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Haitian Parents' Experiences with the IEP Process and their Involvement with the Special Education Program

Margarette Mahotiere

University of Miami, m.mahotiere@miami.edu

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UNIVERSITY OF MIAMI

HAITIAN PARENTS' EXPERIENCES WITH THE IEP PROCESS AND THEIR
INVOLVEMENT IN THE SPECIAL EDUCATION PROGRAM

By

Margarette Mahotiere

A DISSERTATION

Submitted to the Faculty
of the University of Miami
in partial fulfillment of the requirements for
the degree of Doctor of Philosophy

Coral Gables, Florida

December 2013

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Margarette Mahotiere

Approved:

Elizabeth Harry, Ph.D.
Professor of Teaching and Learning

Wendy Morrison Cavendish, Ph.D.
Associate Professor of Teaching and
Learning

Robert F. Moore, Ed.D.
Associate Professor of Teaching and
Learning

M. Brian Blake, Ph.D.
Dean of the Graduate School

Marie Guerda Nicolas, Ph.D.
Associate Professor of Educational
and Psychological Studies

MAHOTIERE, MARGARETTE
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Current literature and recent legislation advocate parental involvement in education as “best practice.” The Individuals with Disabilities Education Act (IDEA) Amendment of 1997 and its subsequent reauthorizations promote parental participation in the special education process by requiring schools to consider parents as equal partners in the development of the Individualized Education Plan (IEP) for students with disabilities. However, the intent of the law has not always been properly implemented and parents have reported the process as stressful and confusing. Prior research revealed barriers that marginalize culturally and linguistically diverse (CLD) parents to passive roles in the process. Using qualitative methods, this study focused on Haitian parents’ perceptions of their experiences in the IEP process, their involvement in their children’s education, as well as school personnel’s perceptions of Haitian parents’ involvement in the educational process. Rogoff’s theory of the cultural nature of human development was used to frame the study and to analyze the potential dissonance between parents’ and school personnel’s perceptions of parental participation. The findings revealed that Haitian parents’ cultural background and their decreased trust in the educational system following their children’s

disability designation limited their participation in educational matters. Additional findings suggested that the limited parental participation in the IEP process exacerbated school personnel's negative perceptions of Haitian parents. Beyond school personnel's negative perceptions, the data also revealed that Haitian parents were participating in their children's education in ways that were not obvious to school personnel. Service providers need to consider Haitian parents' social and cultural backgrounds in order to provide services that have potentials to lead to true partnerships as intended by IDEA.

Dedication

This dissertation is dedicated first and foremost to you, Mother. I can only imagine the joy and pride you would have felt in my accomplishments. With the little that you had, you always provided what I needed to make my educational endeavors possible. In all my pains and joys throughout my doctoral studies, I have thought of you and found the inspiration and courage I needed to go on. Although you are not here physically to see me reach this milestone, I know your immortal essence is proud of me and your spirit is beaming with joy. I thank you for all you did for me.

It is also dedicated to you, my three daughters, who patiently waited for four years while I completed this degree. I hope I am an inspiration to you to strive for the stars, as you were to me during my long hours of study.

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Chapter One: Introduction

Parental participation in the educational programming of students with disabilities has been mandated for close to 50 years by the Education for All Handicapped Children Act (1975) as well as by the more recent Individuals with Disabilities Education Act (IDEA, 1990; 1997; 2004). These laws guarantee special education services for those meeting certain requirements and govern how states, school districts and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities. The most recent data available shows that more than 6.5 million youth were eligible for services under IDEA (U.S. Department of Education, 2012).

The law requires that individualized curriculum accommodation be made for students with disabilities, and this requirement is satisfied through the individualized education plan (IEP). The IEP includes supportive educational services in accordance with the individual's needs. The main purpose of the IEP is to set appropriate goals and outline the services that qualified individual students should receive to maximize their access to an appropriate education. These supportive educational services are intended to be designed with parents' input and approval. The inclusion of parents in decision making not only minimizes litigation, it is considered 'best practice' as documented in the literature through the findings of positive impacts that parental involvement has on educational outcomes (Jeynes, 2005a; 2005b; 2007).

Consequently, IDEA 2007 elevates parents to the status of equal partners alongside educational professionals in the design of the IEP. The law explicitly holds local education agencies responsible for ensuring that parents participate in the process as

collaborators. IDEA (2004, §300.500) outlines the procedural aspects of the IEP process with the parents as pivotal members of the process. The school system is responsible for scheduling and conducting IEP meetings and school personnel are required to make every effort to accommodate parents to ensure that they are participating as equal partners.

Under the ideal situation, school staff must:

- Contact the parents in writing;
- Notify parents early enough to make sure they have an opportunity to attend;
- Schedule the meeting at a time and place agreeable to parents;
- Notify the parents the purpose, time, and location of the meeting;
- Notify the parents who will be attending;
- Notify the parents that they may invite people to the meeting who have knowledge or special expertise about the child; and
- Notify parents of their rights to disagreement and to due process.

However, the intent of the law is not always fulfilled. It has been found that tensions often exist between parents and school personnel when collaborating on identifying appropriate programs, accommodations, and placement for students (Lo, 2008; Salas, 2004).

School personnel have reported that culturally and linguistically diverse (CLD) parents tend to be passive in IEP meetings (Harry, 1992b; Luft, 1995), and are perceived as having low levels of enthusiasm and commitment to their children's education (Warger & Burnette, 2000). Thus, they are often perceived as not meeting educators' expectations for participation (Harry & Klingner, 2006; Klingner & Harry, 2006). Some parents act more as listeners and do not provide much information during the IEP

meetings, while others do not participate at all. This perceived passivity has resulted in school personnel having negative perceptions of CLD parents (Harry & Klingner, 2006; Valdes, 1996). CLD Parents are often seen as lazy, not caring enough, or not giving priority to their children's education (Smrekar & Cohen-Vogel, 2001; Taliaferro, DeCuir-Gunby & Allen-Eckard, 2008). These perceptions often negatively affect professionals' attitudes and behaviors toward CLD parents, resulting in communication breakdowns in IEP meetings.

School professionals do not always realize that there might be a disconnect between their perspectives and those of CLD parents when it comes to the meaning of parental participation (Smrekar & Cohen-Vogel, 2001; Valdes, 1996). Researchers have found that the differences are often along cultural lines, with school views of parental participation being rooted in Western perspectives and CLD parents' views being grounded in their cultural backgrounds (Pedersen, Draguns, Lonner & Trimble, 2002; Valdes, 1996).

School professionals typically interpret CLD parents' practices and beliefs through the deficit model (Valenzuela, 1999). Using such a model, educators often place blame on the family and the context of the home, thereby shifting the onus of responsibility (Harry & Klingner, 2006; Kalyanpur & Harry, 2012; Valenzuela, 1999; Watson, 1973). However, many studies investigating school participation among CLD parents have found that the use of technical language and jargon by professionals, the hierarchical organization of schools, and the culture of special education (Harry, 1992a; 1992b; Kalyanpur & Harry, 2012; Salas, 2004) are barriers that keep parents away from their children's school.

The problems faced by CLD parents often become apparent at the official placement meeting that serves as the initial IEP meeting. Several studies have shown that the initial IEP meeting is often a source of distress for parents who must not only deal with news that their children have special needs, but also must deal with the complexity of the special education process (Lo, 2008; Salas, 2004; Spann, Kohler & Soenksen, 2003). Whereas mainstream parents may be able to use available resources and their knowledge of the system to minimize the complexity of the process through information seeking, the process can remain complex and confusing for CLD parents who are not familiar with the system and do not have the resources (i.e. literary and technological) to access outside information. CLD parents attending IEP meetings often report feelings of alienation and confusion from not knowing what is expected of them (Harry, 1992c; Hardin, Mereoiu, Hung & Roach-Scott, 2009). Confusion and alienation are not only reported by minority parents but also by middle-class white parents (Fish, 2006; Turnbull, Turnbull, Shank & Leal, 1999), whose practices are generally similar to those of the school. If the process proves to be confusing and stressful for mainstream middle-class parents (Esquivel, Ryan & Bonner, 2008; Stoner, Bock, Thompson, Angell, Heyl & Crowley, 2005), what can be expected of first generation CLD immigrant parents who are coming from backgrounds without a culture of special education and who are not well versed in school expectations and educational rights in the U.S.?

The cultural background of parents is an important barrier often neglected or viewed as pathological by educational practitioners (Trainor, 2010). Although parents from low socio-economic (SES) and CLD backgrounds may value education as much as middle class parents (Drummond & Stipek, 2004; Epstein, 2001; Salas, 2004), low SES

and CLD parents often leave decision-making about their children's education to school personnel, since they perceive them as being experts in their craft (Hardin et al., 2009; Horvat, Weininger & Lareau, 2003). Additionally, it has been found that deference to educators affects how CLD parents, especially immigrant parents from certain cultural backgrounds, respond to participation in school affairs (Park, Turnbull & Park, 2001; Rueda, Monzo, Shapiro, Gomez & Blacher, 2005). For example, in her work with parents from the West Indies, Waters (1999) found that West Indian parents trusted educators to do what is best for their children, and considered any interference or questioning of educators' decision as an affront to the educators' professionalism. Klingner and Harry (2006) pointed out that the IEP meeting can be intimidating due to the power differential between school personnel and parents, as well as the way the meetings are run. A report of assessment results, discussion of the child's needs, service recommendations, and preparation of the IEP document by school professionals typically characterize IEP meetings. The steps just mentioned are often prepared in advance and leave little room for parental input. Moreover, the use of technical language during these meetings often intimidates parents who feel that they do not possess the needed knowledge to engage in the conversation (Klingner & Harry, 2006; Lo, 2008).

Additionally, the educational system is established in ways that privilege professionals over families (Harry & Klingner, 2006). It has been an accepted practice that it is the professionals who both determine disabilities through assessments and who make decisions on the nature of effective interventions. Families, therefore, are subsequently marginalized into the role of knowledge recipients, finding themselves subordinate to school procedural practices (Harry & Klingner, 2006; Kalyanpur & Harry,

2004). Salas (2004) and Lo (2008) documented the silencing of parents' voices by professionals when the parents demanded a change in services or tried to share their knowledge with professionals at the IEP meetings. Parents' input was either downplayed or ignored, thereby impeding rather than facilitating collaboration and partnership.

Although legislation calls for true partnership between the school and the parents, it is often barred by the dissonance between parents' practices and educators' beliefs about parents. Different factors influence educators' beliefs, including assumptions and generalizations resulting from various socio-cultural experiences (Harry & Klingner, 2006). Most teachers are Anglo middle-class females (Feistritz, 2011) whose experiences are those of the dominant culture, which expects parents to be very involved in their children's schooling. Teachers often compare the involvement of CLD parents to that of mainstream middle- to upper-class parents (Lightfoot, 2004) who have been socialized in the North American style of school participation, which expects them to be present at the school, to read with their children, and to do projects at home. CLD parents' involvement in their children's life, however, may focus on the weight they give to making sure their children look tidy and are in school every day (Smrekar & Cohen-Vogel, 2001; Valdes, 1996; Valenzuela, 1999). These parents see schooling as the domain of educators, hence separating school practices from home practices. Since CLD parents' participation practices are bound to the home, hence not readily apparent to school personnel, the latter often erroneously assume that CLD parents are not involved. A lack of understanding of the parents' socio-cultural and home environment may be the cause of educators' negative assumptions about CLD parents. Many CLD parents do not fit the mold of middle- to upper-class parents, who may have the luxury of staying at

home, have more available resources, or have more flexible work schedules (Lareau & Horvat, 1999; Valenzuela, 1999).

The Deficit Model and Minority Families

Despite the documented dissonance between parent participation and school personnel's perceptions of parent participation, the literature indicates that school personnel continue to view parents' behavior toward the school through deficit lenses (Harry & Klingner, 2006; Smrekar & Cohen-Vogel, 2001; Valenzuela, 1999), instead of seeing the parents' behaviors as byproducts of cultural and institutional practices. The deficit perspective has a long tradition in U.S. society. Embedded in the historical development of the Eugenics movement, these views became more salient with the publication of the Moynihan Report (1965), later reinforced by the Coleman Report (1966), which sought to explain the low achievement of black students. Both reports blamed family's backgrounds, economic situations, and neighborhood qualities for students' unfavorable school outcomes. The deficit model views minority group members as being "inadequately socialized into the core cultural values and competences engendered by the dominant or majority culture" (Watson, 1973, p. 21). As described by Kirk and Goon (1975), the deficit model assumes that the low achievement of blacks is the result of deprived culture, where they fail to acquire the American middle-class attitudes, values, and behaviors. This deficit literature holds minorities entirely accountable for their schooling situation, rather than putting the responsibility on the educational system and society to address societal oppressions. The *de facto* segregation practices that continue to exist in American society as a result of residential segregation patterns of low-income and high-income neighborhoods (Ladson-Billings, 1994), combined with the practice of having children attend their neighborhood school, work

together to keep minority poor children in neighborhoods with schools that have limited resources and underperforming teachers (Ravitch, 2010). If poor immigrant children end up in poor neighborhoods with substandard schools, it should not be surprising if they fail to achieve or have access to middle-class culture.

Immigrant groups of African descent are often viewed and treated as members of the Black ethnic group, hence they are extended all the prejudices and stereotypes that are associated with the Black ethnic group in the U.S. (Stepick, Grenier, Castro & Dunn, 2003). Haitians, classified as part of the black ethnic group for example, while suffering the same discriminations that have been directed toward African Americans in the U.S. (Zephir, 2004), may have it worse as they may also find themselves at a lower rank of the social ladder than native Blacks (Portes & Rumbaut, 2006; Stepick, 1998). Over the years Haitians have suffered from police brutality, illegally rejected housing applications, unnecessary delays when receiving services from public agencies, and lack of opportunities for job promotions (Zephir, 2004). These biases have affected both immigration and educational policies on Haitian issues, and Haitian children are often victims of such policies. For example, the linguistic and cultural identity difficulties that school-age Haitian children face are often overlooked even though they are believed to affect their academic achievement (Buxton, Lee & Mahotiere, 2008).

Existing literature suggests that the deficit-based theories described above have historically shaped perceptions about CLD families (Harry & Klingner, 2006; Smrekar & Cohen-Vogel, 2001; Valenzuela, 1999). However, other research has shown that there are additional factors affecting parents' attitudes toward the education system (Harry, 1992a; Kalyanpur & Harry, 1999; Valdes, 1996). Hoover-Dempsey and Sandler (1997)

identified three major factors that affect the level of parental involvement: 1) parents' beliefs about what is important, necessary and permissible for them to do on behalf of their children; 2) the extent to which parents believe that they can have a positive influence on their children's education; and 3) parents' perceptions that their school wants them to be involved. These factors were exemplified in Valdes' (1996) study of low-income Mexican families, which documented that parents felt that their responsibility was restricted to making sure that their children behaved in school since they felt that they did not possess the power to affect school rules. Additionally, they felt unwelcome when they attempted to make contact with the school.

Deficit perspectives are sometimes the result of a lack of historical and cultural understanding. Instead of focusing on deficit views of parents, a culture centered perspective presented by Rogoff's (2003) Theory of the Cultural Nature of Human Development provides a more comprehensive framework to study the dissonance documented in the literature between parents' and educators' perceptions of parental roles.

The Cultural Nature of Human Development

To investigate the barriers to a successful school-parent partnership in the IEP process, this study is framed by the philosophical and theoretical perspectives of Rogoff's (2003) Theory of the Cultural Nature of Human Development. This theoretical framing is important because it interprets behavior in terms of cultural variations rather than cultural deficit. School practices often fail to account for CLD parents' strengths (Harry, Klingner & Cramer; 2007). A common belief among school personnel is that CLD parents are in need of "fixing" (Harry, 2008). Rogoff's theory helps bridge the

disconnects between parent and professional cultural practices and beliefs that act as barriers to true partnership.

Rogoff (2003) has described human development as a cultural process that evolves from human practices. Cultural processes are sets of cultural practices and traditions that are dynamic and can be adjusted as individuals adapt to new circumstances. Rogoff focused on the cultural practices and the traditions within communities, rather than equating culture with nationality and ethnicity as these classification categories offer very narrow lenses to interpret the whole spectrum of human behavior, and neglect too many other variables such as social status and educational backgrounds. Culture is defined as a system of learned and shared standards for perceiving, interpreting, and behaving when interacting with others and with the environment (Jezewski, 1990). Therefore, culture is the totality of artifacts, behaviors, and mental concepts transmitted in a society or community through many generations (Rogoff, 2003).

Congruent with the above definition of culture, Rogoff (2003) made it clear that cultural practices and traditions should only be interpreted within the parameters of the individual's community, since people are always functioning within sociocultural contexts. In any attempt to understand behaviors, consideration must be given to the individual's past and present contexts to situate the behaviors. If this consideration is not given, misunderstandings and misperceptions may occur. For example, because of the stigma attached to disabilities in many cultures, the limited outside services available to families dealing with a disability, and families' levels of acceptance of a disability (Kalyanpur & Harry, 1999; Lynch & Hanson, 1992), a culture of advocacy concerning

disabilities is absent in the native countries of many different immigrant groups (Jacobson, 2008; Kalyanpur & Harry, 1999). Consequently, this affects their help seeking behavior in the U.S., which may be interpreted as neglect or disinterest by service providers (Kalyanpur & Harry, 1999; Lynch & Hanson, 1992; Valdes, 1996).

Departing from the most accepted theories of cognitive development in European and North American literature (Piaget, 1971), which were based mostly on middle and upper class communities, Rogoff (2003) used examples of different patterns of development *around* the world to illustrate that development is not solely guided by biology, but also by practices that evolved in accordance with the needs and restrictions imposed by certain environments. To illustrate environmental restrictions, Rogoff juxtaposed child-rearing practices in other parts of the world with those used in Western countries. For example, an eleven-month-old Efe baby in the Ituri Forest of the Democratic Republic of Congo was shown using a machete skillfully. In contrast, children in North America are restricted from manipulating sharp objects until they are much older. This difference is further exemplified by the current North American practice of childproofing homes by removing from reach all sharp objects deemed dangerous, covering the electrical outlets, locking cabinets and toilet seats, etc. Instead of enumerating differences between cultures as was often done in the literature, Rogoff (2003) opted to prove that the development of individuals is a dynamic process that allows them to adapt to their environment based on needs.

Using Vygotsky's (1978) four-level framework of development (ontogenetic, phylogenetic, cultural-historical and microgenetic), Rogoff (2003) devised her theory about the integrated dynamic nature of individual, culture and species development.

Ontogenetic development occurs over a person's life span, from conception to adulthood, and it encompasses all aspects of development including physical, emotional, and intellectual. Phylogenetic development is defined as the slow change that takes place in the human species over time as a result of adaptation or mutation. Such change is recorded in an individual's genes and determines ways of being. Cultural-historical developments are changes that are learned from previous generations in the form of technology, symbolic artifacts, as well as value systems and norms. Microgenetic development consists of the instantaneous learning that takes place in specific contexts as a result of an individual's genetic and cultural-historical background (Rogoff, 2003). Whereas microgenetic development is the moment-by-moment change that is observed within a short period of time, the cultural-historical development entails the aspects of development that are socially learned over a longer period of time. Rogoff warned against seeing these levels of development as being independent of each other. Specific contexts, as well as a species' past, cause the species to adapt (cultural-historical), which cause genetic changes (phylogenetic), which are passed down to future offspring (ontogenetic). In spite of these influences that may take a long time to bring about changes in the species, individuals and groups can adapt spontaneously to changing contexts (microgenetic). These levels of developmental changes contribute to current states of being, believing, and acting of a particular group of people. For the purpose of this discussion, only the cultural-historical and microgenetic (spontaneous) levels of development are considered because they can be easily studied and observed when compared to other changes that take a long period of time to come about.

Rogoff (2003) stated that all behaviors and events have meaning and function, and they occur because life events call for them. Nothing happens in a vacuum or haphazardly. All occurrences are the results of human adaptations. This is of particular importance because it offers an explanation of CLD immigrant parents' behaviors in light of their cultural backgrounds and their reactions to their current socio-cultural contexts in the U.S. For example, people's behaviors toward schooling or the importance placed on formal education at the microgenetic level of development reflect attitudes that have been culturally and historically learned and practiced for many decades, despite spontaneous adaptation. Therefore, such an explanation has implications when dealing with schools' expectations of parents, who were effectively socialized in their respective cultures for a significant part of their lives, and have to learn new ways when faced with migration to a new culture that has different norms. Her point is that all the levels on which humans develop, whether genetic or cultural-historical, contribute to the individual's way of being and acting. However, when we look at development from a social science perspective, we are mostly looking at the cultural-historical level of development, in which we see how culture and history affect behavior, which, in turn, may be amenable to change as individuals learn new contexts. As the contexts change, individuals change as they cognitively realize new ways that will help them fit in particular communities. In the case of newly arrived immigrants, microgenetic changes may be observed as individuals learn the new culture. However, they have to override their prior cultural-historical development (i.e. traditions, values and norms) in order to cognitively incorporate the new ways of being.

Rogoff (2003) indicates that certain social learning is entrenched early on in the subconscious system and cannot be relinquished or unlearned overnight. Recognizing and learning the ways of a new culture take time. To better understand individuals, it is important that they are seen as members of cultural communities, defined as “groups of people who have some common ...values, understanding, history, and practices” (Rogoff, 2003, p.80). A community has a shared degree of commitment toward the accomplishment of certain goals, e.g., educating its citizens to participate in democracy and be part of the work force of the community. Members of such a community are familiar with the aspects of each other’s lives, and because of their shared goals and familiarity, are able to provide each other with needed supports.

When an immigrant enters a new country with established cultural patterns and goals, this causes challenges for both the immigrant and the new community (Portes & Rumbaut, 2006; Valdes, 1996; Waters, 1999). The immigrants’ sense of community is disrupted (Nicolas, Desilva & Donnelly, 2011; Portes & Rumbaut, 2006). They have to learn new ways of creating a community within unfamiliar circumstances and of fitting into the new community. The new community in turn has to make efforts to include the “newcomer” into the community for the sake of its continuity, and to avoid social breakdowns and conflicts. Such a process takes time for both parties. A degree of tolerance and willingness to integrate is necessary on both sides. According to Rogoff (2003), differences in behaviors of people from different cultural communities should be seen as variations and not as stumbling blocks. If schools are to be effective in reaching out to parents from diverse ethnic, language, and socio-economic backgrounds, school

personnel need to possess certain skills that facilitate, encourage, and support parental involvement.

Applications of Culturally Centered Approaches

While Rogoff's Theory of the Cultural Nature of Human Development synthesizes the importance of culture in explaining human behaviors, scholars like Pedersen, Barrera and Corso, as well as Kalyanpur and Harry, have provided practical approaches in applying culture centered perspectives with CLD populations. Pedersen (2000) applied the idea of *culture centeredness* and *cultural competence* to counseling. Barrera and Corso (2003) developed the *skilled dialogue* approach to equip professionals with multicultural communication skills. Kalyanpur and Harry (2012) suggested a *cultural reciprocity* approach in working with CLD families. It is important to note these approaches since they provide the link between cultural theory and cross-cultural practices.

Culture-centeredness approach. Pedersen (1999), through his work in psychological counseling, asserted that culture-centeredness should be the foundation upon which services are delivered when dealing with culturally diverse perspectives and behaviors. Culture-centeredness is defined as putting culture at the center of practice in service delivery. Cultural contexts, which encompass ethnographic, demographic, social status and other variables of affiliation, are central to the culture-centered perspective. This approach provides ways that honor and respect family values and choices, while providing the families with the supports necessary to strengthen their functioning. It requires professionals to have positive views of service recipients through cultural sensitivity, with emphasis on strengths and family choice. In other words, professionals in the helping fields need to develop multicultural competence. Multicultural

competence is a set of behaviors, attitudes, and skills that enable an individual to function effectively within culturally diverse communities (Pedersen et al., 2002). It requires the recognition and understanding of the effect of race, culture, language, ethnicity, gender, economic conditions, sexual orientation, religion, and social context behavior (Randal-David, 1989), from which various memberships are defined.

Although there has been a spate of research on the importance of considering culture in service delivery (Harry, 1992a; Kalyanpur & Harry, 1999; Lynch & Hanson, 1992; Pedersen, 1999), the narrow perspectives of the dominant culture still dictate the practices of professionals in American society. Pedersen (1999) stressed that Western culture is often used as the standard to dictate norms for the rest of the world, while the contributions that other Nonwestern cultures made in human development are ignored. The assumption that Western perspectives are the norms for all has consequently affected the way that North Americans provide services to individuals from CLD backgrounds (Pedersen, 1999). Kalyanpur and Harry (1999) provided an example of a social worker who recommended surgery for a child with clubfeet, which, in the social worker's mind, was something that needed to be fixed, whereas the family, members of a Hmong community, saw the clubfeet as a blessing, indicating that they had been honored with the reincarnation of a warrior ancestor whose feet had been injured in battle. Coming from a culture that reveres ancestors, the parents interpreted the clubfeet as their chance to help in the release of the ancestor's soul from an undesired entrapment. Furthermore, they feared that it might bring bad luck to the entire community if they were to intervene with surgery and interfere with the supernatural world, which wished them to be the recipient of a disability. Therefore, the parents refused the surgery and the social worker treated

the case as parental neglect. Such misunderstandings have the potential to create communication breakdowns and to alienate the very people that the service provider is supposed to help.

Pedersen and his colleagues (2002) suggested three necessary steps in developing multicultural competence: 1) the development of awareness of one's culturally learned assumptions which determine one's perspectives and behavior; 2) the development of knowledge about culturally relevant facts; and 3) the development of skills for culturally appropriate interactions. Based on this framework, a culturally competent person will have the ability to recognize and validate cultural differences in others (Pedersen et al., 2002).

Although Pedersen's work evolved from the field of psychology and his work in counseling, his theory of culture-centeredness is equally applicable to the field of education. Just as the general population of the U.S. has become more diverse over the years, so has the school-aged population. Not only do education professionals have to provide services to the students, they also have to interact with the families of those children. The use of a culture-centered approach has the promise of facilitating positive interactions between families' and school personnel.

Skilled dialogue. Although cultural competence is a widely respected concept, the question remains as to how principles of cultural competence are to be implemented. In proposing some specific approaches to this challenge, researchers in special education have applied Rogoff's (2003) cultural view and Pedersen's (1999) call for culture-centeredness to the issue of collaboration between professionals and CLD parents of children with disabilities. Consequently, Barrera and Corso (2002; 2003), in working

with CLD families dealing with the special education programming process, provided a concrete framework for the use of culture to explore the relationship between parents and professionals. To deal with the challenges of cultural diversity, Barrera and Corso introduced the concept of skilled dialogue as an approach that can be used by service providers to interact more competently with people who do not share the same cultural backgrounds. Barrera and Corso's approach encompasses Rogoff's theory and Pedersen's perspectives by taking into account contexts, the dynamic nature of culture, and the need for responsive interaction. Three beliefs are at the foundation of the skilled dialogue approach: 1) diversity is relational and contextual; 2) understanding of the dynamics of culture is required in addressing the challenges posed by cultural diversity; and 3) ability to engage in respectful, reciprocal and responsive interactions verbally and nonverbally across diverse cultural parameters is a key to cultural competence. Seeing cultural diversity as a positive quality that only becomes problematic when dialogue proceeds in an unskilled manner, Barrera and Corso postulated that the level of respect, reciprocity and responsiveness present during an interaction can determine whether it is skilled or unskilled.

Cultural reciprocity. Proposing a somewhat different view of cultural competence, Kalyanpur and Harry (2012), in their work with CLD families of children with disabilities, suggested that although cultural competence can be an effective approach for dealing with diversity, it is not always possible to acquire knowledge and skills in every culture that may be encountered. Kalyanpur and Harry (1999; 2012) therefore call for the adoption of cultural reciprocity to mediate interactions between different cultures in an effort to bridge the gap between the dominant culture and the

many other cultures in the U.S. Cultural reciprocity holds that both professionals and parents must enter into a shared, respectful and collaborative relationship in which they seek knowledge of each other's cultural values and beliefs through explicit discussions in order to reach an understanding of differences in perspectives. Professionals should not assume that they know the other culture. Instead, they should be open to learning from those that they are serving through reciprocal and responsive dialogue. Such practices as recommended by Pedersen (2000), Barrera and Corso (2003), as well as Kalyanpur and Harry (2012) have the potential to reduce the dissonance documented between educators and CLD groups.

The theory, perspectives, and proposed practices discussed above were used to frame the study and interpret the perceptions of parents and educators because they provide an alternative model to the deficit model. This posited framework is more democratic, humane, and inclusive of diversity.

Purpose of the Study

This study focused on one particular group of CLD families of children with disabilities – Haitians. It sought to investigate Haitian parents' participation in the IEP process, their involvement in their children's education, as well as school personnel's perceptions of their involvement, to see if there is a disconnect between parents' practices and beliefs of their roles in education and professionals' perceptions of parents' involvement. Studying the full gamut of parental involvement among Haitians in the U.S. educational system or in the field of special education constitutes a complex undertaking. For this reason, I chose to focus this study mostly on Haitian parents' participation in the IEP process. This study expanded on the themes that emerged from the pilot study mentioned in chapter two. I investigated whether a dissonance existed

between the perceptions of the parents and that of school professionals when it comes to parental participation in the IEP process.

Importance of the Study

Besides my strong personal interest and my membership in the Haitian community, there are several reasons for selecting this group as the focus of the study. Although there has been a fair amount of research looking at the involvement of CLD parents in education, the Haitian population has received minimal attention in the U.S., in spite of its steady increase since the 1970s. The Haitian population in the U.S. was estimated to be around one million a decade ago (Zephir, 2004). A significant concentration of Haitians can be found in many major metropolitan areas, such as Miami-Fort-Lauderdale-Pompano Beach, Orlando-Kissimmee, New York-Northern New Jersey-Long Island, and Boston-Cambridge-Quincy (Zephir, 2004). Despite the growing number of Haitians concentrated in major areas of the country, finding accurate data on Haitians in school systems is often complicated as most school districts have all students of African descent classified as Black or African-American, making it difficult to extrapolate data for different ethnic groups.

The next salient reason for studying the Haitian population is the seeming underachievement of Haitian students. The underachievement of African-American students in the educational system and their disproportionate representation in certain special education categories have been well documented (Donovan & Cross, 2002). Because Haitians are conglomerated in this group, they share the issues affecting African-American underachievement. Haitian parents may, therefore, be dealing with the special education process at a higher rate than other immigrant groups. It has been documented that parental involvement in the IEP process has been associated with

successful implementation of the IEP plan, as well as parent satisfaction with the special education programs (Turnbull, Turnbull, Erwin, Soodak & Shogren, 2010). Therefore, understanding parental involvement among Haitians in the special education process is crucial because it has the potential to influence the overall success of the program for this population.

The third reason for studying the population is the quality of education the majority of Haitian students are receiving in the public schools. Research has consistently shown that students in poor neighborhoods are at risk of receiving poor schooling, which increases their risk of failing and of being placed in special education programs (Harry & Klingner, 2006). Immigrant settlement patterns are well documented in the literature (Portes & Rumbaut, 2006; Stepick & Portes, 1986). Newly arrived immigrants tend to settle in communities with other immigrants or with people of similar backgrounds (Portes & Rumbaut, 2006). Those communities tend to be poor with limited services and resources and are likely to have a low tax base (Anyon, 2001; Stepick & Portes, 1986), which determines the amount of taxes allocated for neighborhood schools. As a result of settlement patterns and institutional practices of having children attend neighborhood schools, immigrant children tend to end up in poor neighborhoods with below average performing schools. Consequently, they are at risk of receiving poor schooling (Anyon, 2001), which may contribute to their disproportionate placement in special education programs (Klingner, Artiles, Kozleski, Harry, Zion, Tate, & ... Riley, 2005; Sullivan & Artiles, 2011). In order to meet the goals of providing Haitian students with the services that they are entitled to, gaining acceptance of the importance of parental participation in the IEP meeting, and providing an appropriate and meaningful

education that maximizes their children's potential, it is imperative that professionals in the field of special education are aware of the experiences of the Haitian population. If parents' participation in the IEP process is one of frustration and misunderstanding, it is likely that their involvement in the implementation aspect will be lacking. If parents are to participate, measures have to be taken to ensure that the process does not alienate them. By bringing the experiences of the Haitian parents and the perceptions of educators toward Haitian parents to the forefront, I hope to gain important insights that will help develop "best-practice" guidelines for conducting IEP meetings and communicating with Haitian parents about their children's educational needs.

In the following chapter, I attempted to situate this study in the literature by reviewing research on parental involvement in education in general, CLD parental involvement, school personnel's perceptions of parent participation, CLD parents' experience with the IEP process and participation in special education programs, and cross-cultural views of disability that may explain parents' attitudes toward special education programs and their participation in the process. At the end of the chapter, a summary of the pilot study, a precursor to the current study, is included.

Chapter Two: Literature Review

The purpose of the study was to investigate Haitian parents' experiences with the IEP process, their involvement in their children's education, and school personnel's perceptions of their involvement. In order to situate the study in the literature, the following areas of the literature were reviewed: parental involvement in education in general, CLD parent involvement in education, perceptions of school personnel and parent experiences with the IEP process and participation in special education programs. To conclude, cross-cultural definition of disabilities as well as the state of affairs concerning disabilities in Haiti was reviewed in order to better interpret parental participation.

The literature on parental involvement in general education is vast and has spanned many decades, and therefore extends beyond the scope of this study. In reviewing parental involvement in the literature, I will provide a brief overview of the accepted trend from prominent studies. I will then focus on parental involvement in special education programs.

Literature Search Procedures

To review the literature pertinent to this study, I conducted a search of journals indexed in ERIC and PsychINFO. To address parental involvement, I used the keywords *parental involvement** combined independently with *education, minority, culturally and linguistically diverse, IEP process, IEP meeting and special education*. I conducted another search using the terms *parent* participation* independently with *special education and education*. In order to address educators' perceptions, I conducted a search using *perception** independently with *educators, school, school personnel, parents, minority parents, and culturally and linguistically diverse parents*. I also

searched for *minority parent involvement followed by parent experience with IEP process or meeting*. The search was limited to peer-reviewed articles. After eliminating overlapping articles, pertinent articles were selected. The reference section in the selected articles was examined for additional sources that met my inclusion criteria. Google Scholar was used to locate articles that had been cited but could not be obtained from ERIC or PsychINFO.

In this literature review the following will be addressed: 1) parental involvement in education as a cultural concept; 2) CLD parents' involvement; 3) school personnel's perceptions of parental involvement; CLD parents' experience with the IEP process; and 5) cross-cultural views of disability.

Parental Involvement in Education as a Cultural Concept

In the last four decades a large amount of research has been conducted on parental involvement and it has become more widely accepted that parental involvement in school has a positive effect on student achievement. The emphasis on parental involvement stemmed from the belief that parents and the home environment play a critical role in children's intellectual and social development (Coleman, 1966). Parental involvement has been associated with positive results including higher achievement in school (Epstein, 2008; Hill & Tyson, 2009; Jeynes, 2007); increased level of social competence (Hill & Craft, 2003; Mielde & Reynolds, 1999); and less behavioral and emotional problems (Domina, 2005; Pomerantz, Moorman, & Litwack, 2007). As a result, policy makers and practitioners have encouraged a high level of parental involvement in all aspects of the educational process.

However, the question must be asked up front – what is meant by parental involvement? As evidenced in the first chapter, the concept of culture must be kept in

mind when interpreting views of child rearing and parental roles. As Rogoff (2003) highlighted, these practices are culturally constructed. Likewise, we must look through this same lens of culture when conducting research on parental involvement in children's education. The concept of parental involvement, as constructed in the U.S., reflects the culture of an economically advanced society where formal education is expected, and a democratic vision of role equality between parents and professionals is touted as the goal (Kalyanpur & Harry, 2012). As the literature in this chapter will show, other cultural groups interpret parental involvement differently from this U.S. construct. In fact, there is little evidence of culture centeredness (Pedersen et al., 2002) or the implementation of strategies like cultural reciprocity (Kalyanpur & Harry, 2012), or skilled dialogue (Barrera & Corso, 2003) in parent-professional communication.

Researchers attempting to measure or evaluate parental involvement in education typically approach the issue without challenging the existing embedded cultural assumptions. Most commonly, the mainstream definition of parental involvement has included all activities that allow families to participate and become partners in the educational process at home or in school, such as information exchange, decision sharing, home teaching, advocacy, school services and other reciprocal efforts aimed at enhancing learning and success (Mielde & Reynolds, 1999). Parental involvement has been divided into two main categories: learning activities at home and learning activities at school. Learning activities at home are comprised of doing homework, engaging in conversation with the child about school matters and assisting in the implementation of behavior management plans. Learning activities at school include attending meetings, communicating regularly with the school, volunteering in the school and attending school

functions. Researchers have postulated that these activities can have positive impacts on improving learning outcomes (Christenson, 2004; Fantuzzo, McWayne, Perry, & Childs, 2004), hence the major push by practitioners and policy makers to bolster parental support. However, policy makers and practitioners often fail to take parents' social circumstances and cultural contexts into consideration in educational legislation and provision of services (Trainor, 2010).

Parents have reported a number of structural, cultural and linguistic barriers that kept them from participating in educational affairs (Peña, 2004). For example, in some instances parents with a low education level were unable to assist with homework (Smrekar & Cohen-Vogel, 2001). Despite their desire to see their children excel, they did not possess the skills to assist their children in completing academic tasks. Smith (2001) cited "a lack of understanding of the school system, a lack of knowledge of how to help their child, and feelings of inferiority" (p. 3) as possible causes that keep parents from being involved in school affairs. Other cited barriers include transportation, time constraints and other commitments, such as babysitting for younger siblings and holding multiple jobs (Hardin et al., 2009; Harry & Klingner, 2006). Furthermore, the reading level required to comprehend the parents' rights handbooks provided by professionals often exceeded the reading skills of many parents (Fitzgerald & Watkins, 2006), especially those who were classified as low SES and those who were recent immigrants. Another barrier was language (Hardin et al., 2009; Lo, 2009). Low-level English language skills, especially of those whose native language was not English, deterred parents from attending meetings and school functions, or even from inquiring about their children's progress (Lian & Fontáñez-Phelan, 2001). The fear was that they might not be

able to make themselves understood. Lian and Fontáñez-Phelan found that those parents needed information about assessment and special education documents in their native languages as well as the support of bilingual personnel during meetings.

CLD Parents' Involvement

Education professionals looking for parental involvement often do not consider the interaction of parents' social contexts and culture, or the effects of school behaviors when making assumptions about CLD parents' involvement in education. Low rates of parental involvement have been reported in low-income communities and among CLD groups when compared with parental involvement rates for higher income communities or the majority group (Abrams & Gibbs, 2002; Lareau, 1999; 2000; O'Connor, 2001). In a study of two schools, one in a neighborhood of high socio-economic status (SES) and the other in a low SES neighborhood, Lareau and Horvat (1999) documented that the rate of participation of high SES parents was higher than that of lower SES parents, and that the quality and types of participation differed. For example, higher SES parents tended to initiate interaction with the school and inquire about their children's academic progress more often than low SES parents. Lareau and Horvat, however, reported that work schedules and lack of transportation acted as barriers that kept low SES parents from participating in school affairs.

The following studies reviewed in this section highlight findings which indicate that low SES minority parents and parents from other CLD groups, like recent immigrants, participate at a lesser rate in school activities, although their expectations of academic achievement and their aspirations for their children are comparable to high SES parents.

Jeynes (2005b) used a sample size of 2,260 African Americans from the 1992 National Educational Longitudinal study (NELS) data to investigate the effect of parental involvement on African American youth's academic achievements. Parents were asked questions related to the following areas: attending school functions, communicating with their children about school, maintaining high expectations of their children's success and checking their children's homework. Five hundred and fourteen of the parents were rated "highly involved parents" and 1,746 were rated as "less involved parents" based on the parents' self-reporting via interview protocols. It is important to point out that less than a quarter of the African American parents in this study reported high levels of involvement. Their involvement was directly related to parents' SES status, with higher SES parents reporting higher involvement. This variation within the group supports the literature that socio-cultural background, that is SES level and education level, mediates parental involvement regardless of ethnicity, as more resources are often available to high SES more educated parents.

Gutman and McLoyd (2000) investigated low SES African-American parents' management of their children's education at home, at school, and in the community, in relation to their children's academic success. Seventeen families of high achieving students and 17 families of low achieving students participated in open-ended interviews. High achievers were defined as being in the top quartile with a B+ average or more, and the low achievers were defined as being in the bottom quartile with a D+ average or below. All parents reported helping their children with school work and having academic discussions with their children, which are attributes of a supportive parenting style. The only difference was that parents of high achievers employed more specific strategies in

helping their children and that they had more self-initiated contacts with the school than the parents of low achievers. Whereas the parents of high achievers initiated contacts to check their children's progress and to maintain positive relations with the school, parents of low achievers only visited the school when summoned. Considering Rogoff's view of cultural-historical development and the elimination of SES effect in the sample of Gutman and McLoyd's study, were parents who failed to initiate school contacts or to inquire about their children's academic progress working from their learned value systems based on the contexts they themselves grew up in, or was it due to apathy, or school personnel's treatments of the parents?

Valdes (1996) conducted a study with low-income Mexican families and found that the definition of school participation held by parents was different from the definition commonly expected in the U.S. The parents differentiated between education and schooling. They saw being educated as having good moral values, being respectful, and behaving in ways consistent with becoming a productive member of the family unit, as well as the community. Schooling had to do with formal education acquired in school, i.e., learning to read and write. To the parents, education and schooling were different domains, with education being the domain of the home and schooling the domain of the school. Parents believed that they were responsible for their children's education at home, and not for their schooling. Valdes found that the parents played very active roles in their children's lives at home, ensuring that the children developed into productive community members and learned good moral values. However, they did not meet the school's expectations of being actively involved in school activities, resulting in school personnel holding negative views of these parents.

Peña (2001) explored Mexican American parents' involvement in education using interviews with parents and school personnel, observations of parent activities, and document analysis, and found that school personnel's attitudes and behaviors affected the level of parent participation. School personnel conducted meetings in English in the presence of parents who did not speak English and they did not provide translation. Additionally, the school mainly relied on written communication to inform parents. Parents who did not possess necessary literacy skills were by default excluded from many school activities. Many teachers in that study reportedly felt that involving those CLD parents in school affairs was an extra burden since they believed that those parents did not have the necessary skills to participate in school affairs. On the other hand, similar to the Valdes' (1996) study findings, the CLD parents who participated in the study felt that formal schooling was the responsibility of the school. This cultural attitude caused their involvement to remain at the social level, i.e. organizing school parties. Also, similar to Gutman and McLoyd's (2000) findings discussed earlier, there were intragroup differences in participation, with Mexican parents who were raised in the U.S. participating at a higher rate than the parents who were raised in Mexico. These findings revealed the dynamic influence of parents' cultural socialization and school behaviors on school participation, which creates a disconnect between the parents' practices and school's perceptions of parents.

The studies discussed in this section offer plausible explanations for the seeming low level of CLD parent involvement, as well as a view of minority parent involvement, that rejects researchers' practice of intergroup comparison (i.e., dominant group vs. minority groups). Since the level of reported participation varied within groups in each

study, these studies evidenced the existence of intragroup differences based on contexts. These differences in behaviors do not point to deficits, but to how socio-cultural contexts such as SES status, level of education, and cultural practices may mediate CLD parents' practices at the microgenetic level of development.

School Personnel's Perceptions of Parental Involvement

The previous section pointed to the dynamic nature of parental participation as their socio-cultural beliefs and practices come into contact with those of school personnel. This section highlights research findings regarding school personnel's interpretation of parental participation.

Bezdec, Summers and Turnbull (2010) investigated professional attitudes toward partnerships with families. They interviewed and administered a scale measuring perceptions of family-professional relationships to 20 participants from four service delivery outlets: occupational therapists/physical therapists/speech-language pathologists; special education teachers; paraprofessionals; and health professionals. The results indicated that although professionals used family-centered philosophy in their responses, they still blamed families for the inadequacy in family partnerships, rather than seeing the problems as coming from the service delivery system. For example, they saw parents' low level of participation as a sign of lack of caring about their children. This view is incompatible with the philosophy of culture-centeredness that promotes openness to cultural differences and respect for parents' practices and beliefs. They failed to take parents' socio-cultural and historical contexts into account and to question their negative assumptions and their own behavior that might have affected family-professional partnerships.

Another result of the study by Bezdec et al. (2010) is that professionals had specific ideas on what the right level of involvement looked like, which the authors termed the “goldilocks” perception. Service delivery professionals did not wish for too much or too little involvement. Parents whom they saw as too involved were classified as distrustful and overbearing, while parents who did not follow through with professional recommendations and did not place the same value on the activities that professionals considered important, were considered less involved. Professionals defined the right amount of involvement as parental assistance in implementing professionals’ recommendations. In discussing parental involvement, none of the professionals acknowledged the parents’ right to disagree or opt out of following professional advice, as guaranteed under IDEA. Based on Pedersen’s culture centered perspective, this study indicates that professionals could talk the talk, but did not walk the walk that could have led to true partnership, as they did not consider the parents capable of making choices concerning their children’s education.

Joshi, Eberly and Konzal (2005) investigated teachers’ perceptions of CLD family school involvement using a mixed-method approach with 40 participants including teachers, specialists, and administrators in both public and private schools. A Likert-scale survey, as well as open-ended questions, was used to elicit their perceptions. Unlike Bezdec et al.’s study, school personnel reported other time commitments, work constraints, language, educational constraints, and parents’ difficulty in understanding school culture as factors that limited parental involvement. Even when school personnel acknowledged barriers that were beyond the parents’ control, negative perceptions of

parents persisted, since they still cited lack of parental interest as a factor that limited parental involvement.

Smrekar and Cohen-Vogel (2001) investigated CLD parents' educational experiences, their views about the value of schooling, their role in their children's education and their interactions with their children's schools by interviewing four African American, four Hispanic and two Pacific Islander parents. In preliminary discussions with school personnel, the researchers were told that that the parents "were lazy, irresponsible and apathetic when it came to school involvement" (p. 85), therefore would not respond well to participating in the study. Contrary to school personnel's perceptions, not only were the parents eager to participate in the study, nine out of 10 parents who made the final selection reported a willingness to be involved in the school if school personnel asked. The findings from these interviews support the idea that not only does a disconnect between school personnel's perceptions of parent participation and parents' practices exist, but it may also be impeding true parent-school partnerships.

In a report examining the participation of CLD parents in education, Kim (2009) concluded that parents' limited participation was due, in part, to teachers' negative perceptions of minority parents' capacity to be involved as a result of social and economic factors, as well as professionals' perceptions of minority parents' efficacy in dealing with school personnel, which has the propensity to affect their behaviors toward parents. It can be argued, then, that it is the school personnel's behavior that is acting as a barrier to parent participation. Whereas parents from the dominant group were often welcomed in the school, minority parents' attempts at involvement are often ignored or dismissed (Salas, 2004). School institutions have often failed to engage in respectful and

skilled dialogue (Barrera and Corso, 2002) with CLD parents, hence marginalizing them to the roles of spectators.

The studies in this section highlighted educators' attitudes toward parents and the potential effects such attitudes might have had on their interactions with parents. If parents feel unwelcomed and unappreciated, they will mostly likely avoid contact with the school and will show less participation. The following section further discusses the potential negative effects of professionals' attitudes and behaviors on CLD parents.

CLD Parents' Experiences with the IEP Process and Participation in the Special Education Program

CLD parents generally participate in their children's education according to their cultural-historical backgrounds (Rogoff, 2003), and their participation in the IEP process follows suit. Even when they attempt to be more involved, their efforts are often thwarted by school practices and educators' negative perceptions of these parents (Lo, 2008; Salas, 2004). Parents have reported difficulties in collaboration during the IEP process due to schools' limited understanding of family perspectives (Klingner & Harry, 2006), resulting in a failure of the schools to engage in cultural reciprocity as posited by Kalyanpur and Harry (2012). Parents have expressed mixed levels of satisfaction with the IEP process, with CLD parents reporting the highest level of dissatisfaction with the process (Fish, 2008). Research has made it evident that the IEP meeting is a source of stress and frustration for CLD parents, especially immigrant parents (Lo, 2008; Salas, 2004). The literature on CLD parents' experience with the IEP process indicates three clear overlapping themes that affect parents' participation: respect, language barrier, and low satisfaction.

Lo (2008) qualitatively investigated the experience of five Chinese immigrant parents of children with disabilities through 15 scheduled IEP meeting observations and 15 interviews. Data was collected over a 2-year period and detailed field notes were recorded. The results indicated limited interactions between the parents and the professionals, where the parents were less likely to ask questions and to initiate comments in the meetings. When asked about their preparation for the meeting, only one parent mentioned outlining the questions that he would like to discuss. The other parents' participation was more receptive, since they perceived the purpose of the meeting was for the professionals to report evaluation results, change in placement or services, or to report progress. They also expressed that they did not know the purpose of the meeting beforehand since all the meetings were designated as "team meeting." Parents requested services in 7 out of 12 meetings, but these requests were denied. One parent reported feeling overwhelmed and stressed due to too much information. Two of the participants reported disappointment and embarrassment with the ways that the professionals treated them. One mother reported that the regular education teacher made her feel incompetent by advising her to follow the school's suggestions, deterring her later from asking for IEP goal revision to indicate mastery of skills that she had noticed in her child's work at home. She was told that the evaluation methods used at school were more sophisticated than the ones that she used at home to evaluate her child. This is an example of professionals undermining the ideals of IDEA and the philosophy of true partnership by not valuing parental input and knowledge. A second parent was openly criticized and mimicked in front of other team members for being too lenient with her son. Demeaning treatments illustrated in this study are contrary to the skilled dialogue

approach (Barrera & Corso, 2003), as well as cultural reciprocity (Kalyanpur & Harry, 1999; 2012), which call for respect and cultural responsiveness.

Salas (2004) explored the perceptions of ten immigrant Mexican American mothers' experiences with IEP meetings. These participants had limited educational experiences within their country of origin and their time in the U.S. ranged from 4 to 10 years. They identified themselves as Mexicans regardless of length of time living in the United States, and described themselves as members of the poor working class. The parents reported that the school did not acknowledge their language and that they could not give input at the meetings. One mother reported that she was asked by the school to speak English when she attempted to meet with educators. Another mother who suggested the placement of a Spanish-speaking teacher in her son's classroom was told to be grateful to even have teachers in the special education program. These examples show that instead of making collaboration possible, school personnel chose to silence these women by not validating their suggestions or making them feel welcome in the school. As Kalyanpur and Harry (1996) documented, the school can create a sense of alienation that may result in apprehension when it comes to participating in school affairs. Asking non-English speaking parents to speak only in English further established how CLD parents were being left out.

Salas' (2004) study also cited lack of respect for CLD parents. One mother felt that the language used by educators and the way that they decided on her child's needs without asking for her opinion was condescending. Another parent reported feeling rushed at the meetings, since no one took time to read her rights to her in spite of the fact that she had explained her low level of English proficiency. Kozleski, Engelbrecht, Hess,

Swart et al., (2008) indicated similar findings in their cross-cultural analysis of family experiences with special education. According to their findings, although schools took charge in determining students' learning challenges, the school failed to create transparency in the rules and processes of special education assessments, placements and services.

Cho and Gannotti (2005) conducted interviews with a sample of 20 Korean immigrant mothers regarding professional supports in early interventions and special education programs. With the exception of one parent, everyone reported difficulties dealing with IEP meetings, although more than half of the parents had received training or attended workshops on how to prepare for IEP meetings and were also educated in special education rights and responsibilities. Nevertheless, educators shunned them when they demanded different goals and services from those recommended by the school personnel. This exemplifies school personnel acting as holders of knowledge, hence pushing parents into subordinate roles of information receivers, instead of collaborators. Cho and Gannotti concluded that parents in general were not being perceived as equals to school administrators and personnel in decision-making, especially if they were from different cultural and linguistic groups.

The studies presented above exhibited a failure of the schools to foster honest two-way communication with parents and to value parents during the IEP process. The schools were operating under narrow institutionalized procedures and did not create fertile ground for partnership. Considering the centrality of the IEP in service delivery to students with disabilities, it is crucial that all stakeholders have a fair chance to contribute to the creation of a plan that is in the best interest of the students, as desired by IDEA.

The school personnel's negative behaviors toward the parents in these studies acted as deterrents to true school-parent partnerships and stifled parents' later participation in the special education program. Within the culture-centered perspective (Pedersen, 1999; 2000), school personnel should demonstrate multicultural competence when interacting with parents and should respectfully validate parent input and wishes even when it is not possible to honor them. There is a saying in Haiti, "*C'est le ton qui fait la chanson.*" Translated literally, "It is the tone that makes the song," meaning it is how one says something or treats a situation that gives it meaning and makes a difference, and not the actual resolution of the problem. In other words, if professionals in the studies presented above had used Barrera and Corso's (2002; 2003) skilled dialogue approach and Kalyanpur and Harry's (2012) cultural reciprocity in their interactions with the parents, they might have felt like they were part of the process, even when their requests were not met.

Development of cultural competence and practicing cultural reciprocity in dealing with CLD parents, specifically concerning disability, is crucial to an effective working relationship. The views of people from different cultures often include narrower parameters of disability and a broader conception of normalcy than the views in the U.S. (Harry, Allen, & McLaughlin, 1995; Lynch & Hanson, 1992). In the next section, I briefly review a few prominent studies that have investigated the parameters of disabilities in other cultures.

Cross-cultural Views of Disability

Rogoff (2003) indicated that culture plays an important role in behavior as well as in perceptions. Views of disability are not excluded from Rogoff's postulation.

Researchers who have studied cross-cultural views of disability have demonstrated that views of disabilities vary among different cultures (Harry, 1992a; 199b; 1992c; Lynch & Hanson, 1992). Interpretation of the meaning of disability is influenced to some degree by the social attitudes and the historical realities of the culture from which the interpretation emerges (Ferguson, 2002). The culture of different societies dictates the meanings attached to human variations (Lynch & Hanson, 1992). The Western world has come to view as disabilities what many other cultures deem variations. When it comes to disability and its definition, studies have shown that some CLD parents see their children more holistically than the mainstream definition provided by the U.S. (Garcia, Perez, & Ortiz, 2000; Harry, 1992c; Harry & Klingner, 2006), which sees the child as fragmented and not following a “normal” path of development. Harry and Klingner (2006) documented a Haitian mother’s refusal to accept the school’s wishes to place her child in a program under the category of emotional and behavioral disorder, by arguing that there was nothing wrong with her child. The mother supported her views by pointing out the child’s high and “normal” level of functionality at home and at church. Similarly, in her earlier study with Puerto-Rican families, Harry (1992b; 1992c) found that the parameters of normalcy were much broader among the Puerto-Rican Families than for the dominant culture. For example, a mother whose child was labeled mentally retarded explained that such a label would only be “applied to someone whose competence is severely impaired or who is considered mentally deranged” (Harry, 1992b, p. 147). As this example illustrates, a child’s competence in school, which is an unnatural environment, does not always translate to parents as a deficit within the child.

According to Rogoff (2003) and Lynch and Hanson (1992), the notion of disabilities is culturally bound. Many cultures understand disabilities differently than in the U.S., where the interpretation is based on scientific concepts and the medical model of pathology (Kalyanpur & Harry, 2012). In many places, disabilities are interpreted in terms of spiritual meanings (Jacobson, 2008; Lynch & Hanson, 1992) or in terms of the individuals' contribution to their community or the family unit, and not by their limitations (Valdes, 1996). In Valdes' study, Mexican parents defined and acknowledged their children's weaknesses and limitations, yet encouraged them in areas of strength without focusing on deficits. Communities that rely on the collective efforts of the family, rather than leaning on the individualistic reliance of the Western world, assimilate the idea of a disability more easily because individuals can contribute based on their strengths while still relying on others to fill their areas of weaknesses. Hence, due to the inter-reliance among family or community members, a person with a disability may be capable of contributing to the community in other capacities that do not involve the limitations imposed by a disability. In such a community, a disability does not carry the same heavy stigma as in the Western worldview, where disabilities are seen as pathologies to be fixed.

Disabilities in Haiti. Haiti is a developing country with limited economic resources and with a past that has encouraged communal collective efforts in order to survive. In Haiti disability issues do not occupy the national center stage. Disabilities are interpreted along cultural lines, similar to Lynch and Hanson's (1992) findings with other cultural groups. Therefore, culture offers a viable framework for analyzing

dominating views and reactions to disability in Haiti. Before looking at the Haitian cultural views of disabilities, I will briefly provide statistics on disabilities in Haiti.

There was an estimated 800,000 individuals living with disabilities in Haiti in 1998 (Jacobson, 2008). However, this number is probably reflective only of people with physical and severe mental disabilities, which constitute severe mental impairment in everyday competence, since there are no statistics representing those with intellectual disabilities or cognitive impairments that affect solely academic learning (Jacobson, 2008). The overall number of people with disabilities most likely increased after the 2010 earthquake that left hundreds of amputees.

The number of children with disabilities among those attending school is estimated at 2% (Dupoux, Hammond, Ingalls, & Wolman, 2006). However the number is not disaggregated into different types of disabilities, making it impossible to estimate the percentage of children with intellectual disabilities or cognitive impairments that affect academic learning, which is of concern in this study. Additionally, because Haiti has no mandates that require testing for intellectual disabilities nor provision of an appropriate education to children who demonstrate signs of disabilities (Jacobson, 2008), there is no system in place that engages in child find, making it hard to know how many children have a disability. Consequently, many children with disabilities often drop out after multiple failures in school, or are kept at home, making it even harder to have an accurate count of children with disabilities.

Provision of services to those with disabilities is limited. Although there is a center for disabilities and a few schools for people with disabilities being operated by non-governmental organizations or the private sector (Dupoux et al., 2006), the services

provided are limited in type and quality, as well as in the number of people receiving services. Lack of mandates and services make it the sole responsibility of the family to care for the majority of people with a disability. Therefore, opportunities for parents to deal with professionals in service delivery are few, resulting in most Haitian parents having no experiences in advocating for such services.

Haitian parents' understanding of disabilities. As found among many different cultural groups around the world (Lynch & Hanson, 1992), having a disability in Haiti carries a heavy stigma. Disabilities are often associated with the supernatural world as punishments (Jacobson, 2008; Lynch & Hanson, 1992), and therefore cause for shame and secrecy. Elaborating on the Haitian view of disability is limited because very few empirical studies can be found that have investigated these views. However, I was able to gather some information through a pilot study conducted with Haitian parents regarding their perception of the IEP process and special education services that was a precursor to the current study.

Pilot Study

As advised by Strauss (1987), the conducted pilot study was intended to guide the current study. In an initial attempt to investigate Haitian parents' perceptions of the IEP process and school personnel's perceptions of Haitian parents' participation in the process, six parents, a psychologist and a counselor were interviewed regarding the level of Haitian parents' participation in the IEP process, as well as the parents' participation in their children's education. The data analysis is summarized in the following three statements: 1) parents' interpretation of disabilities, their attitudes toward education, and school personnel's expectations of parental participation negatively impacted the level of communication and understanding between the home and the school; 2) parents'

understanding of the IEP meeting and lack of knowledge about their rights negatively impacted their level of participation in the IEP meeting; and 3) cultural differences between parents and school personnel resulted in discrepancies in parents' perceptions of school's expectations and school personnel's expectations of parents.

Haitian parents' interpretation of disabilities had a major influence on their participation in the IEP process. Their interpretation of disabilities was different from the school's definition of disabilities. According to the U.S. definition of disability, it is any condition that affects student learning, including physical, psychological, emotional and other biological factors. According to the parents' definition, a disability is something that is physical and apparent. In the case of the children in this study, their disabilities were not physically apparent. Therefore, the parents had difficulty accepting that their children were labeled with a disability. Instead they interpreted the school designated disability as the result of adaptation to the school environment, level of language mastery, lack of prior schooling, lack of discipline in the school and in the home, as well as the result of normal human variance.

In addition to opposing views and definitions of disabilities, parental views of education were also different from the schools. Contrary to schools' expectations, the parents felt that it was up to the school to do whatever is necessary to teach the children. Therefore, they did not see the necessity to interfere with the schooling process. They trusted the professionals, whom they believed knew their craft and were competent to make the best decisions about their children's education. As a result, they did not see the need to monitor educators and the school.

The second theme to emerge from the data was that parents' understanding of the IEP meeting and lack of knowledge of their rights negatively impacted their level of participation in the IEP meeting. Although parents claimed that they understood the meeting, their explanation of what transpired during the meeting did not support their reported understanding. For example, none of the parents remembered the disability designation or the recommendations made at the meeting. This inability to recall exactly what happened in the meeting supported that parents did not grasp the idea behind the IEP. Additionally, their lack of knowledge about their rights under IDEA further restricted their level of participation.

The third theme from this study was that the cultural differences between school personnel and parents resulted in discrepancies between parents' expectations of the school personnel and the school's expectations of the parents. Clashes between the parents' cultural assumptions and the U.S. culture affected the level of communication between the home and the school. Although schools in the U.S expect parents to be equal partners in the education of their children, immigrant parents may not share this view. Based on their cultural frame of reference, Haitian parents believe that educators are professionals who know their craft, and therefore parents should not interfere with the process. Thus, cultural differences between school and parents resulted in discrepant understandings of parents' and professionals' roles.

Conclusion of the Literature Review

Parents' interactions with the educational institution are affected by their cultural framework, social contexts, prior experiences, and the school's treatment and perceptions of the parents. As Rogoff (2003) stated, behaviors do not happen in a vacuum but as a result of many systems (historical, social, cultural, educational, etc.) acting on the

individual. Immigrant parents often come from educational systems that are different from those in the U.S. There is also a possibility that some of them never had personal experiences or had limited experiences with formal education. Additionally, many CLD parents have major social constraints that keep them from being involved in the educational process in a manner congruent to school expectations. Upon review of the literature on parental involvement and the experiences of CLD parents with educational institutions in the U.S., I argue that it is not a lack of caring that is affecting parents' action. Instead, professionals and parents are separated by rules of behavior that are culturally and socially bound (Rogoff, 2003). Research has indicated that parents who participated in family centered planning activities before IEP meetings were more involved in the IEP process (Childre & Chambers, 2005). Miner and Bates (1997) investigated the impact of family-centered planning activities on parental involvement in IEP meetings and found that their participation increased family verbalization at the meetings. These studies suggest that the lack of active participation desired by professionals is absent, not due to a lack of caring, but parents' lack of knowledge of school expectations and norms in the U.S. The microgenetic level of development (Rogoff, 2003) that professionals want to see in parents will not be possible until parents have been exposed to the knowledge of what is expected so they can be aware of the differences between their cultural practices and the new expectations.

For the purpose of this study, I investigated the participation of low-SES Haitian parents who were first generation immigrants and who were facing similar challenges as the parents in the literature review. The foci of this study are Haitian parents'

participation in the IEP process, the factors that affect their participation, their involvement in education, as well as school personnel's perceptions of their involvement.

Research Questions

In qualitative research it is the practice that the research questions are broadly formulated, because the researcher wants to remain open to new questions and findings that may arise during the investigation, or it may even be discovered that the questions are not as salient. The following research questions were identified:

1. What are Haitian parents' perceptions of their experiences with the IEP process?
2. What are school personnel's perceptions of Haitian parents' participation in the IEP process?
3. Is there a dissonance between the perceptions of Haitian parents and school personnel regarding the expectation of parents' roles in the IEP process?
4. What accounts for any differences between school personnel's and parent's perceptions of parent participation in the IEP process? Specifically, is there evidence of cultural differences, logistical barriers, or are there other reasons for apparent differences?

Chapter Three: Methodology

This study investigated Haitian parents' participation in the IEP process and their involvement in their children's education, as well as school personnel's perceptions of their involvement. A qualitative methodology was deemed the most appropriate means of investigating the experiences and the perceptions of people involved in the lives of students with disabilities because: 1) the process yields rich, descriptive data (Bogdan & Biklen, 1998); 2) people's perceptions of events are different based on their experiences and backgrounds (Creswell, 1998); and 3) the process allows for authentic voices to be heard (Charmaz, 2006). Consistent with Creswell's (1998) definition of qualitative research as "an inquiry process of understanding based on distinct methodological traditions of inquiry that explore a social or human problem" (p. 15), this method is the best fit to investigate the experiences and perceptions of culturally and linguistically diverse (CLD) parents and the perceptions of professionals dealing with special education issues. The goal of this study is to present a picture of the participants' experiences with the special education process by presenting multiple dimensions of the issues they are confronting.

Key Concepts in Qualitative Research

Creswell (1998) cited five main philosophical assumptions that are inherent in qualitative research and that the researcher has to be mindful of: 1) the multiple nature of reality; 2) the relationship of the researcher to the phenomenon being researched; 3) the value-laden aspect of qualitative inquiry; 4) the language of research; and 5) the process of research. For the purpose of this study I adopted these assumptions to guide the research design as they dictated the high level of consciousness needed to challenge my own worldview and ensure the quality of the data.

The multiple nature of reality. In qualitative research, it is recognized that reality can be experienced and interpreted by individuals differently as a result of past and present experiences, backgrounds, values and beliefs. Thus, reality itself is seen as a relative concept when dealing with human constructs. In dealing with the subjectivity and multiplicity of reality, qualitative researchers quote the words of the participants to present data in qualitative inquiry. Furthermore, examining the multiple nature of reality requires investigating multiple sources and perspectives in order to build confidence in the findings. This will be further explained when trustworthiness in the data is discussed later in this chapter.

The relationship of the researcher to the phenomenon being researched. The researcher plays a major role in qualitative research (Bogdan & Biklen, 1998; Creswell, 1998; Eisner, 1991). As Corbin and Strauss (2008) stated, “researchers are translators of other persons’ words and actions” (p. 49). Creswell (1998) further defined qualitative research as a method whereby “the researcher builds a complex, holistic picture, analyses words, reports detailed views of informants, and conducts the study in a natural setting” (p. 15). Because the researcher engages in meaning making, interpretation and representation, credibility in the results of the study has to be assured by making his or her position clear by exposing personal biases and assumptions that may influence the inquiry process (Charmaz, 2006).

The researcher’s clarification of biases and assumptions can be accomplished through a discussion of the researcher’s perspective as being either an insider (*emic*) or an outsider (*etic*) (Van Maanen, 1988). Considering that the population being investigated in this study is a particular Haitian group (i.e., low education level and low socio-

economic status (SES)), I can assume both the *emic* and the *etic* perspectives. I am a Haitian woman with educational experiences in Haiti and in the U.S., an educator in the U.S., and a parent who deals with the public school system. Therefore I consider myself as having an *emic* perspective, both socially and culturally, in the different aspects of the educational process from both the parent and educator perspectives. My *emic* connection to the parents stems from being raised by first generation immigrant Haitian parents who had no formal education, who lived in the same neighborhood where the research sites are located, and who faced the same socio-cultural challenges as the participants. I am familiar with the discourse of the community, its belief systems concerning socio-cultural issues, its views on education, and its members' ways of dealing with the school system.

On the other hand, I also hold *etic* perspectives. First, my professional experiences dealing with students with disabilities or with parents of students with disabilities are limited. Professionally, my experiences have not extended to directly evaluating students, deciding on programs, placing students with disabilities in programs, or working with families in providing special education services. I also do not have direct experiences with a child with a disability. Second, although I have been working with parents from the same population that was included in this study for over ten years, my educational background excludes me from claiming full membership. I cannot make any claim of similarity in current socio-economic background as a result of my advanced studies and acquired social status. However, I attempted to maintain a certain level of objectivity while collecting, analyzing and interpreting the data by constantly reflecting on my thinking and assumptions through journaling and regular debriefing sessions with my advisor and peers in order to minimize my biases (Patton, 2002; Pelias, 2011). I also

used additional techniques, such as establishing good rapport with the participants before interviewing, and using member checks to verify the data to assure credibility in the results and to keep personal biases in check.

The value-laden aspect of inquiry. Clearly related to the first two assumptions is the value-laden aspect of inquiry. The interpretation of data is heavily influenced by who is telling the story and who is writing the story. Individuals interpret and react to events differently based on their worldviews (Creswell, 1998). The values and beliefs of the interviewees and the interviewer both influence the written report. As stated by Patton (2002), qualitative research is an art, which is carefully crafted by the researcher to present a specific reality. Being the crafter of reality, it is imperative that care is given to interpretations through analysis of the researcher's biases and assumptions in reporting findings in qualitative research.

Working within the parameters of this assumption, certain measures were taken in the design of the study in order to build confidence in the data since the researcher has the responsibility of ensuring the veracity, applicability, and consistency of the research findings. In qualitative research, this is done by demonstrating trustworthiness of the data. To assure trustworthiness, the following strategies suggested by Padgett (1998) were implemented. First, I collected data in natural settings, such as observing IEP meetings at the schools, interviewing parents in their homes, and meeting with each participant multiple times to develop rapport and to check interpretations. Second, the data was triangulated by using observations and interviews as data collection methods. Furthermore, to establish trustworthiness, based on Lincoln and Guba's (1986)

suggestions, the following factors were established: credibility, transferability, confirmability and dependability.

Credibility. Credibility is the extent to which the data is convincing enough to be believed by the readers (Lincoln & Guba, 1986). To establish credibility, the data was further triangulated through the combination of several techniques designed to examine the variables of interest (Patton, 2002). Combining different data sources helped overcome weaknesses or biases that may be inherent in using a single data source. Triangulation can occur at three different levels: 1) data triangulation, which involves time, space, and people; 2) theory triangulation, which consists of using more than one theoretical scheme; and 3) methodological triangulation, which involves more than one method. For the purpose of this study, I triangulated the data with parent interviews, school personnel interviews, and meeting observations. As a result, information observed in the meetings can be corroborated with data from the interviews. Parents were also observed at home, which presented a different type of behavior from that observed at the meetings.

Additionally, credibility of the data can be established through the credibility of the researcher, which is dependent in part on training and experience (Patton, 2002). Prior to my doctoral studies, I acquired broad experiences in qualitative data collection by working for 10 years on two multimillion-dollar research projects as a researcher, collecting data through observations and interviews, analyzing data, and participating in report writing and writing for publications. Both projects included Haitian participants and one was an education-based project. Moreover, I had conducted Haitian parent interviews and school personnel interviews as part of a smaller project investigating

Haitian parents' and Haitian educators' perspectives on the educational system in the U.S. and in Haiti, as well as their children's experiences in the U.S. school system. Additionally, I have spent the four years of my doctoral studies collecting and working with qualitative data.

Confirmability and dependability. Confirmability refers to the internal coherence of the data in relation to the findings, interpretations and recommendations; and dependability refers to the stability of the findings over time (Denzin & Lincoln, 1994). An audit trail can be used to accomplish confirmability and dependability simultaneously (Lincoln & Guba, 1985). For this study, a colleague who demonstrated her understanding of the research process and coding method analysis followed the trail, starting with the transcriptions and ending with the substantive theoretical statement. Differences in our perspectives were resolved through discussions. It was only when the colleague (auditor) and I reached overall agreement about my analysis that I felt satisfied that my study was sound with respect to the findings and conclusions.

Transferability. Transferability is the findings' applicability in other contexts (Lincoln & Guba, 1985). This was accomplished by the provision of "thick description" of the data. I was mindful of the environment in which the data was being collected and attempted to record all occurrences, small or big, that were observed and heard, which provided a large amount of raw data. Well-described events ensured that the data could be well situated in a particular setting, and will help the reader to decide whether the data can be transferred to other situations.

The language of research. Researchers reporting on qualitative inquiries typically write in a literary style, using their personal voice as well as that of the

participants. Using personal voices, such as the first person pronoun, produce a narrative that is engaging and emotionally appealing (Patton, 1990). Qualitative researchers mostly present their findings in the form of a story, and the informant's words are central to the reporting as contrasted with the traditional impression of a disembodied voice of the researcher (Van Maanen, 1988). Terms take meaning based on how they are used by the participants; and the ways that they are used are important in telling the story. The informants are no longer distant, but are present in the study through the use of their words to illustrate the findings.

The process of research. Qualitative researchers employ an inductive logic to study a topic within its context. The goal of such an inquiry approach is to discover or understand social phenomena. While it is not possible to approach any question as a “blank slate,” qualitative researchers seek to counter their preconceived notions by developing a habit of self-critique. During data collection, qualitative researchers seek to behave as if they do not possess prior knowledge of the participants' experience. They try not to assume anything, and they ask participants for detailed explanation. For example, in their research with dying patients Glaser and Strauss (1971) used research questions that were open-ended and non-dichotomous in nature (e.g. “what are the emotions experienced by dying people,” instead of “are dying people angry”).

Furthermore, consistent with the inductive nature of qualitative inquiry, the researcher remains open to all possibilities throughout the process, from the formulation of the questions to the conceptualization of a theory. Such openness is mostly apparent in the analysis of qualitative data. The early analysis of qualitative data starts with generating open codes followed by the development of categories and themes, and then

ends with the generation of a theory or theories that emerge from the data, independent of prior theories. Additionally, the context within which the phenomenon is expressed plays an important role in qualitative inquiry. Providing specific descriptions of the context is a crucial element that helps the reader to situate the research and to evaluate under what conditions certain features of the phenomenon were expressed.

These five philosophical assumptions are inherent in all qualitative studies, and were used to conceptually guide all the steps of the process, from the beginning of the study to the writing of the findings and conceptualization of a theory.

Research Context

This study was conducted in two elementary schools in a large urban school district in South Florida. During the 2012-2013 school year, the ethnic makeup of the student population in the school district was 65.9% Hispanic, 23.9% Black (of which 9.4% of the Black population were Haitian, based on district data from students' home language reports), 8.3% White Non-Hispanic, and 1.9% Asian/Native American and others. Haitian Creole was second to Spanish as the most used foreign language by students in the district. Within the district, 24% were designated as English language learners (ELL), 14.8% were enrolled in special education classes, and 73% of the students participated in free or reduced lunch programs. The participating schools were selected based on their large percentage (at least 70%) of students with Haitian backgrounds. Consistent with recent immigrant patterns of settlement, those schools with a large percentage of Haitian students are located in low SES neighborhoods with limited social resources (Marcelin & Marcelin, 2001; Stepick, 1998). Three schools were originally selected and approved for the study: Howard C. Elementary, Golden Stream Elementary, and Red Oaks Elementary. These three school names are pseudonyms. The

three sites are located within a five-mile radius of each other and are heavily populated by students of Haitian descent. Table one summarizes the schools' demographics, which are similar, except for Golden Stream Elementary, which is more diverse than the other two schools as a result of its language magnet program that allows students outside of the school's boundary to attend the program.

Gaining Entry

The process of gaining entry into the field is crucially important in qualitative research since relationships affect the quality of the research. Before submitting the research proposal to the University of Miami Internal Review Board (IRB) for approval, I sent an introductory letter to each principal to request a meeting to explain the study. Within a week I followed up with a visit to each school. I met with the principals at Howard C. and Red Oaks, and the assistant principal at Golden Stream. They all agreed to allow me to conduct the study upon approval by the school district. Upon the IRB and the school district's approval of the study, I met with the principal or assistant principal at each school to request access to the school personnel to solicit their participation in the recruitment process. All three schools referred me to the exceptional student education (ESE) teacher as the contact person. The referred ESE teachers at all three schools were asked to notify me of upcoming meetings and to send home the parent invitation letter along with the IEP meeting notification. I asked the psychologist and the staffing specialist at Howard C. to also notify me of meetings, as well as the psychologist at Golden Stream, who also served Red Oaks. I also sought the principals' permission to invite other key players at the meetings to participate in the study. I did not solicit the help of the counselor at Golden Stream because the assistant principal asked me to go through her and the ESE teacher for all interactions.

Table 1. School Demographics

School	Population	% Black	% Haitian within the Black%	% Hispanic	% white	% Other	% On Free/reduced Lunch
Howard C.	548	91	78	8	*	2	94
Golden Stream	433	70	71	26	2	2	86
Red Oaks	439	84	81	15	*	4	93

*Less than 1%

Recruitment

I was able to recruit participants from two of the three selected schools: Howard C. and Golden Stream Elementary. The third school, Red Oaks Elementary, was problematic from the start. Setbacks from administration slowed down entry into the field and the ESE teacher made data collection impossible through her explicit lack of cooperation. When it became evident that I would not gain access to parents at Red Oaks, I had no choice but to give up my intention to include this school.

Howard C. Elementary. Recruitment at Howard C. was facilitated by my personal relationship with the school and the ESE teacher. First, I had worked at the school as a research assistant for three years prior to collecting data and had attended numerous IEP meetings during that time. I also conducted a pilot study as a precursor to the current study at the school a year before this study. Moreover, I developed close relationships with both the ESE teacher, who always called me to notify me of last minute meetings, and the community involvement specialist, who was in charge of making sure the Haitian parents attended the meetings. I also received support from the security guard at the school who would call to notify me when he saw parents signing in to attend IEP meetings. As a result of that network, I was able to recruit five of the seven families in the study from Howard C.

Golden Stream Elementary. The assistant principal at Golden Stream was in charge of initial IEP meetings and was, therefore, my main contact. Upon presenting her with the research approval letters from the university and the school district, the assistant principal shared a list of upcoming initial IEP meetings, and referred me to the special education lead teacher at the school to provide me with the information on IEP annual review meetings. The teacher, however, was not very cooperative. After four visits, she

finally provided me with a few dates for upcoming meetings that were three to four months away. Because the meetings were so far away, meeting times were not yet set. As we approached the dates, I could not get in contact with her to confirm the meetings. As a result, I was not able to collect data from IEP annual review meetings from Golden Stream Elementary.

There were other issues that made the recruitment process a difficult one at Golden Stream. The IEP meeting attendance guidelines at that school seemed to be more restrictive than those at Howard C. Once the staffing specialist and the psychologist at Howard C. saw the approval letters from the university and the district they had no objections to my attendance. The experience was different at Golden Stream, however, as evidenced by my first attempt to attend an IEP meeting. After obtaining consent from the parent, the staffing specialist refused me entrance to the meeting, stating that her supervisor had not informed her that I would be at the meeting and that the parent had not been notified in writing prior to the meeting. After consulting with my advisor, I proceeded to interview this parent since my short interaction with her during the consent process had already offered rich data and the parent was disappointed to learn that she could not participate in the study.

Two months later, the staffing specialist allowed me to attend two meetings. However, only one parent from these two meetings participated in the study, as I was not able to reach the other parent after scheduling the interview many times. Consequently, parent data from Golden Stream included in the analysis was comprised of one meeting observation and two sets of parent interviews.

Parent recruitment. The psychologist, the assistant principal or the ESE teacher usually notified me of upcoming meetings. Upon arrival on the day of the meetings, the assistant principal, the staffing specialist or the special education teacher would introduce me to the parents and ask the parents for permission for me to attend the meeting. All parents who were asked for permission agreed. While the staff prepared for the meetings, I introduced the study to the parents and gave them a copy of the invitation letter. Upon verbal agreement to participate, I collected their contact information. Some parents consented to participate in the study right after the meetings and others were scheduled to sign the consent form at a later date.

School personnel recruitment. Following the IEP meetings, I approached the key players at the meeting with a letter of invitation asking them to participate in the study. After a brief explanation of the study, if the school personnel demonstrated interest, I collected their contact information and scheduled a convenient time to sign the consent form and conduct the interview. During consent, the study was again explained to them and I answered their questions. Among those invited were the psychologists, counselors, exceptional student education (ESE) teachers, and staffing specialists. An additional member of the school personnel, the ESE parent liaison specialist, was also invited. I met the ESE parent liaison specialist while working on a research project at a public pre-school unrelated to the current study. She was the contact person who helped coordinate parent interviews that I had conducted at the pre-school. During the meeting at the pre-school, I realized that she also worked at the schools where I was collecting data for this study. Because of her Haitian background, her experiences of having a child

with a disability, and working with Haitian parents as a special education advocate, I invited her to participate.

The parent liaison service was created by the school district's Department of Special Education to help bridge the school to the homes of students participating in special education programs. This service offers training, information on resources and support to parents of students in special education programs. The role of the ESE parent liaison is to assist parents with educational issues by providing assistance in communicating with school personnel, information on parents' rights under IDEA, specialized workshops related to special education, referral to community resources, and other support services. The school district has a total of three ESE parent liaison specialists.

I did not recruit the counselor at Howard C. because she was a recent post-secondary education graduate and was employed at the school for only two months when I started the study. She had no experience participating in IEP meetings and was not confident she could truly discuss Haitian parents' participation in IEP meetings.

Participants

Two groups of participants (seven families and seven school personnel) represented the primary stakeholders of the IEP meetings. The first group, the parent population, consisted of first generation Haitians (parents born in Haiti) with a child who was attending elementary public school and who was in the process of being placed or had already been placed in a special education program. First generation Haitian parents were chosen because of the possible intercultural components that might have influenced their behaviors concerning their school participation. The participants in the second group, composed of school personnel, were chosen because of their "insider"

perspectives as school professionals and their possible “outsider” perspectives on cultural and social norms of Haitian parents’ involvement in school settings. Being an outsider or an insider is complex. Haitian educators can be considered as both insiders and outsiders. For example, although three of the seven school personnel were Haitians, they too can be outsiders to the parents’ contexts as a result of their SES, their level of education, and their earlier experiences in Haiti. From the school personnel group, I specifically invited the counselors, psychologists, ESE teachers and staffing specialists as a result of their direct involvement with parents and students during the IEP process. There were 3 or 4 such key personnel present at each initial IEP meeting. The annual IEP reviews often had less personnel present, with most of the reviews being conducted by the ESE teacher. Together, the two participant groups provided a holistic picture of the roles that parents play during the IEP process, as well as their involvement in the school environments during their children’s enrollment in special education programs.

Parent participants. Seven families, two from Golden Stream and five from Howard C. for a total of 8 parents, participated in the study. They included six mothers, a grandmother, and a father who attended the meeting and was interviewed with his wife. Excluding the grandmother, the average age of the parents was 38 and they were all first generation Haitian immigrants (born in Haiti) and the participating children were born in the U.S. They all worked at low paying labor jobs, had been in the U.S. for an average of 14 years, and had an average education level equivalent to sixth grade. See table 2 for the parents’ demographics.

School personnel participants. The school personnel group included two psychologists, one ESE teacher, one ESE liaison specialist, a speech/language therapist,

and two general education teachers. Four of the school personnel were from Howard C., two from Golden Stream and one from the district. Of the seven school personnel who participated there were two males and five females, of which three were Haitian born females, two were White Americans males, and two were African American females. Their work experience in education ranged between one to 25 years, with the average being 14 years. See table three for more information on school personnel's characteristics.

Data Collection

Two planned data sources were utilized in this study: meeting observations and interviews. There were two types of IEP meetings: initial IEP meetings and IEP annual review meetings. Initial IEP meetings are the first placement meetings in special education programs, and IEP annual reviews consist of reviews of students' progress in special education programs to determine if adjustments in services are needed. Meeting observation data was produced from attending IEP meetings and recording detailed descriptions of activities, decisions, behaviors, and interactions of the people present at the meetings. Parent interviews consisted of individual meetings with the participants to elicit their opinions, feelings, knowledge and perceptions about their experiences at the meeting and about their children's education in general. Interviews with school personnel elicited their knowledge and perceptions of Haitian parents' participation in the IEP meetings, in special education programs, and in school in general.

In addition to the collection of the planned data, informal conversations were also included in the data set. Informal conversations are those that dealt with the parents' experiences with schooling and did not include other conversations that had no

Table 2. Parent and Student Demographics

Parent	Gender	Age	Level of education	Employment	Years in the U.S.	Child	School	Gender	Age	Grade	Disability Category
Fedeline	F	40	11	Nursing Home Assistant	12	Mark	Golden Stream	M	10	5	Other health impairment
Clarissa & Fred	F	39	5	Supermarket Restaurant Cook	12	Norla	Howard C.	F	6	K	Speech/language*
	M	41	6		10						
Salina	F	60	0	None	20	Jacob	Howard C.	M	6	1	Speech/language
Karla	F	32	5	Fast Food	8	Max	Howard C.	M	5	PK	Speech/language
Claudette	F	39	7	None	18	Mary & Harry	Howard C.	F	9	3	Speech/language SLD**
								M	10	5	
Nadine	F	39	5	Fast food	19	Jamisha	Howard C.	F	12	3	SLD
Sheila	F	33	11	Hotel Housekeeper	12	David	Golden Stream	M	10	5	SLD

*Speech language impairment

**Specific learning disabilities

association to the research. Informal conversations took place with parents and school personnel over the telephone or during impromptu meetings at the schools. For example, I met Salina often at the school because she was called almost every day to pick up her grandchild. She always engaged in conversations about her frustration with the school for calling her so often. Detailed notes were written immediately after the conversations. Tables 4 and 5 display the types of data collected from parents and school personnel respectively.

Parent data. Planned data collection for parents was carried out in three phases for each family (see table 4). The first phase, consisting of single meeting observation per child, included seven IEP meeting observations (two initial IEPs and five annual reviews). Observations of IEP meetings were recorded in the form of detailed field notes (Patton, 2002), which provided information on how all participants interacted during the meetings as well as decisions made. These observation notes also served as guides during the interviews, since references could be made to particular aspects of the respective meeting. During the meetings I participated mostly as an observer (Patton, 2002), although at three of the meetings I took an active role when asked to translate for the parents. Parent interviews consisted of individual meetings with the participants to elicit their opinions, feelings, knowledge and perceptions about their experiences at the meeting and about their children's education in general.

The second phase of the study consisted of one-on-one interviews. Except for two interviews that were conducted at the schools (one parent was interviewed the same day of the IEP meeting in the schoolyard and another parent was interviewed in the teacher's lounge after school hours a week after the interview), all the other interviews

Table 3. School Personnel Demographics

Educator	Ethnicity	Gender	School	Position	Level of education	Grade	Years in Education
Small	African American	F	Howard C.	ESE teacher	B.S.	K-5	20
Jordan	African American	F	Howard C.	Speech/language therapist	B.S.	PK-5	25
LaCross	Haitian	F	District	ESE Liaison Specialist	A.A.	K-12	5
Dion	Haitian	F	Golden Stream	Psychologist	M.A.	K-5	17
Costa	Haitian	F	Golden Stream	General education teacher	B.S.	5	9
Olden	White American	M	Howard C.	General education teacher	B.S.	K	1
Horseman	White American	M	Howard C.	Psychologist	PhD	K-5	22

were conducted in the parents' homes. Each interview lasted between 30 and 60 minutes and was audio-recorded. Parents had the choice of being interviewed in English or Haitian Creole. All parents chose Haitian Creole, except for one who used the two languages interchangeably. The interviews were open-ended to encourage participants to reflect in depth on their experiences (Patton, 2002).

Using Patton's (2002) guide on qualitative interviewing and the findings from the pilot study mentioned in chapter two as the blueprint for this study, an interview guide comprised of open-ended non-dichotomous questions was devised for the parent participants. Although I had a list of questions, all of which I asked, I followed the lead of the respondents and asked additional questions as needed. The parent interview protocol is included in Appendix B.

The third phase of the study consisted of a more focused second interview. Upon review of the first interview transcripts, participants were contacted by telephone to schedule the second interviews. Questions for the second interviews arose from the first interviews for the purpose of clarification or to deepen understandings of topics that were introduced in the first interviews. At the end of the second interview with individual participants, if new information was revealed in previous interviews with other participants, I asked subsequent participants if they have had similar experiences, using the *illustrative example format* presented by Patton (2002). These types of question can help establish neutrality and reduce embarrassment, by letting the interviewee know that I have already heard what they have to say, and therefore could not be shocked by their disclosure. For example, to encourage some participants to make further disclosures on sensitive topics, like supernatural beliefs, these questions were framed as follows, "Some

Table 4. Parent Data

Parent	School	Type of meeting	Observations	Interviews	Informal Conversations
Fedeline	Golden Stream	Initial IEP	1	2	1
Fred/Clarissa	Howard C.	IEP annual review	1	2	4
Salina	Howard C.	IEP annual review	3*	2	6
Karla	Howard C.	IEP annual review	1	2	1
Claudette	Howard C.	IEP annual review	2**	2	1
Nadine	Howard C.	IEP annual review	1	2	1
Sheila	Golden Stream	Initial IEP	0	2	1

* One meeting was an IEP annual review and the other two were follow up meetings to resolve disagreements the parent was having with the school concerning her child's behavior.

**This parent has two children in the special education program

people have mentioned having the experience of...have you experienced something like that?" I chose to collect demographic data during the second interview since asking parents about sensitive topics (i.e. their level of education, age, etc.) might have intimidated some of the parents.

School personnel data. School personnel were interviewed individually on their experiences with Haitian parents during the IEP meetings, parents' participation in the special education programs, as well as parents' involvement in their children's education. I used the parents' interview guide to devise the school personnel's interview guide, which can be found in Appendix A. One interview was conducted with each participating member of the school personnel (see table 5 for school personnel's data).

Summary of Data Collection

In summary, the data set included a total of seven IEP meeting observations (two initial IEPs and five annual reviews), two other meetings relating to possible reevaluation for other special education programs, 14 parent interviews (two interviews per family), seven school personnel interviews (one per individual), as well as 15 parent informal conversations, 13 school personnel informal conversations, 3 informal classroom observations, and numerous memos and field notes that were written based on observations made at the school sites or at the parents' home.

All participants were subsequently contacted for member check or to further clarify information that they had previously shared. Member checking was made either by telephone or in person by providing each participant with a summary of their interview(s) and asking each individual if the summary was representative of the information that they shared.

Table 5. School Personnel Data

School Personnel	School	Type of meeting	Interviews	Informal Conversations
Small	Howard C.	IEP annual review	1	5
Jensen	Howard C.	IEP annual review	1	0
LaCross	District	IEP annual review	1	2
Dion	Golden Stream	Initial IEP	1	2
Costa	Golden Stream	Initial IEP	1	0
Odon	Howard C.	IEP annual review	1	3
Horseman	Howard C.	IEP annual review	1	1

Data Analysis

A grounded theory approach was used to analyze the data. Grounded theory has been successfully used in the study of people's experiences with special education programs. For example, Klingner and Harry (2006) used grounded theory to analyze data from an ethnographic study that investigated disproportionate representation of minority students in special education, which explored the experiences of CLD parents and students, as well as institutional practices and school personnel's behavior toward minority parents. Bezdec et al. (2010), discussed in chapter two, also used a grounded theory approach to investigate professionals' attitudes on partnering with families of children with disabilities. Similarly, I used a grounded theory approach in the pilot study I conducted as a precursor to this study, and preliminary findings shed light on the

experiences of Haitian parents with the IEP meeting. Given the uniqueness and the complexity of the special education process, coupled with the complexity of CLD parents' lives, I chose grounded theory to analyze the data from the current study.

The core of grounded theory research is the generation or the emergence of a theory or theories closely related to the phenomenon being studied (Strauss & Corbin, 1990). This means that any theory arising from such an approach should be grounded in data from the field, and the data must be systematically collected and analyzed.

Consistent with the qualitative approach elements, such as purposive sampling of families and school personnel, inductive analysis of data, development of a theory based on the data, and a continually emergent design (Lincoln & Guba, 1985) were employed.

All interviews were transcribed, and those conducted in Haitian Creole were translated into English. Interviews with parents and school personnel, informal conversations, observation field notes and memos were entered in ATLAS ti, version 6.2 (a packaged software), then analyzed inductively using a grounded theory framework, as put forth by Charmaz (2006), to identify patterns in the data by means of thematic codes. A constant-comparison method whereby all codes were constantly compared to each other and analyzed into increasingly abstract categories and themes was used (Harry, 2005). This process involved four steps: open coding, focus coding, category development, and theme development.

Initial coding. During initial open coding, meaningful segments of the data were assigned labels that reflected the raw data as closely as possible. A colleague and I coded the first interview independently and then compared our codes. Through discussions, we reached consensus on the most appropriate codes for each segment of coded data. The

same process ensued for two more interviews to establish intercoder consistency. After coding the third interview and reviewing it together, I felt comfortable enough to code the remaining data. After completion of initial coding, the colleague and I worked together to eliminate duplicate codes, and this process yielded 320 codes.

Focused coding. In the second step, these initial codes were compared and refined through focused coding. With the help of my colleague, open codes were analyzed for commonalities and similar codes were then grouped together. Constant comparison was used to determine the uniqueness of codes within groups. Unique codes were kept and others were subsumed under unique codes that were similar. This process resulted in 213 refined and distinct open codes. My advisor then reviewed and discussed the open codes for soundness. Upon this final review, the initial codes were reduced to 190 refined and distinct codes.

Categories. This third step involved grouping the refined codes into categories (Strauss & Corbin, 1998). A category is a unit of information composed of events, instances and happenings that form concepts. Through collaborative analysis with my colleague, I constructed 25 categories by grouping the refined codes based on commonalities. Upon further analysis of the categories with my advisor, five of the categories were subsumed and a total of 20 categories were kept.

Themes. The categories were examined for similarities and differences and were arranged into six initial themes as posited by Harry, Sturges, and Klingner (2005). According to Harry et al., themes are developed through the summarizing of each category to find the underlying patterns and meaning (Denzin & Lincoln, 2000), which are then used to group categories under themes. In line with the recursive nature of

qualitative research, after further discussions with my advisor, two of the themes were subsumed for a total of four emergent themes. The emergent themes were formulated into four summative statements, with each theme corresponding to a summative statement. The summative statements helped me make sense of the data and were my first attempt at developing substantive explanatory statements (Bogdan & Biklen, 1998; Strauss & Corbin 1990). Table 6 illustrates the data analysis path from categories to themes to summative statements. Open codes were not included due to their number. To provide a substantive explanation to the research questions and formulate an emergent theory, the data from parents and school personnel was cross-analyzed to find differences and similarities within and across categories. I compared the perspectives of parents and school personnel to explore connections and instances of occurrence among and across these two groups in trying to understand links between the two perspectives (Adelman, 2009; Strauss & Corbin, 1990). Illustrative quotes were sought from the original transcripts to represent major themes, as will be seen in the next chapter, where the findings are reported under the four themes.

Table 6. Analysis Map

CATEGORIES	THEMES	SUMMATIVE STATEMENTS
Defining disability Experience with disability Nature of disability Rejection of disability	Social and cultural construction of disability	The culturally constructed meaning attached to disability, parents' lack of experiences with disability, and the nature of their children's disabilities, led parents to reject disability designations, hence limiting their participation in the IEP process
IEP process procedures Limited knowledge of IEP Knowledge of rights Cultural factors affecting participation Logistic factors affecting participation Cultural factors affecting expectation	Parental role and limited participation in the IEP process	School personnel's insufficient scaffolding of the technical aspects of the IEP process coupled with cultural and logistical features of parents' lives resulted in limited parental knowledge of the IEP process, which reduced parent participation in the IEP process.
Entrusting the system Trust Mistrust Satisfaction with IEP meeting Dissatisfaction with school	Parents' decreased trust in educational system	Parents' weakened level of trust in the system after a disability determination affected their collaboration with school personnel, which dictated their level of satisfaction with the meeting and the school system in general.
Educators' views of participation Parent participation at home Parent participation at school Parents' view of education	School personnel's misperceptions of parental involvement	School personnel's failure to recognize parental involvement practices as defined by parents created a disconnect between school personnel's expectation and parents' perceptions of the meaning of involvement.

Chapter 4: Findings

This study investigated Haitian parents' participation in the individualized educational plan (IEP) process and their involvement in their children's education, as well as school personnel's perceptions of their participation. I used an inductive process to analyze the data as recommended by the grounded theory approach. Since the data is dense, I have decided to report the findings in a more natural way, consistent with grounded theory, which demands that the researcher allows the theory to emerge from the data instead of simply answering a priori questions. Although four specific research questions were devised to guide the study, the scope of the data and the thematic analysis extend beyond the initial guiding research questions. Therefore, I will not attempt to answer the questions discretely, since the answers to those four questions are inextricably interwoven throughout the four themes in the analysis. Rather, I will report the findings in four sections reflecting the four key themes as they relate to Haitian parents' participation in the IEP process, their involvement in their children's education, and school personnel's perceptions of their involvement. The four themes are: 1) social and cultural construction of disability; 2) parental role and limited participation in the IEP process; 3) parents' decreasing trust in the educational system; and 4) school personnel's misperceptions of parental involvement. At the end of the chapter, a substantive theoretical statement is presented.

As described in chapter three, the findings reported in this chapter resulted from four types of data: IEP meeting observations, interviews with parents and school personnel, informal conversations with both school personnel and parents, and

spontaneous and informal observations of school and classroom settings. The different types of data were interwoven in the results to illustrate each theme.

Theme 1: The Social and Cultural Construction of Disability

Parents' participation in the IEP process was largely guided by their definition of disability, which is culturally defined and socially constructed, whereas school personnel's definition reflected the official U.S. interpretation of disability. The definition provided under IDEA and utilized by school personnel when discussing disabilities covers all school-aged children who fall within one of the 13 specific categories of qualifying conditions (i.e., autism, deaf-blindness, deafness, specific learning disabilities, speech or language impairment, emotional disturbance, traumatic brain injury, visual impairment, hearing impairment, orthopedic impairment, other health impairments, multiple disabilities, and intellectual disabilities). These categories represent a broader spectrum in determining disabilities than is included in the parents' definition of disability. Except for the one case of other health impairment, the children's disabilities were all in the milder "judgmental categories," which are "categories in which the problem is often identified first in the school context and the disability diagnosis is typically without confirmation of an organic cause" (Donovan & Cross, 2002, p. 1). These categories did not fit with the parents' understanding of disability.

Definition of disability. The way the Haitian parents in this study defined disabilities was consistent with the commonly accepted definition of physical or obvious mental/developmental disabilities. All parents first offered a definition of disability that was associated with physical manifestation. As seen earlier in table one, the children's disabilities included speech or language impairment, specific learning disabilities, and other health impairments. The school was in the process of evaluating one of the children

for emotional disturbance and another one for specific learning disabilities, although both children were already receiving services for speech or language impairment. The children's disabilities fell under mild disability categories and were not necessarily discernible by lay people. Only through further discussions did parents consider other forms of disabilities other than physical disabilities.

Physical disabilities. For all the parents, disability was defined by its severity and visibility, like in the cases of physical disabilities or severe mental disabilities that affect basic functioning. Clarissa, whose child was receiving services under the language or speech impairment category and who was being reevaluated for specific learning disabilities, provided the following definition:

It means the person is on his last leg and is not doing well at all, because when they say that someone has a disability, most often the person is crippled or cannot speak, for example. They don't pay attention to them, they are set aside.

Fred, her husband and the only father in the study, added, "When they say that a person has a disability, it means that the person cannot do anything at all for himself. He is crippled. He sits in a corner and cannot do absolutely anything by himself." Salina, whose grandson was receiving services under the language/speech impairment category and who was being considered for placement under the emotional disturbance category, explained that being "disabled is like a person who is missing an arm or a leg. Someone that is crippled is what we call a disabled. ...Crippled kids are the ones that are carried in wheel chairs and people have to do things for them."

Disability was defined strictly by its physical manifestations or its ability to prevent the child from functioning in their social environment, i.e., disability was the lack of a person's physical ability to contribute to his immediate community.

Cognitive disabilities. Cognitive disabilities, unless manifested by gross developmental deficits, were not given much consideration. Nadine, the mother of a girl who was repeating the third grade for the third time, and who had initiated her child's evaluation by contacting the school to question why the school had not done anything concerning her child's academic failure, said, "To me I thought it [having a disability] meant a retarded child, you know. A disabled child is a child who is not able to understand at all." She explained that her child was able to understand and function in everyday life; therefore she could not have a disability. Those parents' definition of cognitive disabilities was equated to severe cognitive dysfunctions that are obvious, and not those that may be found in the mild range, which can still interfere with school learning. The following statement by Salina typified the parents' view of cognitive disability as total inability to functions in one's environment:

If a child can leave here [the apartment], buy you two gallons of water and bring them upstairs, he is not handicapped. I don't have a handicapped child. He picks up a broom and is able to sweep the house. In the morning he wakes up and ... goes to the bathroom to brush his teeth. I don't have a handicapped child. I have a child that is rowdy.

The concept of learning disabilities posed a challenge to the parents because it was not part of their schema. They would have never conceived their child's learning difficulty in school as a disability. Clarissa explained, "The child needs to have two things. If the child can hear and the brain is fine, she can learn." Sheila, the mother of a boy with a learning disability, was first introduced to the concept at her son's IEP meeting:

I didn't think there was disability for learning; I didn't know that until I went over there. That's where I learned it. I thought disabled meant when you can't walk, when you can't feed yourself, when you can't bathe yourself. That's what I thought. Right then they say it, then I understand. ...I thought, 'my son is not disabled. So then it must be for learning.'

She further explained that people who could not learn were said to be “hard headed” in Haiti, but nothing that requires special attention from the government or educators.

Sheila said, “...When you can’t learn they don’t think of it like that. They think in a different way, you know. When a child can’t learn, how do they call that in Creole? [They say] the child has a hard head (laughing).”

Emotional disturbance. Parents also had difficulties understanding the type of disability that often manifests itself in poor behaviors. They could not reconcile the child’s unacceptable behaviors in school with a possible disability. Fred expressed his disagreement with the school’s assessment of his child’s behavior in the statements below:

Like saying that she is a child that is not right in the head, that she is crazy, no, she [the mother] won’t sign, because she [the child] is right in the head. She is a child who likes to play. It’s not that something is wrong with her head. When she is here, she is normal. She likes to play and watch TV. She is normal. She is not a child that has a problem.

His wife further explained:

Her only problem is with sitting still. She does not want to stay put. She is always running about. And you know in this country whenever the child will not sit still in class, they follow her to see what is wrong. The daycare tested her hearing to see if she was unable to hear. They performed test on her and found her to be normal.

These parents equated the child’s poor behavior with lack of maturity and normal child development. Their child’s ability to perform everyday tasks at home was an indication of normalcy.

The school personnel’s views of the children were very different from that of parents. What the school saw as emotional disturbance, the parents interpreted as rowdiness associated with immaturity that is part of normal childhood development.

When asked to explain or define disability, Karla, a mother with two children with

developmental delays, used an example of someone with severe disabilities to explain what she considered a person with disabilities:

He was not unruly...He was always doing strange things like jumping and weird other things... he can be sitting there and all of a sudden he jumps up and starts making noises, like making sounds, and hitting his head on the walls. He jumps and runs around; he grinds his teeth. He wakes up from sleep and does the same things. He does things that a small child should be doing, and he is already 17.

This description corroborates how most parents in the study viewed people with disabilities. For these parents, children who can dress themselves, participate in a conversation, participate in home-based activities and maintain social normalcy cannot have a disability. The examples presented above illustrate the difference between the parents' understanding of disability and what constitutes a disability in the U.S. school system. As illustrated in the next section, the data indicates that parents have limited experience with disabilities, further illustrating the point that disability is a socially and culturally constructed concept.

Limited experiences with disabilities. The parents' definition of disability was influenced by both their limited experiences with the U.S. definition of disability as well as limited exposure to disability. As discussed earlier, disability was mainly defined by its physical manifestations. Six of the eight parents reported not having prior direct experience with a person with a disability. Sheila provided the following account of her experience with disability: "I have never really seen disabled people in Haiti. Maybe when we go to the doctor you know, like, you know, the hospital, to see my friend, I see them in a wheelchair." Similarly, Karla explained her limited experience: "I did not know anything about it. ...It was only when Max started school and they told me that he had problems to speak and to write." The other parents provided similar responses.

The lack of prior exposure to disabilities is not the result of a lack of disabilities in Haiti, but perhaps was associated with cultural views and behaviors toward disabilities. It is possible that the stigma attached to disabilities is the reason for people in the Haitian society to close their minds to disabilities.

Stigma attached to disabilities. A visible disability carries heavy stigma in Haiti. This is most likely the result of cultural beliefs about the etiology or the meaning of a visible disability. People with disabilities are treated as outcasts. Clarissa provided the following explanation: "...Because when they say that someone has a disability...they don't pay attention to them, they are set aside." Due to public reactions to disabilities, people with disabilities in Haiti are sheltered from public view to keep them from being stigmatized, thus reducing outside people's chances of being in close contact with them. Fedeline shared, "They don't treat them well, because as long as the person is crippled they are set aside. Basically crippled people are set aside from the rest of society." When asked how people with disabilities are treated in Haiti, Karla responded: "Here when the children are like that, they say that they are handicapped. They value them. In Haiti people tease them and drive them crazy."

The heavy stigma that people with disabilities in Haiti experience was exemplified by Fred's description of the strict avoidance of people with disabilities in certain instances: "When a mother is pregnant, if she looks at someone with a disability, she can give birth to a child with the exact same disability." This last example shows that there is a certain level of supernatural belief attached to disabilities, although none of the parents provided a supernatural reason for their children's disability. When asked

directly about supernatural influences, all of the parents denied any such influence in their case, although three parents admitted that it was possible in other cases.

Family members and disabilities. The stigma suffered by the person with the disability is often extended to and internalized by other members of the family. Using the case of the pregnant woman above as an example, if a child were to be born with a disability, this disability would be the fault of the family of the other person with the existing disability. It would be the whole family's fault for not keeping the person with the disability away from public view, therefore exposing the pregnant woman to the disability and causing her child to have a disability.

Furthermore, the label of disability does not belong only to the person with the disability, but to the whole family. The family is often referred to as the 'family with the disabled child, man or woman.' Because disability reflects unfavorably on the family, families tend to keep people with disabilities away from public view and avoid public acknowledgement of having someone in the family with a disability. Dion, the Haitian psychologist, recounted a story in which a grandmother rejected the disability label that had been assigned to her grandchild citing the family background as the reason for the rejection:

The grandmother ... had a sense of what the problem was. ... At one point she pulled the report card and said, "*Gade Miss, ou wè yon pakèt 'F' fi'a bay pitit mwen. Di fi'a konsa, gade, nan fanmi'm pa genyen kreten tande!*" (Look ma'am! You see all the F's the woman gave to my child? Tell her in my family we do not have morons!).

Limited available services. As a result of Haitian society's indifference to people with disabilities, and most likely due to Haiti's poor economic situations, limited resources are made available to care for people with disabilities. Most parents were not aware of programs in Haiti for children with disabilities, further illustrating Haitian

society's stance toward people with disability and parents' limited exposure to disabilities. The parents from the capital city were only aware of programs for mute and blind people, but even those programs were only accessible to people with means.

According to Clarissa:

There is such a thing in Haiti. They have it but it's for...like...there is a name for that in Haiti...children that are not... children that are like...that have problems in their heads, there is a special school for them in Haiti...but you have to pay for it. All the big doctors tend to them, but you have to pay for the service. [For] The mute kids also.

Karla, a mother from outside of the capital city, said: "I never saw any programs. Like if the child is paralyzed, there are no programs for that. I know that there are schools for mute children ... but not for paralyzed."

Society's disregard for people with disabilities in Haiti, the stigma attached to disabilities, and limited resources available for the care of people with disabilities contributed to parents having limited exposure to people with disabilities. The nature of their children's disabilities, combined with these reasons, might contribute to how parents view the assignment of the disability label.

Language or speech impairment. Three of the children considered in this study had previously received services for developmental delays through the Part C clause of IDEA, which provides services for children from birth to two years old. Although the parents accepted the services under Part C, they did not see their children as having a disability in any way. There could be several reasons for this. First, Part C uses the term "developmental delay" rather than disability. Therefore, the Part B assignment of disability labels might have been the first time that the parents were hearing these labels. Part B provides services to children from age three to 21. Second, it is possible that

parents like Clarissa, who speak mostly Creole with their children, might not discern a language delay as being severe while school personnel recognize it differently:

They performed test on her and found her to be normal. You understand? ... She has a problem that she does not speak too well. You know, there are words that she cannot say too well in Creole. She mostly speaks English words. If she speaks, she will not speak Creole at all. She mostly speaks English.

Third, none of the parents considered a language or speech impairment a disability. For example, Karla experienced language or speech impairment in two of her children, yet she did not see it as anything out of the ordinary:

When Max was a baby the doctor gave me a paper to take him to request for disability assistance. They said that they were going to give me things for him, but I never went. I don't want him to be placed in a school with the retarded kids. I never went, and now he talks. That is why I don't worry about the little one. Even though they say that he does not talk, we continue to help him out. I don't take him anywhere.

Although the second child was displaying similar language difficulties as the first child, Karla still did not go for services despite the social worker's repeated recommendation. The parents in the study tended to associate a noticeable language delay with the fact that the children were learning two languages simultaneously and they believed that the children's English skills were better than their Creole skills. Since the parents' English skills were limited, discerning a possible language or speech delay in English might not be an easy task for the parents.

Specific learning disabilities. Similar to developmental delays, the impediment caused by a specific learning disability may not be apparent to parents. The lack of visibility of a specific learning disability might have contributed to the parents rejecting the disability label. Clarissa expressed her mistrust in the statements below:

Well this handicap thing I don't quite trust it, because it can be that being that it is the child's first year in school and she cannot quite adjust to

sitting still in class. They need to be patient with the child and follow the child; they can't just say that she is handicapped just because she can't sit still in class.

When asked about the child's difficulty in academic matters as presented at the meeting, Clarissa downplayed the school finding with the following statement, "She is a child! There are things that she may not have assimilated very well yet. However later on she may assimilate them."

Other health impairment. Only one child received services under the other health impairment category due to inflections from sickle cell anemia, which was diagnosed at birth by medical professionals. The mother did not refer to this child as having a disability, but as suffering from an illness. She expressed her awareness of the debilitating effects of the illness and said she would accept all services that would alleviate her child's suffering. From her explanation, it is obvious that she did not see her child as having a disability, but as suffering from the effects of the illness: "... it is because of the illness that he is being evaluated and it seems things are getting worse and worse. I accept it [the disability designation], but it's not like I feel okay about it." At another point in the conversation, she sadly said, "if he is sick and they are giving him the services that he needs for that, I am glad, but..." (Observer note: Long pause. It seems that the topic is difficult for the parent to talk about). This point made by Fedeline typified parents' acceptance of services, but not the disability label.

Rejection of disability labels. The Haitian parents in the study categorically rejected the disability labels assigned to their children for various reasons. They attributed the school's designation of disabilities to factors outside of their children or to developmental immaturity.

Medical and legal justifications. According to the parents, disabilities must have a medical component. Clarissa shared:

[It's a] certain thing that she has not yet been able to adapt to in school, but that doesn't mean that she has a problem. As long as she doesn't have a problem in her head or in her hearing, I won't let them sign my child off as a handicap, because I don't have a handicapped child. She is normal.

To Clarissa, a disability was a medical issue that required medical treatments. If the child's doctor did not notice a disability that warranted medications, then the school should not assign a disability label to the child. The parents had also learned certain aspects of the social and cultural construction of disability in the U.S., e.g., legal recognition and financial support provided for people with disabilities. In explaining her rejection of the disability label that the school assigned to her child, Clarissa noted emphatically: "Is she on medication? Did I get money from the government? If she was medicated since birth and the doctors had noticed that she had mental problems, they would have given me money for her." In Clarissa's view, there was a protocol to follow to determine disability beyond what the school was doing. This protocol included a medical determination and recognition by the government in the form of financial compensation.

Immaturity. Along a similar line, Clarissa and Fred explained their child's behavior in terms of immaturity. To both, the husband and the wife, what the school saw as a disability was merely the effects of age. They both believed that given enough time, the child would outgrow the restlessness that was observed, which was to them normal child behavior. Clarissa was adamant on this point, exclaiming:

...They can't just say that she is handicapped just because she can't sit still in class. It is her first year in school; ... What I meant to tell you is that for now the child is just starting out ... She is a child. ...She is young

for now and is distracted. Later on she will work. ...What she likes the most is to play.

Salina (the grandmother) objected to the labels by explaining:

Well mine is not disabled. I had already told you that. He does not poop on himself, nor does he pee on himself. He goes to bathroom by himself; he washes and dries off, and dresses himself. I don't have a disabled child. I told them that. A disabled child is a child that soils himself, that drools, and all that. I have a rowdy child.

Teacher issues. In addition to the above explanation provided by the parents for the rejection of the label, they also interpreted their children's behavior and low academic achievement as issues related to the teacher. Three of the parents felt that it was the school's fault for not being able to manage the children. Although Fred's daughter was running in the classroom, was unable to sit, and was hitting other children, he exclaimed, "I don't have a disabled child. She is a child that obeys me when I talk to her for she fears me and obeys me." In defense of his child's behavior, the father provided the following incident as proof that the school was not able to manage the children that they had been entrusted with:

They don't look after them at all. ... If the child is in the classroom and you are the teacher; I come and do not find her; you can't just tell me that she is outside by herself. ... You cannot have a child and not be strict with her. If you allow her to do as she please she will do just that; and no matter what you tell her to do she will not, because she will not respect you.

The mother exclaimed, "That's exactly why the children don't listen in class!"

According to the parents, teachers just had to teach the children how to behave in school. Salina said: "I need a school that has strict teachers, because he is a boy. When you tell him to sit, he needs to sit. ... He needs someone to be firm with him." During a telephone conversation, Salina shared that the teacher was not able to manage the classroom. Her statement was supported by informal and spontaneous classroom

observation data. My observation showed that Mr. Olden, a first year Teach for America teacher, was struggling with classroom management. I visited his room on three occasions when the office was called to remove Jacob (Salina's grandson) from the classroom, and I observed his kindergartners running wildly all over the room. When Jacob was moved to the classroom of a Haitian teacher who was stricter, behavior was no longer an issue that warranted a daily call for him to be picked up from school, as was the practice for many months. This information was provided by the community involvement specialist and the grandmother during informal conversations with each individual. Similarly, Fred saw his daughter's teacher as too lax and not providing proper supervision in the classroom. Salina, expressing her discontent, offered the following statements:

Believe me, when I go before them, I let them know that if something is wrong with the child that I am not the one to blame. The school is the one that has spoiled him rotten, because he did not use to spit on people, he did not use to poke his tongue out at people... so he picked up these bad habits at the school.

Negative effects of disability labels. Parents also rejected the disability label because they saw its potential to negatively affect the child's future. They feared that a disability label would become a barrier in the child's future employment possibilities. Clarissa spoke adamantly against the label and said she would not sign anything that might place a label on her child, which would stay in her child's record forever. She explained:

Sometimes kids have problems in their ears and their head and they are not really normal. Then you can go ahead and put that on their file, but if they are normal that should not be placed on their file, for it will cause problems later on for the child.

Parents' fear of a disability label was corroborated by the ESE liaison specialist's response when asked about parents' views of disability:

Some of the questions they ask are relating back to acceptance of their child's disability. They are afraid... of the child being labeled. The first question they usually ask: "Can my child later on become a doctor, or the president? I've been told, because of this document, because he's in special education, there are certain things he won't be able to do." Those are their main questions: how will it affect their children's future.

In one case, the parents' fear was further corroborated by the special education teacher's fight against the assignment of an emotional disturbance label to Jacob, Salina's grandson. The teacher argued the child was too young for such a heavy label. She further explained that such a label would affect the child's future because he would not be able to serve in the armed forces, attend the police academy, or become a firefighter. To her it was unjust to the child. I observed her in the meeting asking the general education teacher questions that would disprove the case; and when she was asked about her observations of Jacob's behavior, she explained that Jacob was spoiled, but he listened to her and never hit in her class. She associated Jacob's behavior in the other classes to lack of discipline and lack of teacher experience.

Conclusion

Based on the concepts explored under the social and cultural construction of disability theme, it can be concluded that the parents' definition of disability, their prior experiences with disabilities, the cultural views of disabilities in Haiti, and the nature of their children's disabilities worked in tandem to cause the parents to reject the disability label that the school assigned to their children. This rejection of the disability label further influenced parent participation in the IEP process. Except for one, the parents were quite passive in the IEP meetings. They felt that there was no need to try to

persuade people of the truth that they knew about their children, (i.e., their children did not have disabilities), or to argue for more services if they did not agree with the labels that indicated something was wrong with their children. If there was no problem inherent in their children, why would they participate in choosing appropriate services for their children? Therefore, the IEP meeting ended up being a one-way street, where the school personnel went through the procedural motions and concluded with the signing of the document without much parental input.

Theme 2: Parental Role and Parents' Limited Participation in the IEP Meeting

Parental participation in the IEP process was affected by many factors. Faced with a process that fell outside their cultural norms, parents seemed inadequately equipped to handle the demands associated with the IEP meeting, thus resulting in minimal participation. Unlike professionals who are guided by the special education system and the legal procedural framework which provides a script for professionals to follow, parents lacked the guidance and the cultural knowledge needed to become more active participants. Data from IEP meeting observations reflected that the special education procedural framework imposed delimitations on parents who were not aware of their rights or the school's expectations. Moreover, other factors like language issues, cultural factors, education level, and immigration issues were barriers that kept parents from fully participating as intended by IDEA.

Procedural factors. Limited parental participation in the IEP meetings might also be attributed to the procedures of the participating schools. The schools were attempting to fulfill the paperwork requirements of the IEP process with little regard for the legal requirements of the law. Within the confines of meeting the paperwork requirements they proffered little room to accommodate the parents' social and cultural

needs. This was evidenced by a number of factors including the limited time given to parents between notice of the meetings and the meetings themselves, and the lack of effort to accommodate parents' work schedules. Observational data revealed the following procedural flow. Following assessment, placement in special education programs started with the meeting notification being sent to parents. The schools used different media to notify the parents (i.e., letters, telephone, home visits, and oral invitations when parents were dropping off or picking up their children from school). For the initial IEP meetings, the parents often received a written notification. However, for the annual review of the IEP, many of the parents did not receive a written notification, which is in violation of the mandate. Some parents were notified the day before as they were dropping off or picking up their children, another violation of the mandate. The special education teacher would see them in the school yard and tell them there was going to be a meeting the next day and that they needed to attend.

The short meeting notice was often incompatible with parents' work schedule. Of the seven parents, three were working in restaurants, one as a housekeeper in a hotel, and another one in a nursing home as a certified nursing assistant. Attendance is crucial in those jobs and supervisors are often stricter than in other industries since employers need to find other personnel to cover employee work shifts if they are to be absent. Three of the parents complained of the limited time they had and how the meeting conflicted with their work schedule. Clarissa expressed the conflict between work and meeting schedule as follows:

The reason why I did not go was because of work ... I do not have the time. But my husband when it falls on his days off, he always goes... they had called me on a Friday asking me to come in on a Wednesday, and I told them no. I only work four days a week and I can't miss a day."

Clarissa, who only had a two-day notice and who could not attend the meeting, sent her husband. However, her husband's presence was not adequate, because she was the one who usually attended to school matters and her husband was not attuned to school issues. IEP meeting observation data supported Clarissa's view. The husband's demeanor at the meeting justified the mother's concerns. He was joking about his child's situation and allowed the translator to decide if it was safe for him to sign the papers that the school wanted him to sign. He did not ask questions or request clarification during the meeting. During the interview, he professed his trust in the translator/school personnel to advise him on decision-making, and felt that the translator would have informed him if he were signing something that could have negative consequences for his child. It was evident that not allowing parents enough time to plan for a day off, or not scheduling the meeting on a day when the appropriate parent is able to attend, could affect the outcome of the meeting.

Beyond the process of informing parents, the way that the IEP meetings were run at the schools was not conducive to parental participation. Based on my observation, the initial IEP meeting started with the presentation of evaluative data by school personnel. This was followed by school personnel explaining the category under which the child would receive services, preparing the document, asking the parents to share a positive attribute of the child, and then signing the document. During annual reviews, the IEP papers were already filled out before the parents' arrival. At the beginning of the meeting, the exceptional student education (ESE) teacher shared the child's progress with the parent, told the parent if there was any change in services, and then asked the parent to sign the papers. An annual review lasted between 10 to 15 minutes. Such a limited

amount of time did not lend itself well to parental participation and to collaborative partnerships.

Language issues. In addition to limited opportunities to participate in the meeting, the language used at the meeting made it difficult for parents to participate. The IEP meeting, which is a legal mandate, is replete with technical language. Although a translator was provided upon request, the translators were often not truly bilingual, did not know the language of special education, and were not qualified to translate. The most important terms were not even translated due to their technicality and their lack in Haitian Creole. This was evident in parents' inability to explain in clear terms the purpose of the meeting and what actually transpired at the meeting. Salina, the grandmother of a six-year-old boy, explained: "Those three teachers communicated with each other to compare [my child's] work..... They had told me that they were going to...well because they found him to be so smart that they were going to place him in another level." The grandmother seemed to have understood that the child was going to be placed in a higher curricular level, when in fact the teachers were recommending remedial services. IEP meeting observation data attested to this point. During my observations at the participating schools, I witnessed school personnel searching for translators unsuccessfully. Sometimes they called for a Haitian teacher, who was in the process of teaching and was therefore in a rush, while at other times they solicited the help of other support staff that spoke Haitian Creole, but who might not have had knowledge of the technical language used at IEP meetings.

My own experience further corroborates the lack of qualified personnel serving as translators. On two occasions, I found myself being the translator while I was collecting

data. Someone would turn to me at the meeting and say, “You speak Creole, right? Can you translate?” Unprepared and not able to translate the technical terms, like many of the unqualified translators I had observed, I reverted to using the English terms, which have no meaning to the parents. The ESE liaison specialist summed up the parents’ difficulty with the IEP meeting by pointing out the complexities of dealing with the school personnel, as well as the technical language of the IEP meeting:

Because they get intimidated when they are sitting at that table with all these people with these huge titles, and ‘little old me, I’m just a parent.’ And they don’t understand the [acronyms], the wordings because they’ve never heard them before. Because, typically, when we work in a system, we’re used to our own lingo, and the parents are outsiders. When you say IEP, I have parents who say: “What is an IEP?” And I’m like: “This document! This is an IEP.” And then I have to explain it to them, and give them the definition. So they are intimidated, for one. Secondly, they don’t understand how important it is. Thirdly, it’s a language barrier thing. They don’t know they have the right to ask for representation, especially when it comes to language barrier.

Parental rights. In addition to the above difficulties, there were other factors affecting parental participation. First, the lack of a culture of special education in Haiti and not having services for people with disabilities reduced parents’ familiarity with the special education concept. This kept them from grasping the essence of the meeting and the program. Associated with the parents’ limited knowledge of the special education process was their lack of knowledge about their rights in education as well as their rights under IDEA. During the first interview, the parents could not answer any question that dealt with their children’s educational rights. No matter how I rephrased the question, they would respond by enumerating what they could do at home for their children.

Although I explained their rights under IDEA during the second interview, when I asked them how comfortable they were with demanding their rights if they felt the school was not providing an appropriate education for their children, they still could not provide

an appropriate answer. Except for two parents, the grandmother who was previously coached on her rights, and Nadine who went to the school to advocate for her child to be evaluated for special education programs after being retained three times, the rest of the parents were not able to give examples that demonstrated knowledge of their rights. In comparing Haitian parents' participation with other ethnic groups, the ESE teacher explained:

We had a lot of African American parents and I think that they are more savvy as far as knowing what was out there, what's available... and they would come to the school and say I need X, Y and Z... I think that they [Haitian parents] just go by what the teachers tell them or what someone in an office tells them, ... and that's what they accept, and go from there, and not try to research and see what they can do and what's out there, what's available to them.

Parental role in education. In addition to having a limited knowledge of educational rights in the US, parents' limited participation may be attributed to their cultural background. Haitian parents, especially those with a low level of formal education, are inclined to allow school personnel to decide their children's educational course since, in Haitian culture, educators are highly revered. In explaining her expectations of his behavior at school, Salina related the following lines that she said to her grandson: "I tell him, 'the teacher is your mother; as soon as you arrive at the school, she is your mother. She is the one responsible for you. You are under her care. You have to listen to her.'" This line of thinking also reflects the other parents' attitudes toward educators. Educators are placed on a pedestal and parents, therefore, avoid interfering with school matters as much as possible. When asked what their parental roles are in their children's education, most parents believed that their role is limited to making sure their children are in school. Fedeline shared her role as: "... to help them do their homework, attend meetings for them, and take them to school. What else can I

say? My role is to participate the way that a parent should participate in their child's education." This description related her view of the role she should have in her child's education. All of the other parents also explained their roles in term of activities bound to the home. This included dropping off and picking up the children from school, making sure they were at school, and attending meetings. Although Haitians place a lot of importance on education, they do not believe it is their place to interfere with the education process. This was evident in the number of parents who admitted not having initiated contacts with the school. Six out of the eight parents never called the school or visited the school to talk to educators concerning their children.

Education level. Another factor that may account for parents' limited participation was their level of education. When asked about possible barriers to parents' participation in the meeting, Ms., Dion, the Haitian psychologist stated the following:

Well we know that in Haiti we have a majority of people who are not educated. It's not their fault you know; it's because of the system we have. But I have met in the school systems some Haitians of course very educated, who know, who have learned the system here, who know the system and who know how to get in and get what's best for their children.

She further supported her assertion by saying:

Some of those parents who lived there [suburbs], they know the system, either because they've been to school here ... and they act like any normal American parent who knows the system, and they would be looking for what's best for their kids. ...the thing is it's not being Haitian. It's a matter of whether the person is informed or not.

With the exception of Salina, the grandmother of a six-year-old boy receiving services under the language or speech impairment category, and who reported no formal education, parents who reported a sixth grade education or lower (five out of eight) tended to be more passive at the meeting than parents who reported grade levels higher than six. Even when asked to share positive information about their children, they did

not do so. When asked what they would like to see their children accomplish, they did not have any suggestions. Salina, however, although she reported no schooling, was active in the meeting, asking questions, sharing information about her grandchild's ability, and actively advocating for him. Her participation might have been the result of her prior coaching by the ESE liaison specialist who had worked with her for years and had instructed her on how to contact the district, talk to school personnel and obtain the resources she needed.

Although not addressed directly by the parents, school personnel reported that the whole IEP process can be intimidating for Haitian parents. They did not know the educational system in the U.S. and the only frame of reference they had was what they knew in Haiti. Ms. Dion, the Haitian psychologist, explained it in the following terms when asked about a particular parent:

... I suspect there was probably what I was talking about a minute ago. Her view of education I guess was conditioned by what she knew in her country. And she wasn't sure she knew exactly what the system is about here. Yeah she was sitting, she had this big smile and everything, and she was trusting everything that we were saying. It's not that she didn't want to participate. ... You can feel that she was open to everything, but she doesn't know the system, and there was a language barrier involved.

Immigration status. Another factor that contributed to the limited participation at the meeting was the parents' immigration status. According to Ms. Dion, the Haitian psychologist, Haitian parents are apprehensive of public services due to their immigration status:

... Any human being in a country, you don't have your legal papers, you would not be comfortable when you have to deal with public services, and some of them at times see the public schools like... they tend not to be too open with us, because they tend to connect us with immigration sometimes. Sometimes I have to reassure them, 'Listen, we are not part of the immigration department. We are only talking about your child. This is what we are supposed to do for your child.'

Similarly, the length of time that the parents have been in the country seemed to affect their participation. Ms. Dion provided an example of how the recency of immigration might be prohibiting full participation:

You get a young parent, not a teenager, but you can see the stress on the woman's face, and she's sitting right there very shy and I had to translate for her, and I had to reassure her and say, "You're a member of the team. Remember, we're talking about your child. You have a voice in this," because from time to time the staffing specialist and the teacher would ask her, "What do you prefer for your child? This or that?" and she had to...she would go hmmm. I'd say, "You have a voice. You're a member of the team. Remember you're the child's mom." And I had to repeat that often for her, but you can tell this is someone who is probably ...a recent immigrant, and very shy.

Ms. Dion felt that compared to other ethnic groups, Haitians were intimidated by the system because they did not feel entitled and because of the way they were treated in this country. She felt that Whites, African Americans and Cubans were more likely to get what they wanted and to demand services because of a sense of entitlement. However, Haitians, Mexicans and other South American nationalities were at a disadvantage in this country as they did not feel entitled to anything. Ms. Dion explained their situation:

You're dealing with people who ... are poor. They don't have the education to acquire the skills that they need to earn a decent life. Some of them don't even have papers to stay in the country. They feel as I would say in Creole, "*Yo santi yo trake*." (They feel hopeless). They feel that they are not accepted. So, they are not going to be that open, because of all those personal issues. It's not that they don't want...but they don't want to say too much, and they are not sure they can ask for too much, because the country where they came from those things are not granted.

Conclusion

Given the logistical demands of parents' jobs, parents' lack of familiarity with the special education culture in the U.S., lack of knowledge of their rights in education, their level of education, as well as fear of the system due to their immigration status, educators

did not provide enough support to enable the parents to fully participate in the meetings. They did not provide adequate translation, take social and cultural backgrounds into consideration, inform parents of their rights before the meeting, or provide them with enough opportunities to participate as a partner. Therefore, school personnel's insufficient scaffolding of the technicalities related to the IEP process resulted in limited parental knowledge of the IEP process, therefore reducing parents' participation in the meeting.

Theme 3: Parents' Decreasing Trust in the Educational System

Cultural practices of entrusting the education of their children to education professionals might have further influenced parental participation during the IEP meetings. Traditionally, Haitian parents place complete trust in educators in Haiti, believing that educators will act in the best interest of their children. This practice might have been extended to the educators in U.S. schools, however, more in the form of entrusting their children to the educators without the level of trust that are extended to teachers in Haiti. Entrusting can entail placing your child in the hands of someone because you have no choice, but it does not have to include a high level of personal trust or faith in the teacher. Although some parents expressed serious concerns about the school's ability to educate their children appropriately, they still sent them to the same school as if they had no choice, and they did not attempt to influence school practices. This attitude was further evidenced by the minimal input parents provided at the meetings, even when they disagreed with professionals.

Trust. As indicated in the earlier description of parental roles, parents often stayed out of school affairs and did not interfere with the education that their children were receiving at school, thinking the school would act in their children's best interest.

School personnel highlighted Haitian parents' trust in school personnel by pointing out that the parents leave them the full responsibility of educating their children. Small, the ESE teacher, summarized parents' trust in the educational system in the following statements:

I don't want to, like, put Haitians parents in like a box, but I think that they give the educational system a lot of power. They relinquish a lot of their power because I think that, and this is my opinion, I feel that they believe...they, they, they value education and they respect the role of the teacher as a professional. So I think that they step back a lot and let the teachers handle it, because they feel that the teachers can handle it, that they're more equipped to handle it than they are.

Ms. Dion, the Haitian psychologist, provided her interpretation of parents' practice of leaving decision making to educators, "We have some parents with the traditional Haitian attitude, like 'you are the professional, I trust you, you know what you're doing, do whatever you think is best.' That's the traditional Haitian attitude." However, she felt that this behavior was most common with parents who had little schooling: "When they move to the United States, which is most of them, is, uh, non-educated parents, they still rely on the teacher to give their child everything they think their child needs to succeed." All the Haitian educators conceded that all Haitian parents trust teachers, and that trusting was 'a cultural thing'. As a result, teachers were seen as second parents. Costa said, "School is a second home. So, when your parent drops you to school, it's like they take you home. So whatever the teacher says, goes." Although parents' trust in educators was associated with relinquishing power, this was not true for all parents. Parents who had knowledge of how schools function, were able to use it to ensure that their children received appropriate educational services. Dion, the Haitian psychologist, related her experience with a Haitian parent:

I'm thinking of a parent who came to one of my schools once, and was demanding a change in program, a Haitian parent, because he felt that we had to accentuate the mathematics first. You have some parents there who know what's best for their kids and who know how to ask for it. That was a very educated parent. That was someone with a university degree. I think he was a lawyer or something like that.

Mistrust. The assignment of disability labels to children undermined Haitian parents' traditional trust in school personnel. Although Haitian parents entrusted the education of their children to educators and relied on them for decision-making, they mistrusted them when it came to the assignment of disability labels, as much as they mistrusted other agencies that attempted to attach disability labels to their children. They retaliated against the professionals by refusing to sign the documents, as three of the parents did in this study (Salina, Clarissa and Fred), or by being disengaged in the meetings. The data revealed that educators were trusted as long as there were no problems. Parents displayed high levels of mistrust in the educational system after receiving news of a disability in their children. Clarissa admitted not trusting the school's assignment of a label to her child: "As for me, this idea of something not working right, I will never buy it nor will I ever sign for it."

In addition to not trusting the school's decision, the parents did not see the school as an ally. They felt they were caught between a rock and a hard place when it came to dealing with the school. They felt that the school's practice of reporting bad behaviors to them was asking them to take punitive actions against their children. Yet, they were afraid the school would report them to the police if they behaved in a manner that the school might interpret as inappropriate, i.e., use of corporal punishment. Salina offered some insights into the dilemma she faced:

She [principal] has spoken to me threatening to expel the child from the school. I told her that regardless of all that she is saying, if I hit and bruise

him they would call the police on me. It's like they are wearing me down. If I do something wrong to the child they would call the police and have me arrested.

Having limited knowledge of the norms and mores of U.S. culture might explain parents' reticence at the IEP meetings as they feared retaliation from the schools if they were to cross school personnel. Clarissa expressed her mistrust in the following manner: "And if you make any mistake, they will report you to the police. That's a problem."

Parents' mistrust of the school system was further illustrated by LaCross, the ESE liaison specialist:

I think parents have some sort of mistrust in certain aspects of the school system, because they feel like their culture is not being understood, or they don't speak the language, the professionals don't give them a bigger voice, or the school is not parent friendly enough. So they feel intimidated. They don't feel welcomed. So therefore they tend to back more into a corner and get involved less and less, because they don't feel welcomed.

She summed it up by adding: "I know a lot of parents who mention they have lack of trust, because they only get that phone call when it's negative." This illustrates the limited communication that often exists between the school and CLD parents.

Parents' mistrust was not limited to education. It was also extended to other agencies that have to do with determining the presence of disabilities. Salina related the following story of a conversation she had in the waiting room with another parent when she went to the doctor with her grandson after she was advised by the daycare to do so for behavior issues:

They had sent me a paper to go with him to St. Joseph Memorial Hospital. ... This lady asked me how old my child was; I told her that he was three. She told me, "You should call onto God and pray for your child, because there are a lot of children that come here that are made to become crippled." She told me that they maim them; they give them medications to lull them and cripple them while there was nothing wrong with the child to begin with. That is why I am always avoiding St. Joseph Memorial Hospital. If I have to get a consultation, I go to an outside specialist where

I pay my money to get my consultation. Once they see that the children have Medicaid, they will destroy them; they will mess them up; they will give them any types of medications. Like they can tell you that the children are not right in the head; they tell you that they have problems with their head and they give them a medication, which destroys their brain. Do you understand?

Clarissa also shared similar mistrust of the medical system when her child's pediatrician filled a yearly physical form, which negatively rated her child's behavior outside of the norm:

...There are a lot of people here in this country when they tell me something, I don't trust, like at the Optimed Medical Center. My child was being attended there and I almost sued the doctor, because you cannot tell me that Norla has been in your care since she was born and all of a sudden you put this thing in Norla's file...you know that when Norla goes to the hospital she won't sit still, she is running around... the child has been under the Doctor's care since she was a baby and if there was something wrong with her she should have been on medication. She is not taking any forms of medication; so the doctor had no right to put something bad on the child's records. I yelled at him. I was about to call the police but the people there talked me out of it.

Parents' level of satisfaction. Parents reported being satisfied with the meetings, but reported low satisfaction with the running of the school. Their satisfaction with the IEP meeting was mostly associated with the way they were treated at the meeting than the outcome of the meeting itself, although one parent did report satisfaction with the outcome and another with the progress that she learned her child was making in the special education program.

Satisfaction with the IEP meetings. Parents mostly expressed satisfaction with the way they were treated by the school personnel during the IEP meeting, but not with the outcome of the meeting. All parents felt that they were given enough time to talk. However, observational data from IEP meetings indicated that most of the opportunities parents had to speak were directly related to being asked if they had any questions. Field

notes on the two initial IEP meetings indicated that the parents were asked if they had questions after more than an hour of data presentation and dialogue amongst the school personnel. It was a lot of information to digest. On most occasions the parents did not have any questions. Their reported level of satisfaction with the meeting was based almost entirely on the social treatment they received at the meeting, instead of with the outcomes of the meeting and what the decisions meant for their child. In my field notes I summarized this process as follows:

Parents were often left out of the discussion during the meeting and offered very limited opportunities to contribute to the decision-making. Realizing how one parent was mostly ignored during the meeting while heated conversations was going on about the child's placements, the staffing specialist, who was Haitian, requested three times that the parent be included in the discussion.

Parents' limited opportunities to participate in the meeting can be illustrated by Karla's explanation of her level of participation at the meeting during my first interview with her:

KARLA: Well they were asking me questions, then later on there was a lot of talking so I don't know if that was all that okay.

IN: Did you wish that you had more opportunities to talk?

KARLA: Yes.

IN: Explain it to me.

KARLA: I think that is why I didn't pay attention also.

IN: Oh really? You did not pay attention?

KARLA: No, because they were talking about all sorts of things. Every once in a while the lady had to stop and say, "Okay, okay let's leave all these issues because we are here for Max".

On one occasion, Salina was attempting to make a case against an impending placement under the emotional disturbance category, when the counselor told the parent that she was wasting her time, and that the meeting would end that same day regardless how long it took. After such a warning, the parent became silent. How could parents possibly report satisfaction with the meeting when they were treated in this manner? Parents' discomfort

at the meeting indicated that the meeting did not go as smoothly as they reported. IEP meeting observation data showed that parents had body languages (i.e., sighing, body twitching, head turning away from school personnel, facial expressions indicating exasperations, and nervous shifting of their bodies) that communicated that there was a certain level of discomfort and a sense of being overwhelmed.

Although parents mostly reported satisfaction with the way they were treated, instead of with the outcomes of the meetings, two parents were the exception. Nadine, the parent who demanded evaluation for her child because her child was retained three times, said the following, “I am satisfied today because they told me that she is going to receive more services. They are going to give her more help.” Another parent expressed satisfaction with her children’s progress in the special education program. Claudette stated, “They (her children) did not quite understand things when they first started going to the school, but now they are doing better.”

Dissatisfaction with the school system. Some of the Haitian parents were dissatisfied with the school on many levels. First, they were dissatisfied with the way the school was run. They felt the school was not properly staffed. For example, Salina pointed to the children’s disorderly behavior in the cafeteria as evidence of poor adult supervision. According to Salina:

The person that is supervising is this one lady that cleans the tables. She is the one that is telling them not to do this and that. There are not two or three people to look after them; there is nothing like that, not at all.

The same parent explained that the cafeteria situation could have been remediated if teachers were taking on more of a supervisory role:

There are some teachers that are good. They accompany the kids to the cafeteria and they eat with them and then take them back. There are some teachers that just drop them off and then go on their way. There is a

particular teacher named Mr. O[Iden], he is good. He sits with the kids and eats with them and then accompanies them back. The other ones, they just leave them there.

The low level of supervision the children received before and after school also frustrated

Salina:

In the morning there is just one security guard and he is not there all day. He was given half of the day. They have this old person sitting in the front. When school is out I think there should have been a security officer in place to accompany the kids out. After the little ones have come out, the older ones are hitting on each other. They are falling to the ground and knocking one another down. ... The lady [principal] has not put anyone in place to supervise the kids at all.

Conclusion

Parents' trust in the school system waned after learning that the school viewed their children as having disabilities. Their weakened level of trust in the system after a disability determination affected their collaboration with school personnel. This resulted in a low level of satisfaction with the school, although they had reported their level of satisfaction with the IEP meeting positively. Their low level of collaboration was evident in their level of participation in the IEP meetings.

Theme 4: School Personnel's Misperceptions of Parental Involvement

As indicated in the introduction to this study, CLD parents are often viewed as not being sufficiently involved in the education of their children. Although the data indicates that parental participation in the IEP process was limited, there is evidence that parents were willing to participate in other aspects of their children's education, and they were doing a lot to assure their children's success, despite the fact that aspects of their involvement remained hidden to school personnel due to limited communication between the school and the home. The parents' limited participation in direct school matters on campus negatively influenced school personnel's perception of parental involvement.

Personnel's perceptions of parents' participation in IEP meetings. The educators in general seemed to be dissatisfied with Haitian parents' level of participation. LaCross, the ESE parent liaison specialist, echoed the sentiments of the educators with the following statements:

That's what breaks my heart. I've been working at this for almost five years, as long as I've been here. I just made a phone call now to a parent that a school has been trying to get the parent to attend an IEP meeting; they are not showing up. Or usually when they call them they'll [reply], "Proceed without me." (LaCross).

Referring to their participation she further added, "It's lacking drastically." The Haitian general education teacher, Ms. Costa, also felt that the parents did not participate enough and offered her experience with the parent at the IEP meeting that I observed: "Her participation was kind of low key. She just answered questions that were being asked ... and she didn't get involved. She just answered what was asked from her."

Personnel's perceptions of parents' involvement in education. Similar perceptions were shared concerning parents' involvement in the education of their children in general. The school personnel felt that the Haitian parents did not attend to their children's educational needs and were not involved directly in school affairs. They felt that the parents only came when there were special events at the school, i.e., award ceremonies or graduation. LaCross said:

It's usually where their child is getting acknowledged or rewarded for something, like the end of the year award ceremonies and the rewards. Sure enough, the cafeterias are loaded. So we tend to target them during those events. It's usually award ceremonies for their babies.

The limited direct school involvement might have resulted from the administrative aspects of the school. Parents were cognizant of the lack of people who shared their culture in the main office at Howard C. Informal observation of the school setting

indicated long waits by parents and unwelcoming attitudes from front office personnel, who often addressed them in harsh and impatient voices. I observed parents waiting in the main office for over an hour for a translator in order to communicate with the school.

The school's internal organization of staff probably contributed to the perceived unfriendliness of the front office. The previous year, there was a Haitian in the main office working as a clerk, however she was assigned to be the community involvement specialist and was moved to a remote room that was not part of the main office. There was no one in the office who spoke Haitian Creole, although the school population was over 70% Haitian. Since she became the community involvement specialist, she was often outside of the school doing home visits, which limited her availability to translate.

The ESE liaison specialist illustrated the unwelcoming aspects of the schools:

You're talking about parental involvement, but once they walk into that building they feel intimidated, because they've been standing there...I've seen where a parent walks in and they are standing 5-7 minutes. Nobody is saying: "Welcome! Can I help you? What can I do for you?" So they do feel a little bit intimidated and not welcomed.

The ESE liaison specialist furthered her point that parents would feel more comfortable if the school made available more staff members that spoke the parents' language in the following statements:

From what I've seen, some parents feel a little bit more open and welcome when they know there are Haitian educators in the building. Or if their child has a Haitian speaking teacher, they feel a little bit more open to communicate with that teacher a little bit more, because they know that person understands where they are coming from as far as the cultural aspect.

Parents' actual involvement in education. Although the perceived unfriendliness of the schools combined with the parents' views of what their role should be in education might have limited parents' participation, parents' interview data

indicated that Haitian parents' participation and involvement often took place at home, away from educators' sight. This was evident in the amount of investments they made in the education of their children and was contrary to school personnel's beliefs that Haitian parents were not participating in the education of their children. Natasha, a mother of two, working at a fast-food restaurant for minimum wage and with a husband who had suffered a stroke and was left paralyzed two years prior to this study, hired a tutor at \$50.00 an hour when she noticed her child was not making enough progress. Salina, the illiterate grandmother, paid \$160.00 a month to have the child in a tutoring program. Sheila, a hotel housekeeper, was seeking affordable tutoring for her child. Claudette, an unemployed mother, paid neighborhood students in higher grades to tutor her children.

The ESE liaison specialist corroborated the parents' search for tutoring:

I do have a lot of parents that contact me. The resource they target most is tutoring and after school care. And usually it's because the students need help with homework, because their parents don't speak the language ...and cannot assist with the homework.

In addition to tutoring, the parents also took their children to the library for academic help. When I met Nadine for the second interview, she shared with me that her daughter now participated in a program at the library on Saturdays that helped her with academic tasks. When asked about helping her child with homework, she replied:

I always check her homework. I help her in what I can. I help her with the things that I know about. I didn't go through grade school here; so there are a lot of things I don't get, but I help her with what I can.

Similarly, Karla helped her son with academic tasks. The following example illustrates her proactive behavior toward her son's need for extra support:

I teach him how to form letters, how to count. I teach him the alphabet, as well as many other things, and he is getting better. Sometimes I buy paper and I work with him at home and then take it to the teacher so that they

can see how he is progressing. ...I also purchased a blackboard so that I can help him at home, and he has gotten better since I did that.

Parents were doing much more than was apparent to educators. They were willing to participate but were not sure how best to do it. Unless the school explicitly requested their participation, parents' participation was often limited to making sure their children were in school. Fedeline commented on her involvement: "Every morning when I take them to school, I wait for their class to go in because I start work at 9:00. I take them to school, wait for them to get inside the classroom, and then I go." When asked about her involvement, Salina replied:

Well, I am always at the school. I always go to watch how they are treating him, because I never leave him at the gate to go to class alone. ... I always go all the way to the classroom. When I get there, I find them fixing the desks. I help them in doing so. I check his book bag to make sure that his homework is there. Then I talk to the teacher and ask her how Jacob is behaving with her.

Her child's teacher (Mr. Olden) corroborated the parent's statement by acknowledging that the parent was supportive and always accessible: "She is always there, she is very accessible. I think the mom [grandmother] was very...umm...involved in the meeting. And maybe a little too involved." Another parent, Karla even volunteered in the classroom:

...I used to go and volunteer at the school. I would go every morning and would come back at two. Back then I was not working. I did that for about a year, going in everyday volunteering with the kids, helping them in all different grade levels, my child's grade as well as others.

Many parents were willing to volunteer. However, they were not sure in what capacity. One parent explained, "If the school invites me, I would gladly do whatever they want me to do. I just don't know what to do." Another parent said she had not been in the

classroom because the teacher had not invited her. All the parents agreed if the school invited them, they would participate.

Although five out of seven families admitted to not having initiated any contact with the school, they were interested in knowing how their children were doing and what they could do to help. They just did not want to contact the teachers at the wrong time. However, they were available. Mr. Olden, who had sixteen students in his class of which twelve were Haitians, explained his experiences with the Haitian parents:

The Haitian parents that I have are all very present. Like Jacob's grandma will be there any second I call her; she'll be there right away. I have other Haitian parents that will leave work to come to school if I call them for something that's happening with their kid.

When asked about her participation in the school, Salina, the grandmother mentioned in the above quote, offered the following:

The only thing I don't do is sleep at the school, that's all. I am there every day because I always want to know how the kids are doing. For the way I see that they are treated, I am always there. When I come in, I don't even need a badge.

Parents' advocacy. Haitian parents' involvement was further supported by their level of advocacy in educational matters. The data revealed that Haitian parents were taking part in their children's education, but were doing so cautiously, not wanting to overstep their boundaries. Although many Haitian parents operated from a cultural background that dictated that they trust the educational system to do what was best for their children, the Haitian parents in this study advocated for their children. Half of the parents were adamant either in fighting for services without a label or in going against the school's decisions. Nadine, a mother with a fifth grade education, contacted the school after her child failed the third grade three times and she felt the school was not doing anything about it:

I was the one who initiated the meeting to see if they could help me. I called them to tell them that my child has repeated the class two or three times, and that I needed help with her. So then they called me in to attend a first meeting, and now they called me back to attend a second meeting. I had contacted them in August last year when she took the FCAT (statewide assessment) and she failed it a second time. I called them and asked them to evaluate her once school reopens, because I needed help with her. A child can't just keep repeating a class over and over and not knowing the reason why. Once school opened I came here [the school] and spoke to them. I called the principal and explained that my child needed help and she agreed to look into it.

This same parent later confronted the teacher concerning classroom practices that were not in her child's best interest:

She told me when she raised her hand, the teacher made her put her hand down and pick another student to answer. So I went with her to speak to the teacher to tell the teacher that she had to help the child. I told her, "I have to help her, but you have to help her too. You have to help me! If she raises her hand several times and you repeatedly have her lower it and you pick another child, she is not going to raise her hand anymore." The teacher told me that was not the case, that she always picks Jamisha and so on. So I told her that I would come in every week or two to see how things were going and how she was progressing.

Salina, the grandmother with no schooling, wanted to organize a group of parents to report the school to the district, because she was upset with the way the school was treating the children:

If all mothers were like me, a petition should have been filed, yes. I have not found any mothers. For had I found other mothers, at least ten of us, I would have gone to [the school district office] to report the school. Tell them, "Let's file a petition and send it to [the school district office]," they won't do it.

The data indicates that Haitian parents have the willingness to participate in the schooling of their children if the parameters of their involvement are known.

Conclusion

The parents' limited knowledge of the level of involvement permissible in U.S. culture might have affected their level of participation in matters that were apparent to

school personnel, i.e., the IEP meetings. As indicated above, parents' responses concerning their involvement in school demonstrated that parents' definition of parental involvement was different from that of school personnel. Due to poor communication between the school and the home, educators failed to recognize the many ways that Haitian parents were contributing to their children's education, such as providing tutoring services for their children, taking them to places to receive necessary help, and checking their homework. Therefore, educators' failure to recognize parental involvement practices as defined by parents, and their cultural ways of viewing their role in education, created a disconnect between educators' expectation and parents' perceptions of the meaning of involvement.

Summary of the Findings

The findings of this study are recapitulated in the four summative statements which summarize the categories under each theme respectively.

- 1) The culturally constructed meaning attached to disability, parents' lack of experiences with disability, and the nature of their children's disabilities, led parents to reject disability designations, hence limiting their participation in the IEP process.
- 2) School personnel's insufficient scaffolding of the technical aspects of the IEP process, coupled with cultural and logistical features of parents' lives resulted in limited parental knowledge of the IEP process, therefore reducing parents' participation in the IEP process.
- 3) After a disability determination, parents' weakened level of trust in the educational system negatively affected their collaboration with school personnel, resulting in low level of satisfaction with the school.

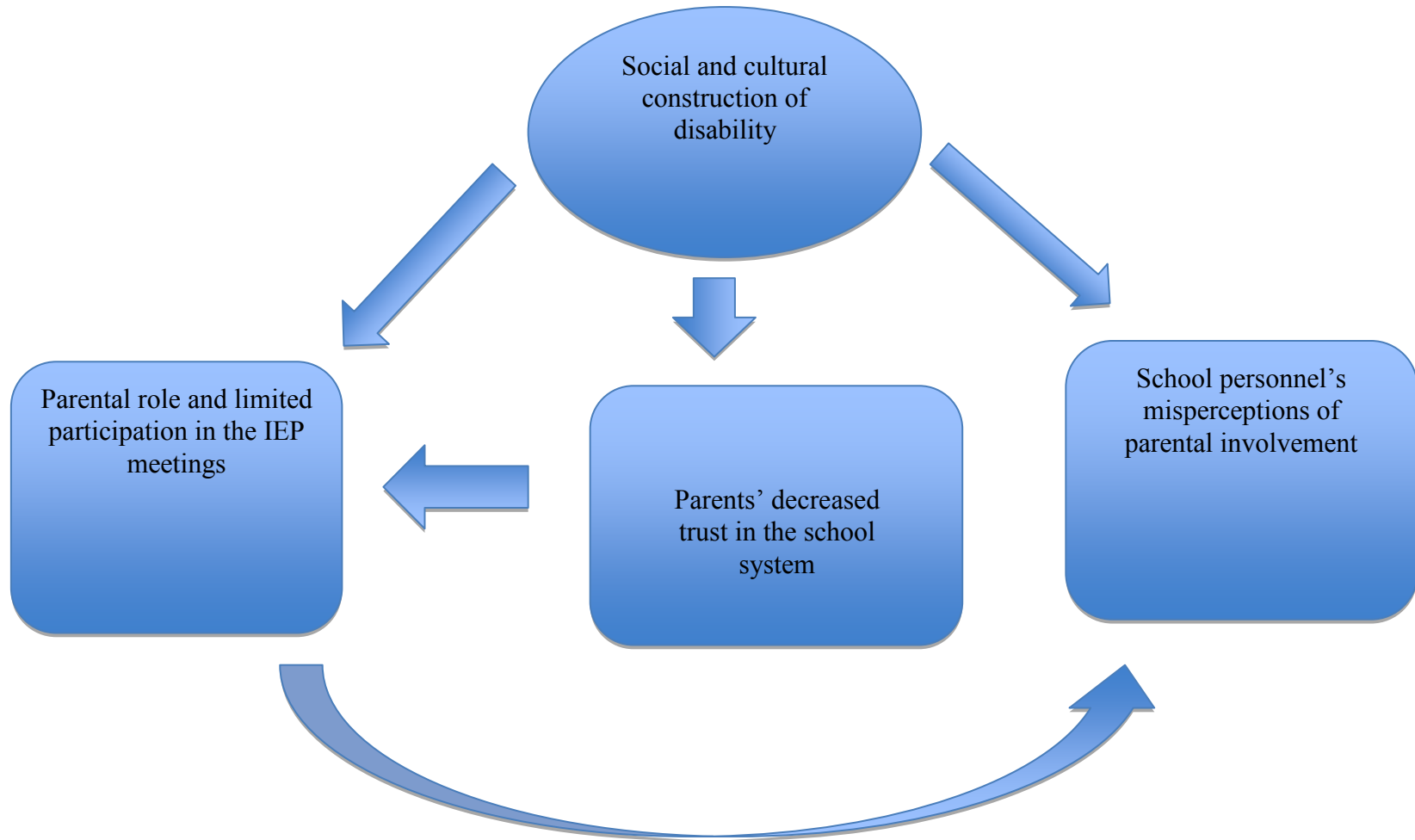
- 4) School personnel's failure to recognize culturally based parental involvement practices, as defined by parents, exacerbated the disconnect between school personnel's expectations and parents' perceptions of the meaning of involvement.

Substantive Theoretical Statement

Of the four themes presented in this chapter: 1) social and cultural construction of disability; 2) parental role and limited participation in the IEP process; 3) parents' decreasing trust in the educational system; and 4) school personnel's misperceptions of parental involvement, I have identified the core theme as the *social and cultural construction of disability* because it is the theme that binds the other three themes and explains the findings of the study (Corbin & Strauss, 2008). Figure one provides a visual representation of the interrelationships among the four themes.

The interrelationships among the themes led to the following substantive theoretical statement: The discrepancy between Haitian parents' and school personnel's social and cultural constructions of disability led to decreased parental trust in the school system, which, in turn, limited parents' participation in the IEP process and, consequently, reinforced school personnel's misperceptions of parental involvement and resulted in limited partnerships.

Figure 1: Theme Interrelationships



Chapter 5: Discussion

The purpose of this grounded theory study was to investigate Haitian parents' participation in the IEP process, their involvement in their children's education, as well as school personnel's perceptions of their involvement. This study provided an avenue to identify how Haitian parents participated in the special education process and advocated for their children, as well as to generate a substantive theory. As previously discussed in the findings, the analysis of the data led to four themes which outline the complexity of Haitian parents' participation in the educational system and school personnel's perceptions of their involvement. Further, my construction of the analysis included the identification of the social and cultural construction of disability as the core theme, which influenced the other three themes as seen in figure one at the end of chapter four. In this section, I will situate the findings in the literature, provide plausible explanations for the findings, reflect on the implications of the findings, and make recommendations for practice.

Four main trends addressed in the literature review were supported by the findings of the current study: 1) perceived CLD parents' involvement in education; 2) school personnel's perceptions of parental involvement; 3) CLD parents' experiences with the IEP process; and 4) cross-cultural views of disability.

Similar to the findings in Jeynes' (2005b) and Valdes' (1996) study, CLD parents are perceived to be less involved in the education of their children in the context of U.S. schools' definition of involvement. However, similar to the results found in Valdes' study, where parents saw schooling as the domain of the school and *educación* as the domain of the home, Haitian parents saw schooling as the responsibility of school

professionals. The data revealed that the Haitian parents in the study were very involved in the education of their children by securing tutoring services to help their children academically, which were not apparent to school professionals, and they expressed willingness to be involved at the school if they were invited to help with certain activities.

School personnel's perceptions of Haitian parents' involvement in education corroborated previous findings in the literature that concluded that school personnel see parents' perceived limited involvement as apathy (Smrekar & Cohen-Vogel; 2010), and lack of caring (Bezdec et al., 2010). Moreover, similar to the findings in Bezdec et al.'s study, parents were blamed for the inadequacy in family-professional partnerships. Professionals in the current study felt that they were doing everything possible to involve the parents, and that the parents were not responding. However, they failed to realize that their definition of parental involvement did not fit with the culturally based definition of parental involvement that typical low-income and low educated Haitian parents hold, and that the school's way of attempting to involve the parents was inconsistent with the parents' realities.

CLD parents' experiences in the literature is characterized by parents reporting frustration at the meeting, lack of support to help them understand the purpose of the meeting, limited interactions between the parents and the professionals, and limited understanding of the meeting (Lo, 2008; Salas, 2004). Haitian parents reported similar experiences. Moreover, similar to the experiences of the parents in Salas' (2004) and Cho and Gannotti's (2005) study, the data from the current study revealed that although Haitian parents tended to be silent at the meeting and to not initiate comments or ask questions, when a parent attempted to ask questions and to advocate for her child, the

professionals did not validate her objections and was shunned when she demanded different services. Additionally, interview data revealed that some parents failed to grasp the meaning of the meeting, and observational data corroborated the findings in the literature that school professionals did not provide adequate scaffolding to help the parents fully understand the purpose of the meetings, what is expected of them, and their rights under IDEA.

The literature on cross-cultural views of disability is supported by the findings of this study. As the findings indicated, the Haitian parents' and school personnel's social and cultural construction of disability affected parents' level of trust in the school system, their level of participation, as well as the school personnel's perceptions of their involvement. As found in Harry's (1992a) study with Puerto Rican families, the parameters of normalcy among the Haitian parents were broad, while the school personnel's parameters, dictated by legislation and the U.S. concept of disability, were much narrower. Parents in Harry's study often related their children's differences, which school personnel labeled as disabilities, as inherited traits from other family members. Similarly, parents in Valdes' (1996) study saw their children's differences as personality traits that did not particularly translate into disabilities as seen by school personnel. Likewise, Haitian parents explained their children's differences as rowdiness and lack of maturity, which the children will naturally outgrow with time. Haitian parents' definition of disability and the parameters of normalcy were similar to the views found in many Nonwestern cultures as presented in Lynch and Hanson's (1992) work. In the current study, this discrepancy in views between the school personnel and the parents created a disconnect between the two groups which contributed to the parents' withdrawal from the

conversation and, in turn, further reinforced school personnel's perceptions that Haitian parents were not adequately involved in the education of their children.

The Social and Cultural Construction of Disabilities in Haitian Culture

To fully understand what having a disability means for Haitian parents in the study, it is important to understand the Haitian parents' view of what constitutes intelligence in children.

As Rogoff (2003) stated in her book on the cultural nature of human development, social, cultural and historical backgrounds dictate people's worldview. Rogoff views human development as a cultural process that evolves from human practices. These cultural processes are based on cultural traditions, and are dynamic in nature, therefore subject to adaptation as individuals adapt to new contexts. However, before adaptation can occur, there is a certain level of learning that is necessary. This view is of particular importance because it provides a plausible explanation to Haitian parents' behavior in their interaction with the education system, their practice at home where education is concerned, their understanding of disability brought with them from their native country, and their views of their children's ability.

As illustrated by the parents' responses, Haitian parents presented a more practical view of intelligence and had more tolerance for immaturity in their children. Studies have shown that intelligence, developmental maturity, and disability have varying definitions in different cultures, and the definitions "are tied to judgments regarding what aspects of human intelligence and behavior are valued in the community" (Rogoff, 2003, p. 251). Certain communities define intelligence in terms of capability in specific situations as well as in terms of social responsibility (Rogoff, 2003). As presented in

chapter four, school personnel in the study referred to children's intelligence in terms of academic performance and school behavior, which is an unnatural setting for a child, whereas Haitian parents referred to this construct in terms of the contextualized tasks that the children could perform at home, a natural setting for a child.

Similar to the Zambians' definition of intelligence in Serpell's (1993) study, the Haitian parents mostly defined the children's intelligence in terms of cleverness and wisdom in practical situations. This differs from the definition commonly accepted by middle-class European American groups who define intelligence mostly in terms of cognitive abilities associated with schooling, i.e. technical intelligence (Serpell, 1993). The Haitian parents, having observed the cleverness and wisdom of their children in contextual situations outside of the school walls, concluded that their children could not have a disability, and therefore rejected the disability label that the schools assigned to their children.

Essential to this discussion, in addition to the parents' definition of intelligence, is the way that the concept of disability is culturally and socially constructed in Haitian society. Empirical research suggests that certain concepts do not have the same connotation in other languages or cultures. For example, as mentioned in chapter two, the term *educado* among Mexican Americans holds socially and culturally constructed meanings. Being educated refers to having a sense of moral and personal responsibility and respect for the dignity of others (Valdes, 1996), not just schooling, as defined in Western cultures. Similarly, the word disability has a sociocultural meaning that extends beyond the definition of the term. In addition to the socially and culturally loaded connotation of the term as demonstrated in the findings, the word disability does not

directly translate into Haitian Creole or French to indicate all the nuances of the word as it is applied in the U.S., and especially how it is applied in education. The closest definition to the word disability is “handicap” which is, to the Haitian parents, mostly manifested by physical restrictions or physical loss of ability. Haitian parents referred to disability as a handicap, in the sense of mostly losing physical capabilities, and reacted toward disability as if it meant a severe deficiency.

Also related to parents’ rejection of disability labels is the sociocultural aspect tied to the meaning of disability. Disabilities have been linked to negative outcomes for the family unit in Haiti (Jacobson, 2008). A child with a disability can change a family’s self-identity and social standing, since a child in the Haitian culture is not a free standing individual, but a reflection of the whole family. If something is wrong with a child, then something must be wrong with the whole family. Therefore, when a child is identified as having a disability, all members of the family share the disability label both socially and psychologically.

Furthermore, having a child with a disability is seen as disgraceful for Haitian women and a failure on their part. According to Jacobson (2008), the greatest role and main function of a Haitian woman in life is the production of healthy children. Having a child with a disability is reason for emotional distress and has serious social ramifications (Jacobson, 2008) since the presence of a disability is often associated with supernatural influences. Disability is often viewed as a punishment or curse from God or other deities in the voodoo religion (Jacobson, 2008). Fathers often move out of the home and produce other children with new mothers to prove that they are not the cause of the curse, which leave the mother alone to care for the child with the disability, making the tasks

even more difficult for the mother (Jacobson, 2008). Furthermore, those punishments and curses are believed to be transferrable just by being in contact with the person afflicted, resulting in fear of people with disabilities. Popular superstitions, like the belief that if a pregnant woman looks at someone with a disability her child will have the same disability, turn people with disabilities into “contagious” outcasts to be kept away from society.

It is important to note that, in the case of the families in this study, such explanations were not expressed. The absence of such interpretations fits with the fact that the children’s disability designations did not involve any visible impairment that were compatible with the parents’ definitions of disability, as previously found by Harry (1992b; 1992c). In other words, the kinds of disabilities that would invoke supernatural interpretations were simply not present in these children. The school-based disabilities identified by school personnel were not of the type that would result in the children being socially stigmatized and rejected.

Historically, Haiti’s socioeconomic situation (Verner, 2008) may provide yet another explanation for how people with disabilities are treated. People with physical and mental disabilities are seen as having limited possibilities for educational or monetary success. In a country plagued with structural poverty (Justensen & Verner, 2007; World Bank, 2001), caring for a child with a disability is a heavy burden. Similar to practices found in other developing countries (Lynch & Hanson, 1992), the limited resources and the rampant structural poverty, which negatively affect certain parents’ ability to educate their children (Demombynes, Holland, & León, 2010; USAID, 2013), force these parents to prioritize whom in the family should get an education. Parents in

Haiti tend to invest their resources in children who demonstrate potential for educational success. However, it is not the case in the U.S. Since education in the U.S. is compulsory and access is largely free, Haitian parents in the U.S. do not have to choose whom to educate, therefore probably view the designation of a disability as interference to their children's full participation in the educational system, which further leads to their rejection of the disability labels.

The Influence of Socially Constructed Meanings on Parent Participation, Parental Trust, and School Personnel's Perceptions

Based on the U.S. education system's construction of special education services, the ideal is that parents are expected to be participating members of the IEP team (IDEA, 2004; 2007). Harry's (2008) review of the literature on CLD parents' participation pointed to the discrepancy between an ideal vision of parent-professional collaboration and the reality of practice. Harry pointed out that while this discrepancy is true for many families, it is often intensified for CLD families, and is made more so by school personnel's limited implementation of the law's real intent, as found in the current study. The findings of this study revealed the following impediments to the fulfillment of the participatory ideal as outlined in IDEA: violation of the mandate by not providing parents with adequate notification of the meeting, not accommodating parents' schedule, not providing the Procedural Safeguards manual in the parents' language in advance, not providing adequate translation, and not including parents in the discussion. School personnel's provision of opportunities for parental participation were limited, yet, since parents' culturally based understanding of their roles did not include the idea of participation in decision-making as presented in chapter four, the limited opportunities seemed adequate to them. However, their culturally based understandings of the meaning

of disability conflicted with the school personnel's definition of disability and undermined any possibilities of real collaboration.

Limited opportunities for participation. The way the IEP process was conducted at the observed schools was not conducive to parental participation. During observation, the parents were not truly part of the decision making and school personnel did not engage the parents through skilled dialogue as recommended by Barrera and Corso (2003), and appropriate scaffolding was not provided to help parents access the information included in the IEP development as mandated by IDEA (2004; 2007). The meetings were characterized by parents listening to school personnel recite test scores and list deficiencies in their children. The parents were asked to contribute something positive about their children toward the end of the meetings, however, little else was asked of them regarding their experiences at home with their children that would have contributed to a more authentic exchange. Furthermore, key terms were not translated and limited explanations were provided to the parents in their home language, which left parents with very limited understanding of the meeting. These findings are similar to those found by Peña (2001), Salas (2004) and Lo (2008). The use of skilled dialogue (Barrera & Corso, 2003) with proper scaffolding of the information being provided could have made the meeting a better experience for the parents.

Loss of trust. This lack of facilitation of parental participation, combined with discrepant culturally based interpretations, resulted in a loss of trust. Parental trust in school personnel was broken once parents realized the discrepancy between their own view of their children and how the school viewed their children. By labeling their children, the school was seen as an agent bent on marginalizing their children, which

made it difficult for parents to have a trusting conversation with school personnel (Harry & Klinger, 2006). Even if parents were to be more open to the idea of the existence of a disability, it would require more than one meeting to have Haitian parents trust school personnel enough to share personal information. Research in mental health has shown that Haitians may have difficulties divulging and discussing personal issues with professionals who are deemed strangers (Nicolas, DeSilva, Grey & Gonzalez-Eastep, 2006); Nicolas, DeSilva, Prater, & Bronkoski, 2009), as is the case with school personnel. The parents' reluctance to divulge and discuss their children's educational difficulties and needs may prove to be a culturally incongruent expectation.

Unlike the cultural practice of complete trust in educators in Haiti (Justensen & Verner, 2007), these Haitian parents were less trusting of the U.S. system. They felt that the educators did not understand child development, and were lacking in patience and tolerance. Since they did not agree with the educators' assessment of a disability in their children, parents did not see the need to have an active role in the IEP meetings. As illustrated in the findings, parents' weakened level of trust in the system after receiving a disability determination adversely affected their collaboration with school personnel.

It is also important to note that these Haitian families were negotiating a new environment in the U.S. (Cone, Buxton, Lee & Mahotiere, 2011; Stepick & Portes, 1986). As suggested by Rogoff (1998), individuals navigate new situations based on how they related to prior ones in which they had participated in the past. All of the parents immigrated to the U.S. as adults and none had grade level educational experiences in the U.S. Since sociocultural practices model how to deal with differences and negotiate conflicts (Rogoff, 2003), not having learned the norms and mores of U.S. schools leaves

Haitian parents at a disadvantage as they may not possess the required knowledge to meet the expectations of U.S. schools. The lack of active participation seems more in line with their previous experiences with Haitian schooling. Because parents were not in the habit of arguing with school personnel in Haiti due to their high regards for educators (Justensen & Verner, 2007), their observed deference at the IEP meetings was not due to a shared understanding or to their acceptance of the disability label, but rather the result of learned cultural behaviors, similar to Valdes' (1996) findings, in which Mexican parents left schooling to the school professionals, congruent to their practice back in Mexico. The parents in Valdes' study also reported limited knowledge of the U.S. schools' expectations as a factor to their limited participation.

Parents' limited participation might also have been influenced by the lack of services for people with disabilities in Haiti and their lack of familiarity with such services. Nationally there are limited services provided to people with disabilities (Jacobson, 2008), and services are not mandated, as is the case in the U.S. People with disabilities are the responsibility of the family, which must provide all care. This might have affected Haitian parents' service seeking behavior and their expectations of the school system in regard to educational services.

In addition to parents' view of disability being affected by their cultural and historical backgrounds, they had also developed understanding of certain aspects of the way that disability is socially constructed in the U.S. Parents were aware of the negative connotation attached to disability in the U.S. culture and its future ramifications on their children's prospects. They had learned that disability is a public phenomenon, recognized by the government, officially determined by social agencies or medical

professionals, documented for life, and almost impossible to reverse once recorded. With their knowledge of the importance of written documents and possible effects of those documents on their children's future, parents adamantly rejected the disability label, although they were willing to accept additional services that may contribute to academic success.

School personnel's perceptions. School personnel, while acknowledging the differences in parental interpretations of their roles, generally saw parental participation in the IEP process as inadequate. Further, they seemed unaware of the efforts parents made outside of school to assist in their children's education. Thus, although the findings revealed that educators considered parent participation in the IEP meeting as substandard, it was apparent that what educators perceived as apathy, as were the findings in Joshi et al.'s (2005) and Smrekar and Cohen-Vogel's (2001) study, can be attributed to misunderstandings of the parents' cultural backgrounds and practices. As noted in Rogoff's (2003) theory of the cultural nature of human development, differences among cultural groups are often the results of people's cultural and historical backgrounds. Community cultural values and practices dictate how people participate in cultural processes like schooling. Therefore, it can be assumed that the values that Haitian parents carried with them from their prior practices in Haiti affected their practices in the U.S. Their practices should not be regarded negatively, but should be seen as different – a departing point for new learning for parents and school professionals alike, and an opportunity for school professionals to provide the necessary supports to strengthen parents' functioning.

Recommendations for Practice

Different cultures have unique ways of responding to disabilities (Lynch & Hanson, 1992). Service delivery professionals should be mindful of cultural values when dealing with people from CLD backgrounds. Pedersen (1999), in his work in psychological counseling, asserted that culture-centeredness should be the foundation upon which services are delivered when dealing with diverse perspectives. This approach provides ways that honor and respect family values and choices, while providing the families with the supports necessary to strengthen their functioning. It requires professionals to have positive views of service recipients through cultural sensitivity, with emphasis on strengths and family choice. In other words, professionals in the helping fields need to develop multicultural competence, i.e. a set of behaviors, attitudes, and skills that enable them to function effectively within culturally diverse communities (Pedersen et al., 2002).

Culture is extremely important in analyzing parent behavior vis-à-vis the educational system, since historical-cultural backgrounds affect the way immigrants respond to service delivery systems and to professionals who deliver those services (Lynch & Hanson, 1992). In identifying families' adaptability to the U.S. culture, it is important to be aware of culturally determined behaviors and values (Kalyanpur & Harry, 2012) that affect their response to services. For instance, educators need to be made aware of Haitian parents' modes of participation in education so they can become sensitive to the level of direct participation they can expect.

Haitians are not accustomed to receiving social supports when dealing with disabilities. This affects their assistance seeking behavior in the United States. Just as they know how to seek tutoring, if they knew of the availability of other social services

they would have sought them. Therefore, more efforts have to be made to ensure that parents are aware of the availability of educational resources by using different venues, such as churches, health clinics, doctors' offices, and childcare facilities.

Due to SES and level of schooling, there will be variations in the Haitian parents' practices. In order to provide services effectively in a culturally and socially congruent manner, as Kalyanpur and Harry (2012) recommended, there should be cultural reciprocity in which service providers listen carefully to the parents and learn from them in order to tailor services that are appropriate to their needs, and not to classify all Haitians in one stereotypical category. In turn, providers need to explain to parents the meanings and values embedded in special education policy and practice.

The findings of this study revealed that the intent of the law concerning special education was not always implemented, and important aspects of IDEA was violated by school personnel who were more keen on meeting paperwork requirements than in implementing the mandate. Therefore, the school districts should provide more advocates to attend the IEP meetings with parents, especially with CLD parents who are not empowered through knowledge of the law and the educational rights of their children to fully advocate for their children.

This study demonstrates that Haitian parents were not aware of their educational rights under IDEA even during IEP annual reviews. Providing them with the safeguards manual in Haitian Creole is not enough. In addition to increasing awareness of services, non-threatening pre-conference meetings, as recommended by Harry (1992d) and Turnbull et al. (2010), should be facilitated by someone who knows the parents' culture and language. These meetings could accomplish explaining the special education

programs to the parents, discussing their rights, answering their questions and providing them with objective information so they are not intimidated at the actual meetings.

Additional workshops should be also provided to empower parents to advocate for their children. Salina's case is an example of one parent who benefited from receiving the necessary support from the ESE liaison specialist. Although she did not speak English, she was able to keep her grandson from receiving an emotional disability label by opposing educators' efforts to place her child in an emotional disability program. She even took her case to the district level when she did not get satisfaction at the school level. As corroborated by all the Haitian educators, when parents know what is expected of them, they participate more.

Further Research

The difficulties of translating certain technical terms and cultural concepts made interviewing the parents challenging. More empirical research must be done in special education with Haitian parents, and particularly where specific learning disabilities are concerned. Certain terms that are inherent in special education do not exist in Haitian Creole. Therefore, more research should be done in developing adequate terminologies. Otherwise research in special education with Haitians can be stifled.

The current study revealed that parents take active roles in advocating for their children when they are supported by others who know the system, as in the case of Salina who effectively advocated for her grandson to keep him from being placed in a program under the emotional disturbance category. Therefore, research that investigates the effect of training through workshops and actual advocacy supports are recommended.

The field of education can likewise benefit from research that would help make communication with Haitian families more reciprocal than observed at the schools in the

study. It is important that a certain level of understanding is reached between Haitian parents and school personnel regardless of backgrounds. One way this can be achieved is through cultural understanding of practices, views, and social factors that guide Haitians' way of dealing with the educational system. Research that will implement and evaluate reciprocal practices with school personnel through training are recommended. Since culture is dynamic, reciprocity is the best tool to use with culturally diverse groups, because it does not make particular prescriptions, but provides balanced tools to better communicate and allow others "to learn creatively from each other, to be able to address new issues as well as those with which humans have struggled for generations" (Rogoff, 2003).

Methodological Issues

Every effort was made at every step of the study to ensure that the requirements of the Institutional Review Board (IRB) were met, as well as to ensure the quality of the data. The following procedural efforts were made to strengthen the validity and reliability of the data, establish credibility, and minimize researcher bias:

1. Triangulation: Data were collected and analyzed from more than one source, including semi-structured interviews, participant observations, informal classroom observations and informal conversations.
2. Reflexivity: Throughout the study, I critically examined my biases, assumptions, interpretations and decisions that could have influenced the study. I used reflective memos throughout data collection and analysis to capture my subjective experiences, as discussed below under self-awareness and role as a researcher.

3. Peer debriefings: A research colleague not associated with the study and my advisor reviewed the codes at different steps of the analysis, as well as the thematic analysis. I worked together with the research colleague and my advisor to articulate and verify agreement of the codes; any discrepancies were resolved through deliberation, additions, deletions or substitutions of codes. They also acted as sounding boards in refining my ideas and making sense of the data.
4. Member checks: After each interview, the data was analyzed and member checks occurred with each participant. Interpretations and conclusions were reviewed with the participants for their agreement.

Although these measures were taken to ensure the quality of the data, several methodological challenges were still apparent:

Prolonged engagement. Qualitative research places great value on the investment of sufficient time to build trust between the researcher and the participants, and to learn about the phenomenon being studied. The length of the project spanned 8 months and data collection was scattered throughout this time period. Since the design of the study included observation of IEP meetings before conducting interviews, I was forced to wait until schools scheduled IEP meetings. Therefore, I was not able to have prolonged engagement with all of the families. Some families I met with more than 10 times (including times when I met with them to provide help with matters unrelated to the study). Others, however, I only met three times, which included the IEP meeting observation and the two interviews. As a result of methodical issues and the relatively short period of the study, I was not ideally able to ensure prolonged engagement with all

the participants. I addressed this issue by writing detailed field notes and by calling participants to ask for clarification. Additionally, a considerable amount of time was spent in systematically crosschecking my notes and codes. Saturation of the data was achieved through this process. Therefore, I am confident that the data support my analysis.

Self-awareness and role as a researcher. Like many professional researchers, I already had an intimate familiarity with the research topic and the literature. As a prior classroom teacher in the Haitian community, a researcher in schools, an observer of IEP meetings in the past while working on an unrelated research project, and a member of the Haitian community as a Haitian-American woman schooled in Haiti and the U.S., my experiences provide vantage points “that geared me to look at certain aspects of the empirical world [being studied] and to ignore others” (Charmaz, 2006, p.17). Therefore, I cannot claim scientific neutrality. My experiences with the Haitian community and my Haitian upbringing contribute to biases and assumptions that needed to be monitored. However, I remained as open as possible to whatever I saw and sensed throughout the different stages of the research, and I questioned my thoughts and ideas for possible biases and personal distortions by writing reflective memos (Charmaz, 2006). At times, I found it very difficult to stay neutral and to detach myself from wanting to help and offer guidance to the families who were struggling with the school’s placement of their children. I found myself unintentionally interjecting in meetings, offering to provide better translation to the parents and answering questions that were not adequately addressed. I often reminded myself that my role as a researcher was that of an observer, not an advocate. I addressed this dilemma at the end of data collection by offering my

help to each family. Some families I helped by providing or connecting them with needed resources, i.e. summer programs for their children, donating books from my children, and providing them with my contact information for future use. As noted by Lincoln (1995), reciprocity, which involves recognizing and validating the relationship between the researcher and the participants, is an important aspect of qualitative research. It is only humane for the researcher to give back to the participants.

Delimitations and Limitations of the Study

Delimitations are anticipated constraints, whereas limitations are unanticipated circumstances encountered during the course of a study, which constrain the interpretation of the findings. The delimitations and limitations below constrain the findings of the study in its generalizability. These delimitations/limitations are factors, whether inherent in the study's design or in qualitative research, that limit the scope of the findings' transferability. Therefore, the findings of this study are pertinent to low SES first generation Haitian parents with low level of education who have children with disabilities in the mild range.

Delimitations. The first delimitation is that the study concentrated on first generation Haitian parents by design, yet there are a large number of second-generation parents in the school system. Second-generation parents' views might have been different as they were schooled in the U.S. and would have been more familiar with the educational system. Their experiences and their perceptions could have been different than the current participants.

The second delimitation is that the study, although led through a purposeful sampling, is limited by parents' low levels of schooling and low SES, and therefore

should not be generalized to all Haitian parents. As illustrated in chapter four by the Haitian psychologist's example of Haitian parents with higher education and SES who were able to access the educational system as equally as middle-class mainstream parents, this study should not be generalized to all Haitian parents.

Limitations. The first limitation of this study is the severity of the children's disability and the range of disability categories in which the children were placed. The findings of this study apply to children in the mild range of their respective disability category. Except for the child suffering from sickle cell anemia, they all fell into judgmental disability categories, which are not visible and do not necessarily affect the children's functioning at home, hence they may be unrecognized by parents. If the range of disabilities had included low incidence categories, i.e. physical or sensory disabilities, the findings might have been different since parents may have been less reticent to acknowledge more visible disabilities.

The second limitation of the study is participant sampling. According to the design of the study, school personnel were asked to send invitation letters to the parents, which the parents were to return to the school to inform me of their willingness to participate before the IEP meeting. However, I did not receive any invitation letter back or any telephone calls from the parents prior to the meetings. All the participants were asked permission for me to attend the meetings in my presence right before the meetings, to which all the parents agreed. Perhaps my presence influenced their acquiescence.

The third limitation of the study is the number of interviews conducted with each school personnel. I only conducted one interview per individual. On hindsight, I wished I had planned for at least two interviews with each individual from the school personnel

sample. After transcribing the first interview, additional questions became apparent. I did not feel comfortable to go beyond the agreement in the consent form. In order to conduct a second interview, I would have to amend the consent form with the IRB, and we were already at the end of the school year. I tried to contact a few teachers at the beginning of the new school year and most of them were no longer at the schools. Therefore attempts to amend the consent form seemed futile.

The fourth limitation of the study is that three of the children whose family I was most involved with were in kindergarten and first grade, where serious lack of educational progress is not yet apparent. Parents can easily fail to realize the impact of a disability on the children's learning at that level. The parents who admitted concerns about the performance of their children, or to their children's need for extra educational help, were those with children in the 3rd to 5th grade. By these grades, parents were able to witness the children's struggle with academic subjects and could see results of achievement tests that are indicative of their children's performance.

The fifth limitation is the gender-skewed participation. Of the seven families, only one father attended the meeting and participated in the interview. Although he attended the meeting, he did not readily want to be interviewed. He encouraged me to interview his wife instead since he is not that involved in the education of the child. In Haiti, educational matters are the domains of the mothers. Mothers were the ones present at the IEP meetings and were the ones who sat for the interviews even when the fathers were in the house. Fathers might have presented a different perspective concerning disabilities and might have participated in the meeting differently from mothers.

The sixth limitation of the study is the parents' understanding of my role as a researcher. Although the study was explained to the parents, and I explicitly informed them that I was not an agent of the public school, I often felt they did not completely understand my role as a researcher. Sometimes they saw me as a member of the school personnel who would be able to fix their issues at the school. Most parents concluded the interviews by soliciting my help for the next meeting, asking me to talk to the principal on their behalf, or inquiring if I were going to work with their children to help them with academic difficulties. Their confusion could have come from meeting me for the first time at the IEP meeting. The way that they saw me makes me wonder if the responses would have been different if they saw me solely as a researcher, independent of the school system, which I went to great length to convey.

Conclusion

The findings from this study highlight the many challenges faced by Haitian parents who must undergo the IEP process and the challenges that limit their participation and interfere with their ability to advocate for their children. It is clear that the parents' worldview of disability is narrower than the school's definition of disability. The wide spectrum of disability known in the U.S. is not part of the parents' worldview. Therefore, they did not fully participate in the meetings since they did not agree with the outcome of the meetings.

On the other hand, school personnel, who are not aware of the many ways that parents participate in their children's education, often wish for more school involvement. However, parents' limited participation in the IEP process was the result of their early cultural socialization, which dictates their behavior and their ways of seeing the world. Silence does not always mean "yes" among Haitian parents. This was obvious in their

silence during the IEP meetings, yet they were very vocal about their objection of the labels when they were interviewed.

Culture is extremely important in analyzing parent behavior vis-à-vis the educational system, because varying levels of education, SES, exposure to the system and adaptation affect the way immigrants respond to both service delivery systems and the professionals who deliver those services (Lynch & Hanson, 1992). Immigrant families experience interruptions in their lifecycle as they adjust to life in the U.S. (Nicolas et al., 2011; Suarez-Orozco, 2004). These adjustments call for changes in roles and interactions. New expectations and tasks create confusion and increased stress (Nicolas et al., 2011; Stepick & Portes, 1986). Although cultural practices and traditions are dynamic and can be adjusted as individuals adapt to new circumstances (Rogoff, 2003), they need time, exposure to the new practices, and explicit practice sharing to facilitate the rate of social and cultural transfer at the microgenetic level of development (Rogoff, 2003).

Haitian parents' unwitting covert behavior in participating in their children's education led school personnel to perceive Haitian parents as less savvy. However, their behavior dictated a different story. Three out of the six parents advocated for their children to receive better services and fought disability labels. Salina went to the district and refused to sign papers to place her grandchild in a certain special education program. She had, however, received supports and learned how to advocate from other advocates with more knowledge of the system. For example, she even assumed the role of a leader. At one point in the interview, she said if she could find 10 other parents to sign a petition, she would have reported the school to the district in her effort to seek change, not only

for her grandchild, but also for all Haitian children at the school. Similarly, Clarissa fought the medical system against a disability label, and Nadine advocated for better services for her child.

This study also helped identify the challenges and issues that need to be addressed to help Haitian parents be active participants in the IEP process as intended by IDEA. Although the challenges seem to be many, they are not insuperable hurdles to vault. Tackling the issues through a culture-centered approach (Pedersen, 2000) and the implementation of cultural reciprocity (Kalyanpur & Harry, 2012) would have resulted in better IEP meeting outcomes and more parental involvement in the special education process. Therefore, school personnel's supports are critical to help the Haitian parents learn the educational system here in order to become partners who fully participate in the education of their children.

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Appendix A: School Personnel Interview Protocol

School Personnel Interview Protocol

This interview protocol will be used as a guide to the interview. The style that will be used to conduct this interview is conversational. Certain questions may be answered before they are asked, or what the participants say may eliminate the need to ask a particular question. Although the intent is to ask all the questions, it is left to the discretion of the interviewer, who will follow the lead of the participants.

To the participant: You are being asked to take part in a research study from the University of Miami. The purpose of this study is to investigate your experience with Haitian parents during IEP meetings. I would like to ask you some questions about your perceptions of Haitian parents' participation in the IEP meetings and their involvement in their children's education. I would like to tape record the interview in order to have an accurate record of our conversation. The interview will take about 30 minutes to complete. All information you share with me will remain confidential and will not be shared with anyone except the research team. I will not put your name on the tape and will remove any identifying information from the transcript of the interview. All information will be kept under lock at a secure place at the University. You may choose not to answer certain questions if you do not want to. You may ask me to turn the tape recorder off at any time if there is any information you do not want on tape. You may stop me at any time to ask questions. Do you have any questions?

If you have any question at a later time, you can contact Dr. Beth Harry, the principal investigator, at 305- 284-5363 or Margarete Mahotiere at 786-356-6274.

Questions

1. How long have you been teaching? How long have you been teaching at your current school?
2. What is your opinion of the level of participation of (student name)'s parent at the IEP meeting? (More specific questions may be asked here based on meeting observation.)
3. How would you compare this parent's participation to that of other Haitian parents?
4. How would you compare this parent's participation to that of parents from other backgrounds?
5. Do you feel Haitian parents participate as part of a team with the education professionals? Why or why not?
6. Can you think of some explanations for the Haitian parents' style of participation?
7. What are some ways that you see Haitian parents participate in their children's education in general?
8. How do you see them monitor their children's education?
9. Please describe your relationship with the Haitian parents.
10. Please tell me about the communication between you and the Haitian parents.

11. How do you think Haitian parents feel about education professionals?
12. What are your thoughts about Haitian parents in general?

Appendix B: Parent Interview Protocol

Parent Interview Protocol

This interview protocol will be used as a guide to the interview. The style that will be used to conduct this interview is conversational. Certain questions may be answered before they are asked, or what the participants say may eliminate the need to ask a particular question. Although the intent is to ask all the questions, it is left to the discretion of the interviewer, who will follow the lead of the participants.

To the participant: You are being asked to take part in a research study from the University of Miami. The purpose of this study is to investigate your experience with the IEP meeting at the school. I would like to ask you some questions about your experiences with the IEP meeting that you attended recently for your child. I would like to tape record the interview in order to have an accurate record of our conversation. This interview will take about 60 minutes to complete. All information you share with me will remain confidential and will not be shared with anyone except the research team. I will not put your name on the tape and will remove any identifying information from the transcript of the interview. All information will be kept under lock at a secure place at the University. You may choose not to answer certain questions if you do not want to. You may ask me to turn the tape recorder off at any time if there is any information you do not want on tape. You may stop me at any time to ask questions. Do you have any questions?

If you have any question after the interview, you can contact Dr. Beth Harry, the principal investigator, at 305- 284-5363 or Margarete Mahotiere at 786-356-6274.

Questions

1. Tell me about the meeting that you recently attended concerning your child's placement in special education programs.
2. How did the school notify you of the meeting? How much time did you have to prepare for the meeting?
3. Did you receive a Procedural Safeguards pamphlet?
4. What is your opinion of your level of participation at the IEP meeting?
5. Describe your understanding of that meeting.
6. How did you feel about the results of the tests?
7. Can you tell me about the services that your children will be receiving?
8. What do you think about the way that you were treated at the meeting? Do you feel like you were part of a team with education professionals?
9. What did you know about disability before you attended the meeting?
10. What does disability mean to you?
11. How do people view disability in Haiti?
12. What did you know about the special education program before the meeting?
13. What are some ways that you participate in your child's education in general?
14. Tell me about the communication between you and the school.

15. Did you meet with educators at times other than that meeting? What was the purpose of those meetings? How did you prepare for them?
16. When you have questions about your child's education, how do you seek information?
17. Do you seek information about your child's progress in school? If so, how?
18. What do you do when your child needs help with school matters?
19. Tell me about the way you feel concerning educators at your child's school.
20. How do you feel about the education that your child is receiving? Your child's school?

Parent Questionnaire
Haitian-Creole

Kesyonè sa-a pral sèvi tankou yon gid pou entèvyou a. Entèvyou a ap fèt tankou yon konvèsasyon. Gen repons pou sèten kesyon ki ka bay anvan menm yo poze yo, oswa gen kesyon ke yo pa menm bezwen mande dapre sèten repons patisipan yo deja bay nan kesyon devan yo. Malgre nou ta renmen poze tout kesyon ki nan kesyonè a, nap kite chwa sa-a pou moun kap poze partisipan an kesyon yo paske fòk li swiv repons moun kap reponn kesyon yo.

Pou patisipan an: Nou envite w patisipe nan yon etid rechèch Inivèsite Miyami ap fè. Objektif etid sa-a se pou nou egzamine eksperyans ou te fè nan reyinyon PEI ou te patisipe ladann nan pou pitit ou a tou dènyèman. Mwen ta renmen anrejistre entèvyou a pou m ka konsève bon jan enfòmasyon ou pral pataje avèk nou yo. Entèvyou sa-a ap dire apeprè 60 minit. Tout enfòmasyon wap pataje avèk nou yo ap rete konfidansyèl e nou pap pataje yo ak okenn lòt moun ki pa fè pati ekip rechèch la. Mwen pap ekri non w sou anyen. Lè nap fè transkripsyon an nap efase tout enfòmasyon ki ka pèmèt moun identifye w. Nou va sere tout enfòmasyon ou bay yo anba kle nan inivèsite a. Si ou vle ou gen dwa pa reponn kèk nan kesyon yo. Ou gen dwa mande m pou mwen sispann enrejistre vwa w nenpòt kilè lide w di w si ta gen kèk bagay ou pa vle enrejistre sou aparèy la. Ou kapab rete m pou w poze m kesyon nan nenpòt ki moman nan entèvyou a. Eske w gen okenn kesyon pou mwen?

Si w ta gen kesyon apre entèvyou a, ou va pran kontak ak Dr. Beth Harry ki se chèf investigatè nan etid la nan 305-284-5363, oswa Margarete Mahotiere nan 786-356-6274.

Kesyon

1. Pale m de reyinyon ou te patisipe pou pitit ou avan lekòl la te mete-l nan pwogram edikasyon espesyal la?
2. Ki mwayen lekòl la te itilize pou envite-w nan reyinyon an? Konbyen tan ou te genyen pou ou te prepare w pou reyinyon an?
3. Eske-ou te resevwa yon papye ki te di w tout dwa ke ou genyen nan reyinyon sa?
4. Sa w panse de nivo patisipasyon-w nan reyinyon an?
5. Dekri nan ki nivo ou komprann reyinyon sa.
6. Sa-w panse de rezilta tèst yo te bay pitit ou a?
7. Eske w ka pale m de sèvis yo pitit ou a pral resevwa nan pwogram nan?
8. Sa w panse de jan yo te trete w pandan reyinyon an? Eske yo te fè w santi ou se yon manm enpòtan nan desizyon ki tap fèt yo?
9. Kisa ou te konnen sou andikape (timoun ke gen difikilte aprann lekòl) avan ou te patisipe nan reyinyon an?
10. Kisa timoun ki gen andikape (difikilte pou aprann lekòl) vle di pou ou?
11. Kouman moun wè andikape (timoun ki gen difikilte pou aprann) yo an Ayiti?
12. Kisa w te konnen sou sijè pwogram edikasyon espesyal la avan reyinyon an?

13. Kijan ou patisipe nan edikasyon pitit ou an jeneral?
14. Pale m de kominikasyon ki genyen ant ou menm ak lekòl la.
15. Apa de reyinyon sa-a, eske w konn rankontre avèk edikatè yo avan? Si ou konn rankontre avèk yo, poukisa? Kisa w te fè pou w te prepare w pou reyinyon sa yo?
16. Lè w gen kesyon sou edikasyon pitit ou, kisa w fè pou jwenn repons yo?
17. Eske w konn eseye enfòmè-w sou pwogrè pitit ou ap nan fè lekòl la? Si se wi, kouman?
18. Kisa w fè lè pitit ou bezwen èd nan matyè skolè?
19. Kisa w panse de pwofesè lekòl pitit ou a?
20. Kisa w panse de edikasyon ke pitit ou ap resevwa a? Sa w panse de lekòl pitit ou-a?