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PARENTAL SUPPORT GROUP MEMBER'S VIEWS ON INCLUSION

by
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A Thesis

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Dedication

I would like to dedicate my thesis to my mother, Bonnie McGinley Blasy, who

has been there for me from preschool to graduate school and everything in between.

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I would like to thank my advisors, Dr. Terri Allen and Dr. Roberta Dihoff, for their help and guidance throughout the semester. I would also like to thank the parental support groups and their members who I worked with throughout the process for their cooperation.

Abstract

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PARENTAL SUPPORT GROUP MEMBER'S VIEWS ON INCLUSION
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Master of Arts in School Psychology

The purpose of this study was to measure the view that parents involved in support groups for parents of children with special needs have on inclusion. Parents were surveyed using the "Parent Opinion About Inclusion/Mainstreaming" questionnaire developed by Leyser and Kirk (2004). Children whose parents completed the survey were ages 4 through 20 and were included in various educational settings. Parents were found to be generally supportive of the idea of inclusion. Benefits of inclusion included social skills for both students with and without disabilities, academic skills, and equal opportunities. Perceived problems with inclusion included experience and adaptability of general education teacher, loss of special education services, individualized instruction, perceptions of other parents/students, and their child being left out. Parents reported low levels of satisfaction for their child's current classroom placement.

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Chapter 1

Introduction

Inclusion, although not a new idea, is becoming more of the norm than it was in the past. Through this mainstreaming process, both general and special education teachers are working together to create an appropriate learning environment for students with different educational backgrounds and needs. Inclusion is practiced in elementary, middle, and high schools across the country. An inclusion classroom setting is something that any child will most likely come across in the future. Many studies have been completed to measure the academic effectiveness of inclusion classrooms. An important measure to research is the parents of children in inclusion classroom settings. It is vital to measure satisfaction from the parents of both general and special education students due to the increasing support of inclusion.

Purpose

The purpose of this study is to measure parental satisfaction of current inclusion practices for those who have children with disabilities. Items measured are parental happiness of child's current classroom and the parent's beliefs on inclusion. This includes perceived pros and cons of their child's placement in an inclusion classroom. Parental approval and responses are important for parental satisfaction within a school setting and for continued improvement in other inclusion classrooms.

Theory

Many have traced ideas of mainstreaming in the classroom to Jean Piaget. IDEA requires that students with disabilities be placed in the least restrictive environment. Preferably this is to the greatest extent possible with their peers. Inclusion, either full or

partial, embodies this. Inclusion allows those with disabilities to be with their peers in the general education setting to varying degrees. Theory and existing research is discussed more fully in Chapter 2, the Literature Review.

Definitions

Various definitions of the term "inclusion" will be provided in Chapter 2. The definitions provided will be drawn from a previously completed study (Vaughn and Schumm, 1995). If clarification is required on other items or terms, contact information for the primary investigator will be provided in the survey. The survey being used in this study is the "Parent Opinion About Inclusion/Mainstreaming" questionnaire by Leyser and Kirk (2004). To complete the survey, parents should be familiar with the diagnosis and classification of their child's disability. This classification system follows the standards of the New Jersey Department of Education. The classifications are as follows: Autism, Deaf/Blindness, Emotional Disturbance, Hearing Impairments, Intellectual Disabilities, Multiple Disabilities, Other Health Impairments, Orthopedic Impairments, Specific Learning Disabilities, Speech and Language Impairment, Traumatic Brain Injured, and Visual Impairment. Parents are encouraged to specify disability within classification. For example, if their child has ADHD, they would check "Other Health Impairments" for classification and specify ADHD.

Assumptions

This study relies on parents having an interactive and involved role in the education of their child. It also requires understanding and knowledge of how the child's classroom is organized. To correctly evaluate their child, a deep understanding of their

child's academic and social growth is needed. Knowledge of the content of their child's

IEP is also required to respond if IEP and special education needs are met.

Limitations

A limitation of this study is that its results are not representative of the country's

whole inclusion practices. Due to only surveying among parents in New Jersey, the

sample of parents is not representative of all populations. Although not applicable to all,

it is important to be noted across the country to help ensure parental approval of inclusion

classrooms.

Summary

Parental satisfaction for inclusion will be measured using surveys sent via Survey

Monkey to parents involved in parental support groups for those with children with

disabilities. All of the parent support groups are based in New Jersey. Despite the child's

classroom placement, reports on inclusion will be collected. Factors studied will be

beliefs on social factors, academic factors, and teaching strategies. Past research will be

looked at in comparison for inclusion practices and past parental satisfaction programs.

Demographic information will be collected for each parent and child. The child's current

classroom placement and number of years in the setting will also be looked at.

Hypotheses

The hypotheses for this study are listed below:

1) Parents of younger children will support inclusion more than parents of older

   children.

2) Parents of children who are in the general education setting for more than 80% of

   the day will be more supportive of inclusion.

3) Parents of children who have been in their current classroom setting for longer will be more satisfied with their child's placement than those who have been in their setting for a short time.

Chapter 2

Literature Review

The Individuals with Disabilities Education Improvement Act (IDEA) of 2004 reinforces the idea that disabilities are a part of our world and those with said disabilities have the right to be active members in the community (Public Law, 2004). Since the Education for All Handicapped Children Act of 1975 (Education of All Handicapped Children Act, Public Law 94-142), the Department of Education has taken great strides to increase education for those with disabilities. Under Education of All Handicapped Children Act, Public Law 94-142 (1975), renamed the Individuals with Disabilities Education Act (IDEA), every person is eligible for a free and appropriate education. This law continues to state that research has determined the most effective strategy for education of this population is through high expectations, "ensuring their access to the general education curriculum in the regular classroom, to the maximum extent possible…providing appropriate special education and related services, and aids and supports in the regular classroom, to such children, whenever appropriate" (Public Law, 2004).

The ideas proposed in IDEA 2004 support an inclusion classroom setting. This is due to IDEA requiring students to be education in the least restrictive environment (LRE), commonly general education classrooms (Zinkil & Gilbert, 2000). Inclusion practices gained popularity with the U.S. Department of Education's Regular Education Initiative (REI) calling for a mixing of general and special education (Zinkil & Gilbert, 2000). Inclusion classrooms provide services for many learners who are eligible for special education, including those with autism, deaf/blindness, emotional disturbance,

hearing impairments, multiple disabilities, mental retardation, orthopedic impairments, specific learning disabilities, speech and language impairments, traumatic brain injury, and visual impartments (New Jersey Department of Education (DOE), 2012). Although a common practice, inclusion is still highly debated (Ferguson, 2008).

Defining Inclusion

Among the debates of inclusion is its definition. Inclusion has been defined as the mixing of children with and without disabilities in a general education setting (Stoiber, Gettinger, & Goetz, 1998; Henley, Ramsey, & Algozzine, 2002). Yssel, Engelbrecht, Oswald, Eloff, & Swart (2007) and Roach (1995) includes that inclusion intends for all students, no matter ability, to be in the same setting. Others define it as the process of educating students who qualify for special education in a general education environment (Zinkil & Gilbert, 2000; Haas, 1993; Fuchs & Fuchs, 1994a; Schrag & Burnette, 1994; Wilczenski, 1993; York, Doyle, & Kronberg, 1992). Vaughn and Schumm (1995) define responsible inclusion as an education plan that is student-centered and provides services based on the needs of each student in the classroom. Sapon-Shevin (2007) explains, "commitment to inclusive schooling is a promise made to children and their families that despite struggle and challenges, a child will not be excluded from his neighborhood school or community because he is different in some way." Swart et al. (2004) state that both social and educational factors are benefits and sources of growth for all learners in an inclusive setting. Inclusion also strives to include students with many differences including race, family, religion, language, abilities, and disabilities (Sapon-Shevin, 2007). It involves engaging *all* members of the school community (Sapon-Shevin, 2007).

Inclusion can be characterized as full or partial inclusion. Inclusion varies for individual learners and the time that they spend in the general education setting per day. Full inclusion involves a child, no matter the type or severity of disability, attending their neighborhood school and enrolled in the general education classroom setting (Yssel, Engelbrecht, Oswald, Eloff, & Swart, 2007). A student under full inclusion spends his or her whole day in a general education classroom, often with an aid or special education teacher. Partial inclusion is when a student stays in the general education for at least part of the day. The United States Department of Education (2012) breaks inclusion into three categories based on percentage of the day spent outside of the general education classroom. These categories are less than 21%, 21-60%, and more than 60% (U.S. Department of Education, 2012).

The Inclusion Classroom

Inclusion classrooms also vary by teaching styles and strategies used. Inclusion is successful when a strong community works for it (Sapon-Shevin, 2007). It is something that must be discussed among students and made visible through interactions (Sapon-Shevin, 2007). Sapon-Shevin (2007) emphasizes that the inclusion classroom pushes educators to understand that "smart" can come in many variations. Gardner (1983) identified eight intelligences of adults and children that are as follows: linguistic ("word smart"), logical-mathematical ("number/reasoning smart"), spatial ("picture smart"), bodily-kinesthetic ("body smart"), musical ("music smart), interpersonal ("people smart"), intrapersonal "self-smart"), and naturalistic ("nature smart"). Sapon-Shevin (2007) adds that spiritual intelligence is now considered the ninth intelligence. Many inclusive classrooms aim to indulge these variations by teaching in ways that activate the

multiple intelligences (Sapon-Shevin, 2007). Teaching styles emphasizing the multiple intelligences work to focus on strengths and increase areas of weaknesses (Sapon-Shevin, 2007). This is needed when students are on a continuum of cognitive abilities, language skills, learning styles, and behavior patterns (Scott, Vitale, & Masten, 1998).

Sapon-Shevin (2007) discusses differentiated instruction, universal design, peer teaching, and co-teaching as inclusive teaching methods. Differentiated instruction focuses on students' success stemming from their individual growth (Sapon-Shevin, 2007). It includes content, activities, and products that are challenging to learners with varying needs and abilities (Sapon-Shevin, 2007). Each student is challenged but there is flexibility in grouping and how goal is attained (Sapon-Shevin, 2007). However, others might utilize a universal design in which the lesson is designed for everyone (Sapon-Shevin, 2007). Peer teaching or tutoring is something that can be implemented within an inclusive classroom or between grade levels (Sapon-Shevin, 2007). In this teaching method, peers are each other's resources of help and learning (Sapon-Shevin, 2007). While using peer teaching, Sapon-Shevin (2007) suggests alternating the roles of the students so one is not always the learner while another is always the teacher role. Hallahan, Kauffman, and Pullen (2012) caution that while using this method it is important that students are trained and supervised by the teacher while helping one another.

Co-teaching involves two teachers working together as a team (Sapon-Shevin, 2007). They must spend sufficient time together planning teaching styles and establishing a relationship with one another (Sapon-Shevin, 2007). Communication must be effective while collaborating for effective inclusion (Sapon-Shevin, 2007). Sapon-Shevin (2007)

highlights three models of collaborative teaching: both teachers work with the whole group, each teachers works with a small group (usually alternating between groups), and one acts as the lead teacher while the other offers needed support. Ferguson (2008) explains that general and special educators working together can increase knowledge, skills, learning, and support. Teachers and paraprofessionals are required to work together to find how each student can have an active role in the classroom (Sapon-Shevin, 2007). The roles of an active special education teacher in an inclusive classroom occur through instruction, assessment, communication, leadership, and record keeping (Fisher, Frey, & Thousand, 2003).

Vaughn, Hughes, Schumm, and Klinger (1998) identify the consultation/collaboration and co-teaching models as effective instructional techniques for inclusion classrooms. Collaborative consultation is a method in which the general education teacher receives advice and assistance from some sort of expert in the general education field (Hallahan, Kauffman, & Pullen, 2012). The expert is usually a special education teacher or a psychologist who can provide guidance for instruction (Hallahan, Kauffman, & Pullen, 2012). In this case, a special education teacher is not in the inclusion classroom, but just acts as a source of advice and support. Sapon-Shevin (2007) states that the most successful inclusive classroom should be one in which the students are not concerned about which teacher is certified in what and consider both the general and special education teachers equal in the classroom. Soodak et al. (2002) suggests that the most successful inclusive classroom is one where all stakeholders, including both general and special education teachers, are responsible for the classroom practices.

Regardless of teaching style used in an inclusive setting, various adaptations are made in the classroom (Scott, Vitale, & Masten, 1998). Friend and Bursuck (1996) state that instructional adaptations are especially important in inclusion (Scott, Vitale, & Masten, 1998). Adaptations are characterized into two categories: typical/routine or substantial/specialized (Scott, Vitale, & Masten, 1998). Typical/routine adaptations are either minor adaptations or ones that are generalized to the whole class, while substantial/specialized adaptations are individualized adaptions (Scott, Vitale, & Masten, 1998). These adaptations come in the form of modifying instruction, modifying assignments, teaching learning skills, altering instructional materials, altering curriculum, varying instructional grouping, enhancing behavior, and facilitation progress monitoring (Scott, Vitale, & Masten, 1998).

Prevalence of Special Education

The United States Department of Education (DOE), National Center for Education Statistics (2012) reported that approximately 95% of 6- to 21- year old special education students are provided education in a general education classroom. These students were included in general education classrooms to varying degrees. Those in the regular classroom were broken down into three groups, depending on time spent outside of the general education classroom setting. These three groups are as follows: less than 21%, 21-60%, and more than 60% (U.S. Department of Education, National Center for Education Statistics, 2012). Nationally, 59.4% of special education students spend less than 21% of their school day outside of the general education classroom (U.S. Department of Education, National Center for Education Statistics, 2012). About 20.7% and 14.6% spend 21-60% and more than 60%, respectively, outside of the classroom

(U.S. Department of Education, National Center for Education Statistics, 2012). This

totals to 94.7% of special education students being included in the general education

classroom to some extent (U.S. Department of Education, National Center for Education

Statistics, 2012). The remaining 5.3% are educated in separate schools for students with

disabilities, residential facilities, regular private schools, homebound, hospital placement,

and correctional facilities (U.S. Department of Education, National Center for Education

Statistics, 2012). The thirteen eligibility categories are represented in varying amounts in

each placement type (U.S. Department of Education, National Center for Education

Statistics, 2012).

According to the New Jersey DOE (2011), New Jersey schools serve a total of

216,940 students who qualify for special education, accounting for 15.58% of the student

population of their schools. The New Jersey DOE (2011) reports that 92.1% of special

education students in New Jersey are included in the general education classroom to

some extent. The extent to which special education students in New Jersey are included

in general education classes is broken down into three categories: more than 80%,

between 40 and 80%, and less than 40% (NJ Department of Education, Office of Special

Education Programs, 2011). Statistics for these settings are 48%, 27.5%, and 16.6%,

respectively (NJ Department of Education, Office of Special Education Programs, 2011).

Public separate and private day schools account for 7.2% of special education students

(NJ Department of Education, Office of Special Education Programs, 2011). Public and

private residential schools educate 0.2% of this population (NJ Department of Education,

Office of Special Education Programs, 2011). In-home facilities and correctional

facilities account for 0.3% and 0.2%, respectively (NJ Department of Education, Office of Special Education Programs, 2011).

Compared to the statistics from the U.S. DOE, New Jersey has a slightly lower amount of special education students included in general education settings than the national average. The U.S. DOE characterizes inclusion according to time spent outside of the general education setting (U.S. Department of Education, National Center for Education Statistics, 2012). These categories are less than 21%, 21-60%, and more than 60% (U.S. Department of Education, National Center for Education Statistics, 2012The New Jersey DOE characterizes inclusion by time spent in the general education setting (NJ Department of Education, Office of Special Education Programs, 2011). These are defined as more than 80%, between 40 and 80%, and less than 40% (NJ Department of Education, Office of Special Education Programs, 2011). Although slightly different, the categories are comparable. The U.S. DOE (2012) reports higher percentages of special education students spending the great majority of their day in the general education classroom than New Jersey statistics from the NJ DOE (2011).

Reasons for Parental Perspectives in Special Education

The amendments to IDEA (Law, 2004 and Law, 105-17) emphasize the importance of family involvement in the education of those with disabilities. Many researchers have noted the importance of parental perspectives and involvement (Stoiber, Gettinger, & Goetz, 1998; Vaughn & Schumm, 1995; Palmer, Fuller, Arora, & Nelson, 2001). Buysse, Skinner, & Grant (2001) found that supportive and active parents were positively correlated with quality of the inclusive program. Parental advocacy is vital in the development of education, helping to increase quality in the past and for the future

(Yssel et al., 2007). Soodak (2004) notes that the ideals of inclusion came in part from the work of parent advocacy. Due to this rich history of parental involvement in the special education field, it is important to account for the perspectives of parents as stakeholders in their child's education (Schumm & Vaughn, 1998). The NJ DOE states that members of the school district and parents are team members in deciding the best educational path for the student (Cerf, 2012). The NJ Parental Rights in Special Education (Cerf, 2012) encourages parental input in IEP development. If necessary, this can include help from a local agency that is responsible for providing services to the child at the present or in the future (Cerf, 2012).

Parental responses are seen as helping school districts and many support the initiative to have required parent surveys completed annually (Giangreco, Edelman, Clonginger, & Dennis, 1993; Ryndak, Downing, Jacquline, & Morrison, 1995). Frequent measurements of inclusion practices are considered a vital part of the Autism Spectrum Disorder Inclusion Collaboration Model (Simpson, de Boer-Ott, & Smith-Myles, 2003). Salend and Garrick Duhaney (2002) suggest parents as an efficient tool for evaluating both the school district and their child's education plan. This will help to strengthen the home-school collaboration. Many researchers have found this home-school collaboration vital to the success of an inclusive setting (Yssel, Engelbrecht, Oswald, Eloff, & Swart, 2007; Christenson & Sheridan, 2001; Epstein, 2001; Henley, Ramsey, and Algozzine, 2006).

Two basic types of parental perspective research on inclusion have been completed: parents of children without disabilities and parents of children with disabilities. Many compare the two populations and their thoughts on inclusion (Stoiber,

Gettinger, and Goetz, 1998; Duhaney & Salend, 2000; Rafferty, Boettcher, & Griffin, 2001). Other research has been done to highlight the differences and similarities of the thoughts parents and teachers have on inclusion (Swart, Engelbrecht, Eloff, Pettipher, & Oswald, 2004; Buysse, Skinner, & Grant, 2001; Chmilliar, 2009; Daniel & King, 1997). Kasari, Freeman, Bauminger, & Alkin (1999) focus on parental feedback on their child's current education placement in comparison with their child's ideal educational placement. Leyser & Kirk (2004) compare inclusion from the parent's perspective within a school district whereas Swart et al. (2004) and Yssel et al. (2007) compare inclusion in America with its practice in South Africa. A study of parents choosing between an inclusive versus special education setting has also been completed (Palmer, Fuller, Arora, & Nelson, 2001). Leyser & Kirk (2004) point out that due to differences in educational settings within the United States, inclusion practices also highly differ. Their study looks at inclusion involving different degrees and types of disabilities in inclusive settings whereas other focus on a particular disability (Vaughn & Schumm, 1995; Chmiliar, 2009; Kasari, Freeman, Bauminger, & Alkin, 1999). Although many topics have been researched, a study exclusively surveying parents who are involved in support and/or advocate groups has not been researched.

Role of Parent Support Groups in Special Education

A lot of the movements in the field of special education are accredited to the work of parents (Hallahan, Kauffman, & Pullen, 2012). Organizations can provide a multitude of information and assistance to parents trying to navigate the field of special education for their child (Cutler & Pratt, 2010). Parent organizations, citizen organizations, and parent information centers work on national, state, and local levels to offer

communication and trainings about IDEA and parental and student education rights (Cutler & Pratt, 2010). Hallahan, Kauffman, and Pullen (2012) identify the three purposes of parent organizations as follows: to offer parental support groups to converse and help with each other's problems, information about various support and services for children, and guidelines for obtaining such services.

Much of what parent organizations do is provide social support (Hallahan, Kauffman, & Pullen, 2012). Parental support groups are meetings in which parents share information about their experiences with special educational services, IEPs, IDEA, and supportive programs (Hallahan, Kauffman, & Pullen, 2012). Depending on the group, group meetings are either highly structured or very unstructured (Hallahan, Kauffman, & Pullen, 2012). Generally, members of the parental support groups have children with disabilities that are similar or the same (Hallahan, Kauffman, & Pullen, 2012). Cutler and Pratt (2007) encourage getting in touch with parental information centers to gain information and knowledge of services for your child's particular disability. Although they can be successful, Hallahan, Kauffman, and Pratt (2012) state that parental support groups can lead to an increase in stress from hearing about the experiences of other parents who have had similar experiences.

Review of Previous Methodology

Along with different topics, varied research methodologies have been used to evaluate parents' perspectives of inclusive education. Among the most commonly used measurement is surveys and questionnaires (Leyser & Kirk, 2004; Bennett, Deluca, and Bruns, 1997; Stolber, Gettinger, & Goetz, 1998; Palmer, Fuller, Arora, & Nelson, 2001;

Palmer, Borthwick, Duffy, Widaman, & Best, 1998; Kasari, Freeman, Bauminger, & Alkin, 1999; Elkins, van Kraayenoord & Jobling, 2003; Daniel & King, 1997).

The "Parent Opinion About Inclusion/Mainstreaming" questionnaire was used by Leyser and Kirk (2004). This scale was adapted from the "Opinions Relative to Mainstreaming Scale" (ORM) by Antonak and Larivee (1995) and Larrivee and Cook (1979). This test uses a 5-point likert system to measure parental perspectives on the ideals of inclusion, child's current educational setting, satisfaction with services received, and the general education teacher (Leyser & Kirk, 2004). Leyser and Kirk (2004) report a high reliability, having a Cornbach alpha score of .83. Their survey included a free response section for parental comments (Leyser & Kirk, 2004). A strength of this study is that it includes both general and specific questions on inclusion to gather information about broad ideals of inclusion as well as information from specific experiences. Other strengths are that the questionnaire covered a larger amount of school districts while still maintaining a relatively high return rate (43.7%). A limitation of the study is that the survey did not ask for the child's specific disability, but rather their classification according to special education (i.e., listed as "other health impairment" instead of specifying ADHD).

The "Parent Survey for Inclusion" (PSI) is another method of measuring inclusion (Bennett, Deluca, & Bruns, 1997). However, it only included four items that measured general attitudes towards inclusion, which is much less than comparable surveys. Bennett, Deluca, and Bruns (1997) reported a Cornbach Alpha of .68 for the general attitude scale of the PSI. Free-response questions focus on parental beliefs on things essential for inclusion, along for the commitment and involvement of inclusion.

Approximately 10% of the respondents were asked to interview as well (Bennett, Deluca, & Bruns, 1997).

Stobler, Gettinger, and Goetz (1998) used the "My Thinking About Inclusion" (MTAI) scale. This is a 28-item scale measuring core perspectives, expected outcomes, and classroom practices. MTAI was created in collaboration with previous research and the works of Stobler and Gettinger (Stobler, Gettinger, & Goetz, 1998). The MTAI reports a Cornbach alpha of .9051 and good internal reliability (Stobler, Gettinger, & Goetz, 1998). Parents of children with and without disabilities were participants in this study (Stobler, Gettinger, & Goetz, 1998). However, all children were enrolled in some sort of inclusive setting (Stobler, Gettinger, & Goetz, 1998). The population used for the study involved parents from all over the state as well as from rural, urban, and suburban neighborhoods. Surveys were used in a pilot study to increase face validity, appropriateness of wording, and clarity. The surveys had a return rate of 85% (Stobler, Gettinger, & Goetz, 1998). Like Leyser and Kirk (2004), classifications of diagnoses, rather than specific disabilities, were collected in the demographic sections of the surveys. This can be seen as a limitation for data collection

Kasari, Freeman, Bauminger, and Alkin (1999) measured current educational placement and ideal educational program through mailed questionnaires to members of parent groups for parents of children with autism and Down syndrome. They used a 5-point Likert scale (1=very dissatisfied, 5=very satisfied) to measure current educational placement, 3-option multiple choice questions to list the personal benefits their child receives from current educational setting, and a 6-point scale indicating most restrictive to least restrictive for their child's ideal placement (Kasari et al., 1999). The previous

studies also collected demographic information including the child's age and disability. Demographic questions only related to Autism and Down syndrome.

The "Survey of Parents' Attitudes and Opinions About their Children with Special Needs and their Support" was made through adaptions of the "Survey of Teacher Attitudes and Opinions about Students with Special Needs and the Types of Support for Integration/Inclusion" (from the Korea Institute for Special Education) to measure parent attitudes about inclusion and the education of their child in a general education classroom (Elkins, van Kraayenoord & Jobling, 2003). Participants were recruited from school districts and parent organizations and surveys were distributed through the mail (Elkins, van Kraayenoord, & Jobling, 2003). Demographic information for the parents and children was included in the survey (Elkins, van Kraayenoord, & Jobling, 2003). This survey includes questions to help gain information about parents' feelings regarding their child's disabilities. Answers to these questions might help to gain insight into the parent's understanding of their child's educational and social needs, and why they might support or reject inclusion. Since the study was completed in Australia, its results are not generalizable to schools in the United States.

Daniel and King (1997) surveyed both parents and students using their own 22-item questionnaire, the internalizing and externalizing sections of the Child Behavior Checklist (CBCL) by Achenbach (1991a), Stanford Achievement Test (SAT), and subscales of the Self-Esteem Index (SEI) by Brown and Alexander (1991). The 22-item questionnaire and the CBCL were completed by the parents, whereas the SAT and SEI were completed by the student themselves. Their aim was to measure the effects of inclusion on academic achievement, behavior, self-esteem, and parental attitudes (Daniel

& King, 1997). The questionnaire used by Daniel and King (1997) included items measuring the parents' knowledge of their child's current educational setting, other educational settings, available resources, involvement in their child's education, satisfaction, and concerns. It measures the child's current placement (i.e. inclusion versus segregated special education class) and the factors affected because of this placement. The population of this study was parents of children in the third, fourth, and fifth grades. This causes generalizability to decrease due to lack of representativeness of the overall inclusive population.

Unstructured and semi-structured interviews are common practices as well (Swart, Engelbrecht, Eloff, Pettipher, & Oswald, 2004; Yssel, Engelbrecht, Oswald, Eloff, & Swart, 2007). Overall, these studies expose a multitude of information. Participants focus on topics that are particular to them and their children. Parental responses can be hard to analyze and to compare amongst one another. Reliability might decrease when unstructured or semi-structured interviews are used. In almost all studies, demographic information was also asked and included in statistics. Swart, Engelbrecht, Eloff, Pettipher, and Oswald (2004) spoke with parents in South Africa about special education and the need for a quality inclusive setting for their children. Due to differences in the education system of South Africa and the United States, results from this study are not very applicable to those in the United States. Yssel, Engelbrecht, Oswald, Eloff, and Swart (2007) interviewed parents in the Midwest U.S. and South Africa to find common and different trends. Participants from the U.S. who were part of this study were identified and recruited by special education directors (Yssel et al., 2007). Parents in South Africa were contacted via school or support groups (Yssel et al., 2007).

These interviews included data collection for demographic as well as specific concerns

for each parent. Parents were asked questions about their rights in special education

processes, advocacy, social aspects, placement decisions, resilience, general education

teachers, acceptance from general education teachers, and having a child with a disability

(Yssel et al., 2007).

Salend and Duhaney (2002) used both a survey and an interview. Survey

questions addressed parents' views on inclusion while the semi-structured method gave

more detailed information about the parents concerns (Salend & Duhaney, 2002). Survey

questions focus on positive and negative features of their child's inclusive setting, social

development, school district responses, and educational growth. This survey only applies

to parents whose children are currently placed in inclusive classrooms, not to all who

qualify for special education. Although they give a wealth of information, results from

semi-structured interviews can be hard to compare among populations.

Review of Previous Findings

Past studies have found mixed results of both positive and negative factors

stemming from inclusion classroom practices. The majority of parents (85%) support the

general concept of inclusion and the legal standpoint of inclusion (Leyser & Kirk, 2004).

Bennett, Deluca, and Bruns (1997) found that most parents feel strongly about the

benefits of inclusion. Leyser and Kirk (2004) found that the majority of their parents

viewed inclusions as strengthening children's social and personal domains by being

involved with peers and prepare for life in the real-world. Approximately 69% reported

that their children's sense of self-concept increased (Leyser & Kirk, 2004). Bennett,

Deluca, and Bruns (1997) found that most parents had generally positive views of

inclusion. Benefits of inclusion found by Bennett, Deluca, and Bruns (1997) were: increases in academic skills, developmental skills, appropriate behavioral role models, and peer friendships. Most reported an increase in their child's social skills (Bennett, Deluca, & Bruns, 1997; Palmer, Fuller, Arora, & Nelson, 2001). Other responses included their child's ability to attend and be involved in the neighborhood school and become a member of the larger society as benefits of inclusion (Palmer, Fuller, Arora, & Nelson, 2001). Swart et al. (2004) found that parents pushed for inclusion to help raise their child as normally as possible and to learn about the world with their peers. It was also viewed as a way to change society's beliefs about those with disabilities (Swart et al., 2004).

Leyser and Kirk (2004) found that nearly 40% of the parents believe that inclusion is better for their child's academic progress. Approximately 60% of parents reported that inclusion was done better when a special education teacher was involved in instruction (Leyser & Kirk, 2004). Buysse, Skinner, and Grant (2001) found that parents of children with special needs identified improvement of development and learning and child well-being as benefits of inclusion. Stoiber, Gettinger, and Goetz (1998) found that an approach to inclusion that was most preferred was one that provided "direct 'hands-on' experiences." Inclusion was found as a way to create more realistic expectations for parents of children with special needs regarding their child's development and ability to learn in comparison to children of the same age without disabilities (Buysse, Skinner, & Grant, 2001). Palmer et al. (2001) found that parents are supportive of inclusion because it allows for children with disabilities to improve academic and functional skills due to higher expectations in inclusive classrooms.

Bennett, Deluca, and Bruns (1997) found that a portion of parents surveyed had mixed ideas about inclusion. The areas of concerns for most parents were the fear of hurting their child's emotional development and their child being social isolated (Leyser & Kirk, 2004). Many parents expressed the fear that their child's individual services would be or were decreased in an inclusion classroom (Leyser & Kirk, 2004; Palmer, Fuller, Arora, & Nelson, 2001). Buysse, Skinner, and Grant (2001) found that both parents and practitioners expressed concerns about individual needs being met for children with disabilities. This study found that limited planning time was the main reason that these individual needs may not be met (Buysse, Skinner, & Grant, 2001). Parents identified the great importance of adaptations and support being made in the classroom to help the student's needs (Swart et al., 2004). Parental free-response showed concerns about the actions of support staff and therapists, classroom teacher, and administrators (Bennett, Deluca, & Bruns, 1997). Palmer, Fuller, Arora, and Nelson (2001) also found that parents were concerned about lack of special education training of the general education teacher. This is supported by parents' conveyed fears of general education teacher's instructional skills and treatment by general education teacher (Leyser & Kirk, 2004). Parents of children with severe or multiple disabilities questioned the training of both general education teachers and paraprofessionals (Palmer et al., 2001). Some parents feel that the general education teachers are not as prepared and do not understand what it is like to teach a child with special needs (Yssel et al., 2007). One parent explained that his child's teacher did not fully read the IEP and, therefore, did not know how to deal with the child (Yssel et al., 2007). Other parents have praised general education teachers for their hard work (Yssel et al., 2007). Kasari et al. (1999) found that

most parents reported that inclusion was an ideal placement for their child, but only if additional services were available to their children.

Leyser and Kirk (2004) found that parents voiced concerns about how they would be treated by other parents. Some parents who were surveyed said that they were neither supported nor rejected by parents of children without disabilities (Swart et al., 2004). In instances where other parents and students were familiar with the child, they were more accepting (Swart et al., 2004). However, the lack of a personal relationship with the child with a disability was correlated with a lower level of acceptance (Swart et al., 2004). These parents reported the following when interacting with parents of children without disabilities: staring, hearing comments about them or their child, and avoidance of contact (Swart et al., 2004). Salend (2004) suggests that teachers can help to decrease these attitudes towards individual differences by sharing information about inclusion and practicing communication and acceptance. Parents in a study by Palmer et al. (2001) reported that they also feared how both teachers and students in the general education classrooms would treat their children.

Yssel et al., (2007) found that many parents feared the social acceptance of their child by other students, parents, and teachers. These parents reported that they wanted their child to fit in and be a part of society for the benefit of all people (Yssel et al., 2007). Parents also reported mixed thoughts about their children being and feeling left out (Yssel et al., 2007). Palmer et al. (2001) found support for inclusion in three ways: chance for improvement in the child's social skills, benefits of attending a neighborhood school, and a classroom that is more representative of society. Some parents showed concern that inclusion classrooms would not benefit the child with a disability but,

instead, overwhelm them (Palmer et al., 2001). In some cases, parents thought that being in a special education classroom and being surrounded by other children with disabilities can help a child, and is something that they would not receive in an inclusive setting (Palmer et al., 2001).

A study on children with severe disabilities (Palmer, Fuller, Arora, & Nelson, 2001) found that these parents reported that the disability hinders effectiveness of inclusion by distracting, impairing the learning of others, medical needs, sensory impairments, lack of self-help skills, lack of language, conditions such as seizures or cerebral palsy, and multiply disabling conditions. Parents of children with severe disabilities were less supportive of inclusion than those of children with less severe (Leyser & Kirk, 2004). Palmer at al. (2001) found that parents of children with severe disabilities thought that inclusion would be too much of a burden for both students and teachers in a general education setting. Parents with younger children (0-12 years old) were more supportive than parents with older children (13-18 years old) (Leyser & Kirk, 2004). Leyser and Kirk (2004) found that the longer a child was in special education, the less likely the parent was to support inclusion. However, Stoiber, Gettinger, and Goetz (1998) found that parents who had more experience with inclusion were more likely to support it. Parents who did not know if their child was in an inclusive setting to some degree or in a special education classroom, were more likely to support inclusion than those who knew their child's placement (Leyser & Kirk, 2004). Those parents who knew their child's educational placement were less likely to support the ability of a general education teacher than those who did not know their child's placement (Leyser & Kirk, 2004). Parents of children who are not included or mainstreamed have higher rates and

support for teacher's abilities and child's rights than those whose children are included/mainstreamed (Leyser & Kirk, 2004). Parents of children with a disability held more positive beliefs about inclusion than parents with children who do not have a disability (Stoiber, Gettinger & Goetz, 1998).

Education was found to be a factor in perspective on inclusion (Leyser & Kirk, 2004; Stoiber, Gettinger, & Goetz, 1998). Fathers who had a college education were less likely to support the ability of a general education teacher's ability and support than those with a high school education (Leyser & Kirk, 2004). Stoiber et al. (1998) found that parents who had a college education were more positive about inclusion than those who had less education. Lower income was also associated with a more positive view on inclusion (Stoiber, Gettinger, & Goetz, 1998). Practitioners tend to hold more positive beliefs of inclusion than parents (Stoiber, Gettinger, & Goetz, 1998).

Chmiliar (2009) found that parents of children with Learning Disabilities had a lot of difficulty getting support for their child. Negative attitudes towards personnel of the schools and early difficulties in their child's education have resulted in some negative perspectives of inclusion (Chmiliar, 2009). However, these parents stated that although their current inclusion setting was very good, it is also difficult due to time-consuming homework and school issues (Chmiliar, 2009). Swart et al. (2004) also found that parents are required to have a lot of dedication and commitment to help their child succeed in an inclusive setting. Chmiliar (2009) attributes this satisfaction with inclusive placement to increased self-esteem, social relationships and interactions, and participation in group activities. Parents in this study reported that they put a great deal of effort into helping their children with homework (Chmiliar, 2009). Similarly, Buysse, Skinner, and Grant

(2001) found that parental participation and support can positively or negatively affect

the program quality of an inclusive setting. Additionally, a large part of inclusion is the

parents and the school having a supportive relationship (Swart et al., 2004; Yssel et al.,

2007). Communication between the home and the school can help to increase the

understanding of the child for both parties (Zinkil & Gilbert, 2000). This shows that

parental involvement in their child's inclusive education is vital. Zinkil and Gilbert

(2000) emphasize that parental involvement and monitoring children's education, social,

and emotional progresses are vital when considering a child's placement.

The majority of parents are active in order to get educational services that they

want for their child (Bennett, Deluca, & Bruns, 1997). Swart et al. (2004) reports that

parents acted as advocates for their children. Parents have taken an active role in

advocacy for their children and educating the schools and community (Yssel et al., 2007).

Many have offered assistance and continue to play an active role in the education of their

child (Yssel et al., 2007). Buysse, Skinner, and Grant (2001) Results support the idea that

inclusion is a team effort (Bennett, Deluca, & Bruns, 1997). Parents should play a role in

inclusion before, after, and during the implementation (Daniel & King, 1997). Buysse,

Skinner, and Grant (2001) found that inclusion works best when qualified personnel, a

well-designed classroom environment, and appropriate practices for the needs of each

individual are in place to increase education quality for all students with and without

disabilities. Swart et al. (2004) summarized that many parents have a difficult time when

faced with the possibility of inclusion for their child. Anxiety and apprehension arose

from concerns about their child, teachers, and other children (Swart et al., 2004). Daniel

and King (1997) found that more concern was reported by parents whose children are in

inclusive programs than by parents of children who are in noninclusive programs.

Findings suggest that all parents have not accepted inclusion (Palmer et al., 2001).

However, inclusion has given every student the opportunity to have more placement

options based on their personal needs (Palmer et al., 2001).

Chapter 3

Method

Participants

The population surveyed were parents of children receiving special educational services in the state of New Jersey. All participants must be at least 18 years of age. Per state law, their children were 3-21 years old. All parents surveyed are members of parental support group for parents of children with special needs. Because parents were not required to name the support group that they belong to on the survey, it is unknown the percentages of responses for each support group.

The survey was completed by 23 parents. Of the 23 participants, about 87% were females. Information on participants' highest level of education was collected. Of the 25 participants, about 39% have a masters or doctorate degree, 26% have a bachelors degree, 13% have an associates degree, and the remaining 22% graduated from high school. Table 1 includes the demographic information for the children. About 22% of the children were females and 78% were males. About 39% (n=9) were included in the general education setting at least 80% of the day, 17% (n=4) were in the general education setting between 40 and 80% of the day, and 9% (n=2) were included in the general education setting less than 40% of the day. Overall. 65% of the children were included in the general education classroom to some extent. The remaining children were in a separate special education classroom (26%), a private day school (4%), or home instruction (4%).

Table 1. *Demographic information and Special Education descriptions of the children whose parents participated in the survey*

	Gen-der	Age	Classification(s)	Classroom Setting	Years in Setting
1	M	10	Autism (high-functioning), Other Health Impairments (ADHD)	Gen. Ed. > 80% of day	6
2	M	10	Autism	Gen. Ed. > 80% of day	4
3	M	8	Autism	Separate Special Ed.	5
4	M	14	Hearing Impairments, Other Health Impairments, Orthopedic Impairments	Gen. Ed. > 80% of day	1
5	M	10	Autism (Aspergers)	Gen. Ed. > 80% of day	5
6	M	14	Specific Learning Disabilities (CAPD), Other Health Impairments (ADHD)	Gen. Ed. Between 40 and 80%	.33
7	M	15	Specific Language Disabilities (CAPD), Other Health Impairments (ADHD)	Gen. Ed. > 80% of day	1
8	F	10	Intellectual Disabilities	Gen. Ed. < 40% of day	

9	F	19	Specific Learning Disabilities (Dyslexia)	Gen. Ed. > 80% of day	14
10	M	6	Autism	Separate Special Ed.	2
11	F	20	Multiple Disabilities (health-related and autism)	Home Instruction	.58
12	M	17	Autism	Gen. Ed. Between 40 and 80%	2
13	M	4	Multiple Disabilities	Gen. Ed. > 80% of day	.58
14	M	7	Autism	Gen. Ed. Between 40 and 80%	4
15	M	12	Autism, Speech and Language Impairment	Gen. Ed. > 80% of day	.67
16	M	12	Autism, Intellectual Disabilities, Speech and Language Impairment	Gen. Ed. < 40% of day	
17	M	12	Autism (Aspergers), Other Health Impairments (ADHD), Emotional Disorders (Mood Disorder)	Separate Special Ed.	8

18	M	11	Autism	Gen. Ed. > 80% of day	2
19	F	11	Multiple Disabilities	Separate Special Ed.	8
20	M	10	Autism (Aspergers)	Private Day School	1
21	M	7	Autism	Separate Special Ed.	4
22	F	13	Other Health Impairments (ADHD), Specific Learning Disabilities (APD and Dyslexia)	Gen. Ed. Between 40 and 80%	7
23	M	8	Autism, Speech and Language Impairment	Separate Special Ed.	6

Frequency of the children's special education classification was calculated based on

parental responses. Many parents responded with two of more classifications. In that

case, each response was characterized in its own classification. The distribution is as

follows: Autism – 14; Emotional Disturbance – 1; Hearing Impairments – 1; Intellectual

Disabilities – 2; Multiple Disabilities – 3; Other Health Impairments – 6; Orthopedic

Impairments – 1; Specific Learning Disabilities – 4; and Speech Language Impairment –

3.

Materials

This study used a questionnaire to gather data. It began with a paragraph describing the consent procedure. This included information regarding the purpose of the study, voluntary participation, confidentiality, and contact information for the primary investigator. The purpose of the survey was to collect data on parental perspectives of inclusion for those who are in parent support groups. The first part of the questionnaire collected background and demographic information for the parent and child. Information gathered about parents includes the gender and highest level of education. The following data was collected about the child qualifying for special education: child's gender, child's age, child's grade, child's disability (according to the New Jersey Department of Education), age referred to special education, current classroom setting (extent of inclusion), and number of years spent in current classroom setting.

The questionnaire used in this study is the "Parent Opinion About Inclusion/Mainstreaming" questionnaire by Leyser and Kirk (2004). It consists of items originally adapted from "Opinions Relative to Mainstreaming Scale" (ORM) by Antonak and Larrivee (1995) and Larivee and Cook (1979). ORM was shown to have a Cronbach alpha of .83 (Leyser & Kirk, 2004). The "Parent Opinion About Inclusion/Mainstreaming" questionnaire includes 18 items regarding opinions toward inclusion. Eight of which are statements that support inclusion while the remaining 10 display negative views on inclusion. Each item is rated on a 5-point likert scale (1 = strongly agree; 5 = strongly disagree). The 10 items that have negative views on inclusion are reverse-coded. The remaining question measures satisfaction with child's current placement. This uses the same 5-point likert rating scale.

Design

The independent variables of this study can include all of the responses to the demographic section of this questionnaire. This includes: parent's gender, parent's highest level of education, child's gender, child's age, child's grade, child's disability (according to the New Jersey Department of Education), age referred to special education, current classroom setting (extent of inclusion), and number of years spent in current classroom setting. The dependent variable will be the parent's perspectives on inclusion. This is to be measured by ratings in the "Parent Opinion About Mainstreaming/Inclusion" questionnaire.

Procedure

Participation criteria is that the person filling out the survey must be a parent of a child with special needs who require special education in the state of New Jersey and belong to a parent support group. Participant must be at least 18 years old. Agencies included have agreed to e-mail the link to survey to their members. Consent is given by agreeing to the informed consent at the beginning of the survey and proceeding with the survey. The informed consent can be found in (Appendix 1). Participation is voluntary. No compensation will be given for participation.

Chapter 4

Results

Questions regarding parents' evaluations on inclusion were administered to parents in parent support groups in New Jersey. The three hypotheses were as follows:

1) Parents of younger children will support inclusion more than parents of older children.

2) Parents of children who are in the general education setting for more than 80% of the day will be more supportive of inclusion.

3) Parents of children who have been in their current classroom setting for longer will be more satisfied with their child's placement than those who have been in their setting for a short time.

Data was analyzed by analyzing means for parental responses. ANOVA's and t-tests were also run to find trends in possible influences for parental perspectives on inclusion.

Overall, the average response for the 18 questions regarding parental perspectives on inclusion was 3.66 with a standard deviation of 1.22. Means for each question regarding perspectives on inclusion can be found in Table 2. Higher scores represent a more positive perspective on inclusion, while lower scores represent a lower level of support. Items that included children with special needs have the opportunity and right to the education and privileges that other students (Items 15 and 17) have were highly supported. They had a mean of 4.52 (SD=0.56) and 4.57 (SD=0.66), respectively.

Analyses of means showed that most parents felt that inclusion can benefit their child in several ways. Item 1 measures belief about inclusion preparing children with disabilities for the real world and had a mean of 3.67 (SD=1.03). Children feeling better

about themselves (item 2) were a perceived benefit of inclusion (Mean=3.33, SD=0.99).

The majority of parents agreed that inclusion provides their child with a better chance of

participating in a various activities (Item 3, Mean=4.12, SD=0.96). Item 8 ("I am more

satisfied with the profess of my child in special education classes than in regular

education classes.) had a mean of 3.11 with a standard deviation of 1.52.

Most parents agreed that children with disabilities were less likely to receive

special help and individualized instruction in inclusive classrooms (Item 6, Mean=3.68,

SD=1.12). The same was true for the belief of receiving special services (Item 7,

Mean=2.89, SD=1.24). The majority of parents did not think that general education

teachers are able to adapt regular classroom programs to accommodate those who are

included from special education (Mean=2.56, SD=1.34). Similarly, most parents agreed

that teachers do not know how to integrate students with disabilities (Item 10,

Mean=4.25, SD=1.08).

Parents also reported that that inclusion is beneficial to students without

disabilities. Item 4 ("Inclusion is more likely to prepare classmates without disabilities

for the real world.") had a mean of 3.89 with a standard deviation of 1.18. Item 9

("Teachers are able to adapt regular classroom programs to accommodate students who

are mainstreamed or included.") revealed that many parents are concerned about the

general education's teacher ability to adapt to a special education student. Item 19 that

measured parental satisfaction with their child's placement had a mean of 2.95 with a

standard deviation of 1.50.

Table 2. *Mean of responses to Attitude Toward Inclusion/Mainstreaming Questionnaire*

	Question	**M**	**D**
1	Inclusion is more likely to prepare children with disabilities for the real world.	3.67	1.03
2	Inclusion is more likely to make children with disabilities feel better about themselves.	3.33	0.99
3	Inclusion provides children with disabilities a chance to participate in a variety of activities (i.e., creative, dramatic).	4.12	0.96
4	Inclusion is more likely to prepare classmates without disabilities for the real world.	3.89	1.18
5	In inclusion, children without disabilities are more likely to learn about differences.	4.16	1.04
6	In inclusion, children with disabilities are less likely to receive special help and individualized instruction.	3.68	1.12
7	In inclusion, children with disabilities are less likely to receive enough special services such as physical and speech therapy.	2.89	1.24
8	I am more satisfied with the progress of my child in special education classes than in regular education classes.	3.11	1.52
9	Teachers are able to adapt regular classroom programs to accommodate students who are mainstreamed or included.	2.56	1.34
10	Teachers do not understand how they are to integrate students with disabilities.	4.25	075
11	Special needs students will probably develop academic skills more rapidly in special classrooms than in regular classrooms.	3.14	1.25
12	Special education teaching is better done by special education teachers than by regular teachers.	4.10	0.85
13	Mainstreaming and inclusion are likely to hurt the emotional development of the special needs child.	2.52	1.23
14	The special needs child will be socially isolated by regular classroom students.	3.05	1.41
15	Special needs students should be given every opportunity to function in the regular classroom setting where possible.	4.52	0.59
16	Regular classroom teachers treat parents of special needs children differently than they treat other parents.	3.89	1.02
17	I feel my child with a disability should have the same privileges and advantages as my other children have in school.	4.57	0.66
18	I feel parents of children without disabilities resent children with disabilities being in their child's classroom.	3.95	1.06
19	I am satisfied with my child's current placement.	2.95	1.50

Means for each participant were calculated to find overall patterns. These are displayed in Figure 1. Overall, most were supportive of inclusion. Only two participants had scores lower than 3. The range was from 2.5 to 4.5 with a mean of 3.66.
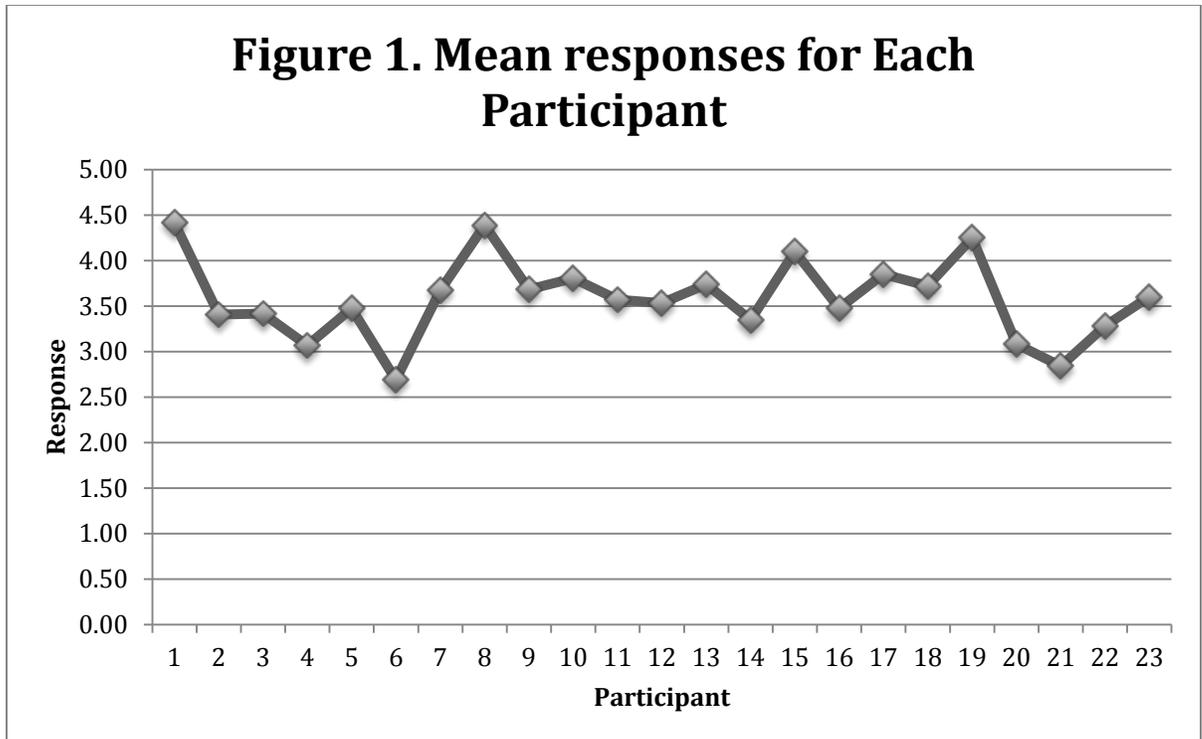

Figure 1. Mean Responses for Each Participant

Chapter 5

Discussion

Parents seemed to generally favor inclusion based on the mean response of 3.66. The data shows that most parents did have some concerns about inclusion, although they generally supported it. Results were consistent with previous research. Benefits included social skills for both students with and without disabilities, academic skills, and equal opportunities. Perceived problems with inclusion included experience of general education teacher, loss of special education services, individualized instruction, perceptions of other parents/students, and their child being left out.

The item that measured parent's satisfaction with their child's current placement was fairly low. The mean of 2.95 signifies that the majority of parents were not happy with their child's placement. This could be attributed to the particular participants used. Dissatisfaction or unhappiness with their child's placement could have urged the parents to join a parent support group. Therefore, explaining why the sample has reported low satisfaction with their child's current educational placement.

Parents were supportive of the items that said it was the students' privilege and opportunity to be educated in the general education setting. This is in line with the purpose of IDEA that requires students with special needs to be educated in the least restrictive environment (LRE). Generally, LRE is considered to be with their peers to the highest extent as possible. IDEA gives those with disabilities the right to be in the regular classroom setting where possible.

A major concern expressed was the adaptability of the general education teachers and the continuation of special education services in general education settings. Most

parents agreed that their children would be less likely to receive special services and

individualized instruction in the general education setting. This was consistent with

previous findings (Leyser & Kirk, 2004; Palmer, Fuller, Arora, & Nelson, 2001; Buysse,

Skinner, and Grant, 2001). Parents also doubt the general education teacher's ability to

understand, integrate, and accommodate children with special needs. Yssel et al. (2007)

and Palmer et al. (2001) found similar results. Most parents reported that special

education is better when done by special education teachers than by general education

teachers. This is consistent with the results of Leyser and Kirk (2004) and Yssel et al.

(2007).

Parents in this study also expressed social fears that were consistent with other

findings. Most parents said that they fear how parents of children without disabilities will

treat their children with disabilities and social isolation of the child. Leyser and Kirk

(2004) found similar results. Parents reported that inclusion allows for their child to

participate in a variety of activities that may not be otherwise available. Chmiliar (2009)

found that the opportunity to participate in various activities increases the likelihood that

the child's parent is satisfied with inclusion. Parents in this study reported benefits for

children without disabilities. This included preparing children without disabilities for the

real world and helping them to learn about differences. Palmer et al. (2001) and Salend

(2004) found similar results.

Limitations

A limitation of this study is the small sample size. Some participants answered

less than 10% of the questions. These participants were not reported in the results. Due to

this, the results are not generalizable to a large group. Information was not gathered on

the particular inclusive setting (i.e. teaching style used, presence of general education teacher, etc.) so the results cannot be used to say which inclusive setting is the best.

Suggestions for Further Research

A repetition of this study within a single school district would be beneficial. Because this study did not collect information regarding what school the child attended, results cannot be generalized to all settings. Focusing on a single school or school district would help to pinpoint which practices are most effective and others that prove to be less effective. A better, more complete knowledge of the school system would also help educators' awareness of school practices to increase. They could receive feedback on what practices are effective and other things that need to change. Perspectives of inclusion surveys should be completed by parents and teachers to continuously increase effectiveness of educational services. This will help to ensure that all children are educated in the environment that is best for them.

Conclusions

Many parents support the idea of inclusion but worry about the services and individualized instruction that their child will receive in the general education classrooms. General education teachers, special education teachers, and other school personnel should help to reassure parents that special education services will not be lost if included in a general education setting. Schools should provide general education teachers with the support needed to implicate individualized instruction in the general education setting. Results of this study show that parental perspectives on inclusion should be continuously monitored. They are an important aspect of the child's education and should be incorporated into the decision about placement. Parents have a voice in

their child's education and should use it if unsatisfied with their child's educational

placement.

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