October, 2007) *Accessing Nevada Early Intervention Services*. Presentation at Community Development Institute-Head Start In-Service. Las Vegas, NV.
- Ortiz-Robinson, Jany. (March, 2007). *Accommodation and Modification for Preschool Students with Disabilities*. Presentation at Community Development Institute-Head Start In-Service. Las Vegas, NV.
- Ortiz-Robinson, Jany. (October, 2006). *Collaborating with Early Intervention Services*. Presented at Community Development Institute-Head Start In-Service. Las Vegas, NV.

PROFESSIONAL DEVELOPMENT

Service

2014-Present	Head Start Board Member Acelero Learning Clark County Las Vegas, NV
2011-2014	Equity and Diversity Education Liaison Clark County School District Las Vegas, NV
2010- 2011	Creative Curriculum Gold Advisory Committee Clark County School District Las Vegas, NV
2006-2008	Transition Advisory Committee Member CDI-Head Start Las Vegas, NV
2006-2008	Health Advisory Committee Member CDI- Head Start Las Vegas, NV
2006-2008	Complaint Task Force Nevada Early Intervention Services Las Vegas, NV
2001-2003	Parent Advisory Committee Member, Nevada Early Intervention Services, Las Vegas, NV

HONORS AND AWARDS

- Jean Nidetch Women's Center, Elaine Marion Scholarship, University of Nevada
Las Vegas, Fall 2009/Spring 2010
- Nevada Education State Association Scholarship, University of Nevada Las Vegas,
Fall 2009
- Faddis Kennedy Scholarship, University of Nevada Las Vegas, Fall 2008/Spring
2009
- Jean Nidetch Women's Center, Friendship Re-Entry Scholarship, University of
Nevada Las Vegas, Fall 2008/Spring 2009

Jean Nidetch Women's Center, Friendship Re-Entry Scholarship, University of Nevada Las Vegas, Fall 2007/Spring 2008

Jean Nidetch Women's Center Friendship Re-Entry Scholarship, University of Nevada Las Vegas, Spring 2007

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AFFILIATIONS

National Association for the Education of Young Children (NAEYC)

Council for Exceptional Children (CEC)

International Association of Special Education (IASE)