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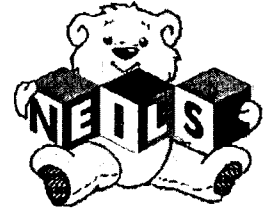
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ABSTRACT

This report describes several aspects of families' experiences in beginning early intervention services using data from the National Early Intervention Longitudinal Study (NEILS). Funded by the U.S. Department of Education, NEILS is following a nationally representative sample of 3,338 infants and toddlers and their families from the time they enter early intervention services until the children complete kindergarten. The report describes the timing of concerns, diagnosis, and entry into early intervention services, as well as parent perceptions of the identification process, the professionals with whom they interacted, and the resulting plan for goals and services. The findings indicate that the process of entering early intervention services is working well for many families. There also is evidence, however, to suggest that the process does not work equally well for all families and that how well it works is related to characteristics of the child and family. The general findings are summarized first, followed by the findings related to differences among families with different kinds of children and different demographic characteristics. Appended are the methodology and additional data tables. (Contains 3 tables, 12 figures, and 25 references.) (Author)



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NATIONAL EARLY INTERVENTION LONGITUDINAL STUDY FAMILIES' FIRST EXPERIENCES WITH EARLY INTERVENTION

January 2003

NEILS Data Report No. 2

Frank Porter Graham Child Development Institute,
University of North Carolina at Chapel Hill
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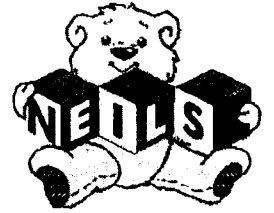
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**NATIONAL EARLY INTERVENTION LONGITUDINAL STUDY
FAMILIES' FIRST EXPERIENCES WITH
EARLY INTERVENTION**

EXECUTIVE SUMMARY

January 2003

NEILS Data Report No. 2

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The National Early Intervention Longitudinal Study (NEILS) is being conducted by SRI International under cooperative agreement (number H329E50001) to SRI International from the Office of Special Education Programs, U.S. Department of Education. NEILS is a collaborative effort of SRI International, the Frank Porter Graham Child Development Institute at the University of North Carolina Chapel Hill, Research Triangle Institute, and American Institutes for Research.

NEILS is part of a program of longitudinal studies funded by the U.S. Department of Education and being conducted by SRI International. Other studies in the program include the Special Education Elementary Longitudinal Study (SEELS) and the National Longitudinal Transition Study-2 (NLTS2). For more information about these studies, see <http://www.seels.net/> or <http://www.nlts2.org/>. The NEILS Web site is <http://www.sri.com/neils/>.

EXECUTIVE SUMMARY

This report describes several aspects of families' experiences in beginning early intervention services, using data from the National Early Intervention Longitudinal Study (NEILS). Funded by the U.S. Department of Education, NEILS is following a nationally representative sample of 3,338 infants and toddlers and their families from the time they enter early intervention services until the children complete kindergarten.

The report describes the timing of concerns, diagnosis, and entry into early intervention services, as well as parent perceptions of the identification process, the professionals with whom they interacted, and the resulting plan for goals and services. The findings indicate that the process of entering early intervention services is working well for many families. There also is evidence, however, to suggest that the process does not work equally well for all families and that how well it works is related to characteristics of the child and family. The general findings are summarized first, followed by the findings related to differences among families with different kinds of children and different demographic characteristics.

The Process of Beginning Early Intervention Services

The study looked at five critical events in the process of beginning early intervention services: first concerns, diagnosis, looking for early intervention services, referral to services, and development of the required Individualized Family Service Plan (IFSP). The average age at first concerns was 7.4 months. Caregivers reported a relatively short period of time between first concerns and first diagnosis (average difference of 1.4 months). However, the average time difference between caregiver report of diagnosis and agency report of referral for early intervention services was over 5 months. The average span between parent report of first diagnosis and the IFSP was 7 months, and the span between initial concerns and the IFSP averaged 8 months.

Most families (86%) reported that they discussed their concerns with a doctor or other medical professional, and most found this person to be very helpful (64%), although one in eight (12%) said the person was not at all helpful. Most families (about three-fourths) reported that finding early intervention programs and getting services started required little or no effort on their part. Only about 10% each reported that finding or securing services required a lot of effort.

Although all families in the study had recently had an Individualized Family Service Plan developed, nearly one out of five (18%) were not aware of the existence of a written plan for goals and services (the IFSP). Of those parents who were aware of such a plan, most (81%) reported that families and professionals together developed the goals. However, less collaboration was reported in determining the kinds of services (64% parents and professionals together) or amount of services provided (43% families and professionals together). Families generally were pleased with the decision-making process. More than three-fourths (77%) were

satisfied with their level of involvement in the process. More than one in five (22%), however, wanted more involvement.

Families also were very satisfied with the services they were receiving. It is important to remember that families were very early in their early intervention experience; 27% of families were not yet receiving any services. Almost all of the families who were receiving any services (97%) felt that the services they received were somewhat or highly individualized. Families were pleased with the amount and quality of the therapy services (speech, occupational, physical), as well as the other early intervention services provided. Three-fourths (76%) thought their child was receiving the right amount of therapy, but one in five (20%) reported that their child was getting less therapy than needed. One in seven (14%) thought their child needed a service that he or she was not getting. For these families, speech therapy (39% of those who believed the child needed another service), physical therapy (23%), and occupational therapy (22%) were most often seen as needed but not provided.

Families reported a high degree of satisfaction with early intervention professionals. They found the communication among the professionals who worked with their family to be good. Nearly all had good feelings about early intervention professionals and agreed that they respected the family's values and cultural background. Families thought their opinions were being listened to and that professionals helped them feel hopeful about their child's future.

Differences among Families

For the majority of families, their first experiences with early intervention were very positive. This was not the case for some families, however, and often these differences were systematically related to the characteristics of the child or the sociodemographic characteristics of the family. The reader is reminded that there may be other families, as well, whose experience entering early intervention was so difficult or unpleasant that they opted not to pursue services. This latter group of families is not represented in these data because the study sample included only families for whom an IFSP was developed.

Eligibility Category. Children are eligible for early intervention under Part C of IDEA because of a developmental delay, a diagnosed condition, or, in some states, a risk condition. Across these three groups, there were striking differences in the ages at which someone first became concerned about the child and the length of time between first concerns and the development of the IFSP. The average age of first concerns for children with diagnosed conditions or a risk condition was in the 3rd month of life, compared with the 12th month for children with developmental delays. For children with diagnosed conditions, the IFSP was developed an average of 7.1 months later, or when the child was 9.4 months old. For children with

developmental delays, the process took nearly 9 months, for an average age of 20 months at the time of the first IFSP.¹

Families' perceptions of the process of entering early intervention services differed by eligibility category with regard to several dimensions of the experience, but none of the three groups consistently had the most positive or negative experience. Eligibility category was related to the likelihood of discussing concerns about the child with a doctor or other medical professional and the perceived helpfulness of that person. Families of children with diagnosed conditions were most likely to discuss their concerns with a doctor. Families of children with developmental delays found the doctor or other medical professional to be less helpful, compared with the other two groups.

Age at IFSP. Families of older entrants to early intervention services had a more difficult time connecting to services than parents of children who began early intervention services prior to 1 year of age. Families of older entrants were less likely to discuss their concerns with a doctor or other medical professional and less likely to find their doctor helpful, and it took them more effort to find out about early intervention services. There were other differences based on age at entry to early intervention services, but there were no consistent trends with regard to how families of children of different ages perceived their early experiences.

Gender. The process of entering early intervention services appears to be very similar for parents of boys and girls.

Race/Ethnicity. Unlike the other child and family characteristics discussed thus far, race/ethnicity showed a consistent pattern across many aspects of the process of beginning early intervention services. For most of these differences, minority families had a more negative experience than other families. Many of the differences were only a few percentage points, but the reoccurrence over so many different items in the family interview suggests that these differences are real and need to be addressed. For example, it was more difficult for minority families to find out about early intervention services and to get services started; minority families were less aware of the IFSP; and minority families were less likely to think that professionals respected their values and cultural background and more likely to think that professionals ignored their opinions.

Educational Level of the Primary Caregiver. The pattern for families of different levels of education (and income, as will be discussed below) was similar to those just discussed. Nearly all of the comparisons examined showed differences in experiences and perceptions of services based on education level of the primary caregiver, with families with less well educated caregivers generally having a more negative experience. The following examples of aspects of beginning early intervention services showed a direct relationship with education of the caregiver—that is, as education went up, the percentage of families with positive experiences

¹ The NEELS sample included only children under 31 months of age at IFSP, and it is the oldest children at IFSP who are most likely to have developmental delays. The average ages of critical events for children with developmental delays would certainly be even higher if the sample had included children up to 36 months of age at IFSP.

increased. Those with less education were less likely to discuss concerns about their child with a doctor; more likely to report that it took a lot of effort to find early intervention services and get them started; less aware of the IFSP; less likely to have good feelings about professionals; and less likely to believe that professionals made them feel hopeful about their child's future.

Household Income. Household income, which is correlated with both race/ethnicity and level of education, showed the same pattern as the previous two family characteristics. In each of the following examples, as household income increased, the percentage of families with a positive experience increased. Low-income families were less likely to discuss their concerns about their child with a doctor; more likely to report that it took a lot of effort to find out about services and get them started; less aware of the IFSP; and less likely to see services as individualized.

For a few of the aspects of entering early intervention services, the pattern was reversed. Upper-income families were less likely to report that their doctor was helpful when discussing initial concerns about the child. In general, the higher the income, the more likely the family was to report that the child was receiving less therapy than needed.

Number of Adults in the Household. The process of entering early intervention services differed little based on the number of adults in the household.

Language of the Respondent. Several differences were found between families who were interviewed in English and those who were interviewed in Spanish. Spanish-speaking families had to put forth more effort to get early intervention services started and were far less aware of the IFSP. Spanish-speaking families also were more likely to report that mostly professionals made the decisions about types of services. English-speaking families were more likely to report that the communication among professionals working with them was excellent, but they also were more likely to report that it was fair or poor (i.e., the Spanish-speaking families were more clustered in the middle rating of good). Finally, Spanish-speaking families were less likely to have good feelings about professionals, less likely to believe that professionals respected their values and cultural background, and more likely to feel that professionals ignored their opinions.

Conclusions

Collectively, these data suggest that the U.S. early intervention system operated under Part C of the Individuals with Disabilities Education Act provides a positive and supportive entry into services for the vast majority of families who are enrolled in early intervention programs. Families report relative ease in accessing early intervention programs, perceive that services are based on individual child and family needs, and feel that they have a role in making key decisions about child and family goals. They report that they like early intervention professionals and that professionals make them feel hopeful about their child's future. The extent to

which these perceptions remain stable over time will be assessed in subsequent interviews over the course of early intervention, at age 3, and in kindergarten.

A few aspects of the process of beginning early intervention services warrant closer examination and possible changes.

- The average time of 11.5 months between first concerns and IFSP for children who begin early intervention services at 24 months of age or older seems unnecessarily long.
- Families of children with developmental delays and even those with diagnosed conditions needed more help from their doctors when they first discussed their concerns about their child.
- A small percentage of families experienced difficulties in accessing services and felt that the amount of services received was inadequate, and nearly one-fifth were not aware of a written plan for goals and services.
- The recurring relationship between race/ethnicity, caregiver education level, and household income with so many different aspects of the entry process is especially troubling. None of the differences are large, but the persistence of these relationships across so many different items suggests that the process of entering early intervention services is not as supportive for families who are minority, less well educated, or low income.

Furthermore, all of these findings are based only on families who actually began early intervention services. The study has no data on the number or experiences of families who did not successfully complete the entry process.

Much of the process of beginning early intervention services is working well for most families, but there is room for improvement. Research needs to continue to explore some of the barriers to swifter and smoother access to early intervention services, especially for some families. National, state, and local evaluation efforts need to continue to focus on the effectiveness of policies and procedures related to the entry process. These findings suggest the need for models, practices, and professional skills that are more supportive of families who are poor or less well educated and who come from diverse ethnic backgrounds. The goals of easy access to information and services, family-professional partnerships, and high-quality services have already been achieved for many families. Now strategies need to be put in place to achieve them for all families.

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We also would like to acknowledge and thank the families of children with special needs who have so graciously agreed to be part of this study and have given their time to be interviewed by us. In addition, we would like to thank the service providers and directors of early intervention programs around the country who recruited the families for the study and have found time in their busy schedules to complete NEELS data forms. The study families and the service providers who work with them are the backbone of NEELS. This study would not be possible without their cooperation and support. We thank them on behalf of the next generation of infants and toddlers with special needs who will benefit from their contributions.

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INTRODUCTION

Families are a key focus of the federal early intervention legislation for young children with disabilities. Part C of IDEA (the Individuals with Disabilities Education Act) repeatedly uses the phrase “infants and toddlers with disabilities and their families.” The law notes the need to enhance the capacity of families to meet the needs of their children and addresses this need through the development of an Individualized Family Service Plan (IFSP) and the provision of services for families. Recent amendments to Part C (P.L. 105-17, 1997) further reinforce the role of early intervention in supporting the needs of the entire family. Although research on children’s development had long recognized the importance of the family, the emphasis on the family in Part C constituted a policy milestone in that the critical role of the family in children’s development was now recognized in legislation as well.

Families play many roles with regard to early intervention services. In addition to the obvious one of caring for their children, they also are their child’s connection to the early intervention service system. The family needs to be committed to the necessity and value of seeking and finding services for the child in the community. The family needs to apply for and be willing to participate in the process of service delivery for what could be an extended period of time in order for the child to receive services.

This report examines families’ initial experiences with obtaining early intervention services. It is based on data from the National Early Intervention Longitudinal Study (NEILS). Funded by the U.S. Department of Education, NEILS is following a nationally representative sample of 3,338 infants and toddlers and their families from the time they enter early intervention services until the children complete kindergarten.

Families of children who have or are at risk for a disability at some point must go through a process of becoming concerned about their child, finding out about possible problems, and getting services. The timing of these experiences varies widely as a function of age, locale, and disability type (Reschly, 1996). In 1998, nearly 200,000 children were enrolled in early intervention programs under Part C of IDEA because of a disability or because they were at risk for a developmental delay (U.S. Department of Education, 2000). Each of these families had gone through some sort of process by which they found out about early intervention services and entered the service system.

The timing of identification for and entry into early intervention services spans the birth- to 36-month age period. For a few families, prenatal screening or problems during pregnancy indicate the possibility of disability or the risk of disability even before the child is born. For some families, the discovery of disability or a risk condition occurs at or shortly after birth because of prematurity, problems with labor and delivery, or the presence of obvious impairments not detected by prenatal screening. Most families, however, give birth to a child that they and their physician consider to be normal. They, along with physicians and other specialists,

must later discover the presence of disability by observing the child and making sense of emerging concerns about health, development, or behavior.

Ideally the process of discovering disability and entering early intervention services should be timely and supportive of families. Parents need professionals who attend to their concerns and help them gain access to services when needed. Part C programs should help families by providing a responsive system for (a) identifying children who have or are at risk for having a developmental disability, and (b) providing a comprehensive and individualized set of services for both children and families. There is almost universal agreement that parent satisfaction constitutes a key component of any evaluation of early intervention services (Bailey et al., 1998; McConnell et al., 1998; Roberts, Innocenti, & Goete, 1999; Turnbull, Turbiville, & Turnbull, 2000). Research using a variety of measurement approaches in a number of areas of the United States, as well as internationally, shows that families are highly satisfied with early intervention programs (Bailey, Skinner, Rodriguez, Gut, & Correa, 1999; Lanners & Mombaerts, 2000; McNaughton, 1994; McWilliam et al., 1995; Wesley, Buysse, & Tyndall, 1997). Some studies (e.g., Mahoney & Filer, 1996) report that a discrepancy exists between services deemed important and services actually received.

Little is currently known about families' experiences in finding and beginning early intervention services. Since it is likely that perceptions of services might change throughout the course of experience with those services (McWilliam et al., 1995), research on how families perceive special services over time is needed. This report addresses several questions about the process by which families enter early intervention:

- What is the timing of first concerns, diagnosis, referral, and service entry for families participating in Part C early intervention programs?
- What kind of contact do families have with medical professionals when first concerned about their child's development?
- How much effort does it take for parents to find out about and get early intervention services?
- What roles do parents play in developing the Individualized Family Service Plan (IFSP)?
- Are parents satisfied that the services provided are those that are needed?
- Are parents satisfied with initial interactions with early intervention professionals?

Descriptive findings for the six questions are presented. For each question, the experiences of different kinds of children and families are compared. Experiences are compared for families with children who were eligible for early intervention for different reasons (developmental delay, diagnosed condition, risk condition) and who began early intervention at different ages. Findings are also compared by gender and ethnicity. Family characteristics examined included household income,

caregiver education level, number of adults in the household, and language of the respondent.

Sample

The nationally representative sample for the study consisted of 3,338 children who entered early intervention for the first time between September 1997 and November 1998. Families were recruited through early intervention programs located in 93 counties in 20 states. Local program providers explained the study to families at or near the time of the IFSP. All families who met the study criteria (child less than 31 months of age and an adult in the household who spoke English or Spanish) were invited to participate. If a family had more than one child entering early intervention services, only one child was selected for the study. Programs invited 4,653 families to participate in the study, and 3,338 (71%) agreed.

Data Collection

The findings presented in this report are based on a 40-minute telephone interview conducted with "the person best able to answer questions about the child and the child's program". Fourteen percent of the interviews were conducted within 2 weeks after the IFSP meeting, 36% between 2 and 4 weeks of the IFSP, 18% between 4 and 6 weeks of the IFSP, and 25% between 6 and 16 weeks of the IFSP. Telephone interviews were completed with 89% of the families (n=2,974). Families who could not be reached by phone were sent a questionnaire in the mail. Some families who could not be contacted for the initial interview were successfully contacted for the next scheduled interview a year later. These families were asked some of the questions from the first interview during this interview. Interview or mail survey data were available for 3,200 children, or 96% of the sample. Some data, such as date of the IFSP meeting, were available for 100% of the sample. Individual items will have fewer respondents because of missing data. Additional information about the study's methodology is presented in Appendix A and at www.sri.com/neils.

This report is based on the telephone interviews conducted within 16 weeks of enrollment and some data from additional telephone and/or mail surveys for those who could not be interviewed within 16 weeks of enrollment. Most (83%) of the respondents were the child's biological mother. Other respondents included foster mothers (5.1%), grandmothers (3.9%), adoptive mothers (2.9%), and biological fathers (3.5%). Seven percent of the interviews were conducted in Spanish.

Limitations

The study's findings are limited in that they are based only on the experiences of families who actually entered the early intervention system. Families preferring not to participate in Part C early intervention programs, those whose children were

referred but not determined to be eligible, and those who did not persist in finding or entering services were not included in the study. It is reasonable to assume that if there are families who did not enter early intervention services because of serious obstacles they encountered, then their perceptions of the entry process would be far more negative than those of families who obtained service. Also, these findings are based on a few questions asked in the context of a telephone survey. More detailed information about family perceptions, especially specific concerns about programs or service providers, could not be captured with this methodology. A more extensive series of interactions with families might be needed to thoroughly explore the complexity of the process involved in finding and beginning early intervention services. These limitations notwithstanding, a number of conclusions can be drawn about the experiences of families entering early intervention programs, along with several qualifiers and recommendations.

FAMILIES' EXPERIENCES

Timing of Events Related to Enrollment in Early Intervention Programs

A typical sequence for families with an infant or toddler with special needs is: someone has concerns about a child's development, the child is seen by some number of professionals, and a diagnosis is made, followed by a referral to an early intervention program. By law, within 45 days of the referral, a meeting to develop an Individualized Family Service Plan (IFSP) must be held, and shortly thereafter the child and family begin to receive services. Although this order of events is typical, it certainly is not the only possible sequence. For some families, the child's special need is health related and is diagnosed before or at birth. For these families, the diagnosis is the first event. For other families, the nature of the child's difficulties may not be fully understood until after a referral to early intervention services or, in the case of some syndromes, until several months or years after services begin. Whatever the family's particular sequence and time span between events, the goal is always to identify developmental needs and get services started as early in the child's life as possible.

The timing and sequence for entering early intervention services were explored by looking at the dates for several critical events. Families were asked at what age someone first became concerned about the child's health, development, or behavior; the age of first diagnosis or identification as potentially eligible for services; and the age when they first looked for early intervention. The date of the referral to early intervention services and date of the IFSP were reported by the agency. The average, minimum, and maximum ages for each of these events are presented in Table 1, along with other descriptive data.

On average, first concerns were expressed at 7 months of age, the first diagnosis was at 9 months, early intervention was first sought at 12 months, referral to early intervention services occurred at 14 months, and the IFSP was developed at 16 months. The average time between first concern and IFSP was 8.3 months. The data on the minimum and maximum ages highlight the extreme variation within the population of children receiving early intervention services. Some children receiving these services are identified as needing services before they are born, while others are not identified until the third year of life. This finding is consistent with other NEILS findings, which indicate that the population receiving early intervention services is quite diverse and in need of services for a variety of reasons.

The findings in Table 1 are based on children who were recruited for the study and who, by definition, had to be younger than 31 months of age at the time of the first IFSP. Other study data show that the average age at referral was 15.5 months and the average age at first IFSP was 17.1 months for the full age range of children (i.e., up to 36 months of age) entering early intervention services. Nearly 9% of children entered early intervention between 31 and 36 months of age. The study has no data on the other events (concerns, diagnosis, when the family sought early

intervention) reported on for children who entered after 31 months of age. It can be estimated, by comparing the data on children who began early intervention services as infants with those who entered later, that if these data were available, they probably would raise the averages slightly for the three unknown events and also increase the average interval from time of first concerns to first IFSP from that reported in Table 1.

Table 1
AGES FOR EVENTS RELATED TO IDENTIFICATION FOR
AND ENROLLMENT IN EARLY INTERVENTION SERVICES

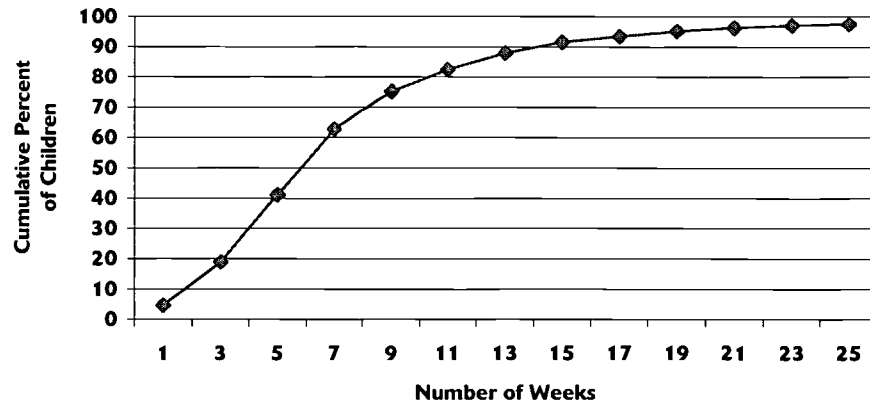
Event	Average Age (months)	Minimum Age	25th Percentile	Median	75th Percentile	Maximum Age (months)
First concerns about health or development	7.4	(5 wks. prior to birth)	0	4	15	30
First diagnosis or identification	8.8	(5 wks. prior to birth)	0	6	18	30
First looked for early intervention	11.9	0	3	11	21	31
Referral received by early intervention program	14.0	0	4	14	23	31
Development of IFSP	15.7	.3	6	16	25	31

N = 3,056 to 3,235.

Although the time difference between any two of these events is interesting, particularly important for policy is the time from the referral to the IFSP. Both of these time points were reported by the early intervention programs. IDEA mandates that the meeting to develop the IFSP be held within 45 days of referral to early intervention services. About 60% of the IFSPs were written within 45 days of referral (see Figure 1). Seventy percent were written within 8 weeks of referral, 79% within 10 weeks, and 90% within 14 weeks. The study has no additional information on why the time between the referral and IFSP was more than 45 days for so many families.

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Figure 1
CUMULATIVE PERCENTAGE OF CHILDREN
FOR GIVEN NUMBER OF WEEKS FROM REFERRAL TO IFSP

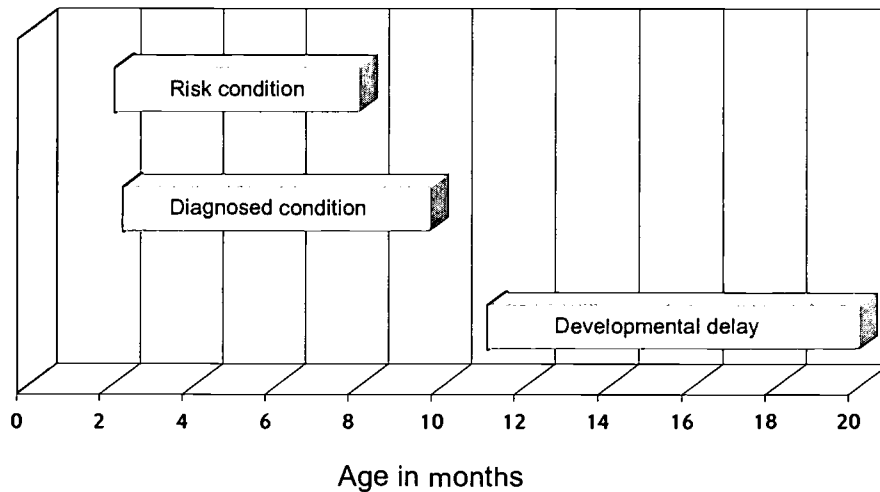


The timing of these critical events varied considerably for children eligible for early intervention services for different reasons. Other data from NEILS indicate that children with developmental delays were older than children with diagnosed conditions and risk conditions at the time of the IFSP (Hebbeler et al., 2001). For children with developmental delays who entered early intervention at less than 31 months, the average age at IFSP was 20 months (see Table 2), compared with 9.4 months for children with diagnosed conditions and 8 months for children with risk conditions. Not surprisingly, the age at first concerns also was later: 11.1 months for children with developmental delays, compared with 2.3 months for children with diagnosed conditions and 2.1 months for children with risk conditions. The time between first concerns and IFSP was also longer for children with developmental delays: 8.9 months, compared with 7.1 months for children with diagnosed conditions and 5.9 months for children with risk conditions. Figure 2 illustrates both the difference in age at first concerns and the time to IFSP for these three groups.

Table 2
AVERAGE AGE IN MONTHS OF THE TIMING OF CRITICAL EVENTS,
BY ELIGIBILITY CATEGORY

Event	Eligibility Category		
	Developmental Delay	Diagnosed Condition	Risk Condition
First concerns about health or development	11.1	2.3	2.1
First diagnosis or identification	12.9	3.5	2.5
First looked for early intervention	16.0	5.7	5.2
Referral received by early intervention program	18.2	7.8	6.1
Development of IFSP	20.0	9.4	8.0
Difference between first concerns and IFSP	8.9	7.1	5.9
	n = 1,826 to 1,923	638 to 675	436 to 463

Figure 2
TIME BETWEEN AVERAGE AGES AT FIRST CONCERNS AND AT IFSP,
BY ELIGIBILITY CATEGORY



The difference in time lag is also apparent when children for whom the IFSP was completed at different ages are compared. Children who began receiving early intervention services within the first year of life had a shorter time lag between first concerns and IFSP than did children who began in the third year of life. The average ages of the critical events for children who entered early intervention at less than 12 months, 12 to less than 24 months, and 24 to 31 months of age are shown in Table 3. The timing and spans are illustrated in Figure 3.

For most children who began early intervention at less than 12 months of age, the first concerns appeared very early. Half of this group had first concerns identified at or before birth; 75% had first concerns identified by 2 months of age. The relatively short time span for this group suggests that these children and their families were being connected to early intervention programs relatively quickly, and by 6 months of age the IFSP had been developed. It is difficult to know whether 6 months from concern to IFSP is a reasonable period of time. On one hand, it seems like a long time for a child whose special needs were identified at or before birth. On the other hand, many of these infants also were very sick and spent weeks in the hospital after they were born, and connecting with early intervention services might not have been a top priority for the family at that point. Of the time spans between events for the youngest children, the longest was 1.8 months between the diagnosis and when the family first looked for early intervention, which is consistent with the notion that the family was not ready to seek out an early intervention program immediately after the child's birth.

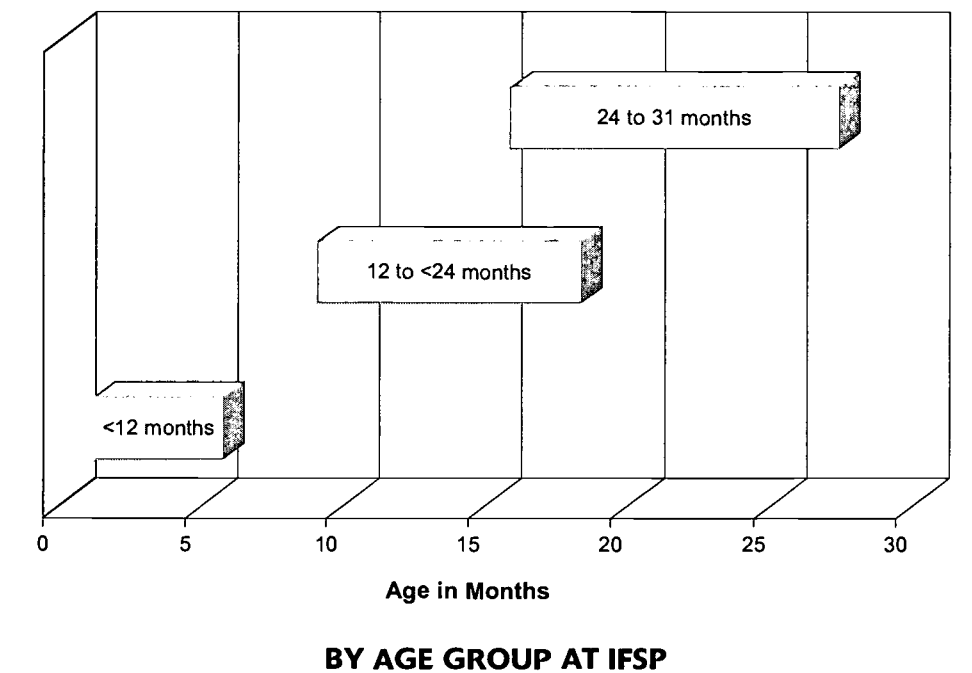
Table 3
AVERAGE AGE IN MONTHS OF TIMING OF CRITICAL EVENTS,
BY AGE GROUP AT IFSP

Event	Age Group at IFSP		
	Less than 12 Months	12 to Less than 24 Months	24 Months to 31 Months
First concerns about health or development	1.2	9.1	15.9
First diagnosis or identification	1.7	10.8	18.3
First looked for early intervention	3.5	14.1	22.1
Referral received by early intervention program	4.2	16.4	25.7
Development of IFSP	5.8	18.4	27.4
Difference between first concerns and IFSP	4.6	9.3	11.5
n =	1,235 to 1,313	963 to 1,020	858 to 902

The time spans in Figure 3 clearly illustrate the differences between children who enter early intervention in infancy versus later in toddlerhood. The time span between first concerns and IFSP for the oldest children, 11.5 months, was more than twice that of the youngest children at 4.6 months. This difference reflects some of the same issues that apply to the identification of developmental delay, because the majority of the children who enter early intervention at the older ages do so because of a developmental delay. Delays emerge over time. Someone has to be concerned and then pursue a course to diagnosis and intervention. There can be many months of uncertainty about the significance of a problem that might

contribute to the longer time lag for this group. Nearly every one of the average time spans between critical events was longer for children who entered after 24 months. The longest was 3.8 months, which was the average time between first diagnosis and looking for early intervention. This study has no additional information on why this time span should be so long. Interestingly, the time span between referral and IFSP was comparable across the three age groups: 1.6 months for those under 12 months; 2 months for those 12 to 24 months; and 1.7 months for those 24 to 31 months. This finding suggests that the entry process into programs is comparable for children of different ages.

Figure 3
TIME BETWEEN AVERAGE AGES AT FIRST CONCERNS AND AT IFSP,



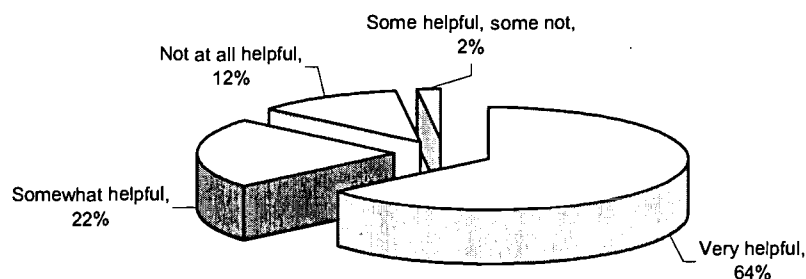
Helpfulness of Doctor or Other Medical Professional

After being asked how old the child was when someone first became concerned about his or her development, families were asked if they discussed these concerns with a doctor or other medical professional and, if so, how helpful the person was at that time. The question about discussing concerns with the doctor was not asked if someone first became concerned about the child when the child was less than 1 month old, on the assumption that the medical profession would be involved in all cases where the concern was manifest prenatally, at birth, or shortly thereafter.

Among families who first became concerned about their child after the first month of the child's life, 86% discussed their concerns with a doctor or other medical professional. Those who discussed their concerns with a medical professional

generally found this person to be helpful. Nearly two-thirds of the families (64%) reported that the medical professional was very helpful, and another 22% said the person was somewhat helpful. One in eight (12%) said the person was not at all helpful, and a small fraction (2%) were initially involved with more than one medical professional and said some were helpful and others were not (see Figure 4).

Figure 4
FAMILIES' RATING OF HELPFULNESS OF DOCTOR OR OTHER MEDICAL PROFESSIONAL



The likelihood of the family's discussing their concerns with a doctor or other medical professional was related to several child and family characteristics, including reason for eligibility for early intervention, age at IFSP, the ethnicity of the child, the education level of the primary caregiver, and household income.¹ Families of children with diagnosed conditions were more likely to discuss their concerns with a medical professional (94%, compared with 85% for children with developmental delays and 80% for children with risk conditions). The younger the child at IFSP, the more likely the parent was to have discussed a concern with a medical professional. Eighty-nine percent of children who entered early intervention before 12 months of age came from families who had discussed their concerns with a doctor or other medical professional, compared with 86% for children who began services between 12 and 24 months and 83% for those 24 months or older at IFSP.

African American families were least likely to have discussed their concerns with a medical professional (81%, compared, for example, with 87% for White families). Both caregiver education and household income were directly linked to the likelihood of discussing a concern about the child with a medical professional, with those with the least education or income being least likely to discuss their concerns. Only 76% of those who did not graduate from high school discussed their concerns with a medical professional, compared with 90% for those with at least a bachelor's degree. Only 80% of families with household incomes of \$15,000 or less discussed their concerns with a doctor, compared with 93% for those with incomes over \$75,000. The interview did not probe as to why families had not

¹ See Appendix B for additional data on child and family characteristics.

discussed their concerns with a doctor or other medical professional. Even among highly educated or wealthy households, about 1 in 10 families did not discuss their concerns about their child with a doctor or other medical professional. This finding could also be related to reasons for receipt of early intervention, with children from higher-income families more likely to be receiving early intervention services for difficulties perceived to be "less medical," such as communication difficulties (NEILS data currently being analyzed).

These same child and family characteristics were related to how helpful the family thought the medical professional was when the concerns were raised. Parents of children with developmental delays were less likely than other families to perceive the medical professional as very helpful (60%, compared with 79% for parents of children with risk conditions). Possibly, some doctors did not take seriously the initial concerns of the parents of children later found to have developmental delays. Developmental delays typically are more challenging to diagnose than are specific medical conditions. Children with risk conditions also might have primarily medical conditions rather than developmental conditions, or they might not have had any medical or developmental problems at the time they began early intervention services.

This hypothesis also is consistent with the ratings of families of children who were older at IFSP. Only 56% of families of children whose first IFSP was developed at 24 months or older found their doctor or other medical professional to have been very helpful, compared with 74% for parents of children who began early intervention at less than a year old. Again, the developmental needs of older children tend to be more difficult to recognize, which could explain why families found their doctor less helpful. Also, the lack of helpfulness of the doctor or other medical professional could have contributed to the late date of these families' entry into early intervention services if the families were initially told not to be concerned about the child's development.

The analysis by race and ethnicity showed that White families were least likely to report their doctor or other medical professional as very helpful (61%, compared with 69% for African Americans and 67% for Hispanics). More highly educated families were less likely to see their doctor or other medical professional as very helpful: only 59% of children with caregivers with at least a bachelor's degree found their doctor or other medical professional to be very helpful, compared with 69% of those who did not finish high school. The same socioeconomic pattern was seen with household income. Whereas 70% of those with incomes of \$15,000 or less perceived their doctor or other medical professional to be very helpful, only 61% of those with incomes over \$75,000 did so. Interestingly, the families with the highest household incomes were more likely to find the person somewhat helpful (the middle category) than the other groups, and thus they were the least likely to rate the medical professional as not at all helpful.

Several of the child and family characteristics are correlated with each other, which makes it difficult to know how much importance to place on any one finding of difference across groups. As has been noted, reason for eligibility was related to

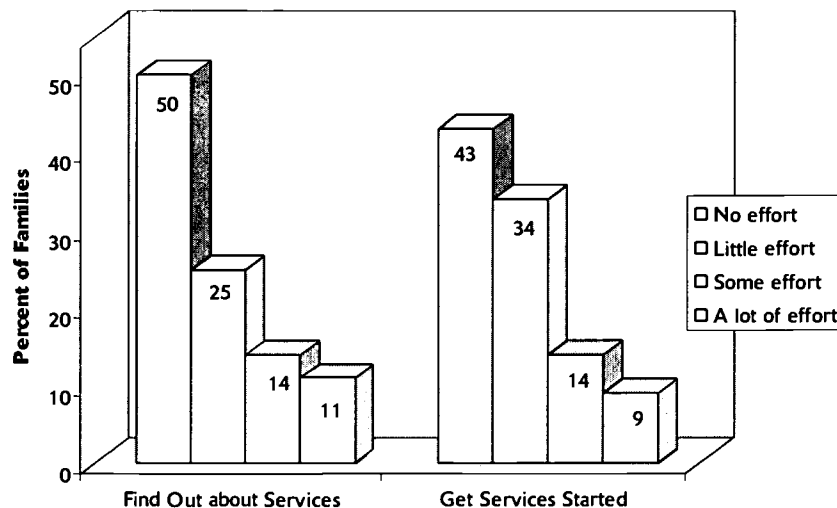
age at entry, with children with developmental delays beginning early intervention services later than those with diagnosed conditions or risk conditions. The socio-demographic makeup of families of children receiving early intervention services reflects society at large in that minority families tend to have lower incomes and to have less well educated female caregivers (Moore & Redd, 2002).

Amount of Effort

Families were asked two questions related to the effort needed to get services: (a) About how much effort did it take to find out where to go to get early intervention services? (b) After you knew where to go for services, how much effort did it take on your part to get services started? For each question, the family member being interviewed indicated a lot, some, little, or no effort required.

Half of the families (50%) entering early intervention programs indicated that it took no effort at all to find early intervention services, with another 25% indicating it took little effort (see Figure 5). One in nine families (11%) reported that it took a lot of effort to find early intervention services. Looking at the amount of effort to get services started once families knew about them, 43% reported that no effort was required to get services started. Another third (34%) reported that a little effort was required. About 1 in 10 (9%) reported that a lot of effort was required to get services started once they had been identified. For both of these indicators, it is important to remember that all of these families had actually entered early intervention. It is reasonable to conjecture that families who experienced serious difficulty finding out about or getting services might not have persisted enough to actually begin services and therefore were not available for the study.

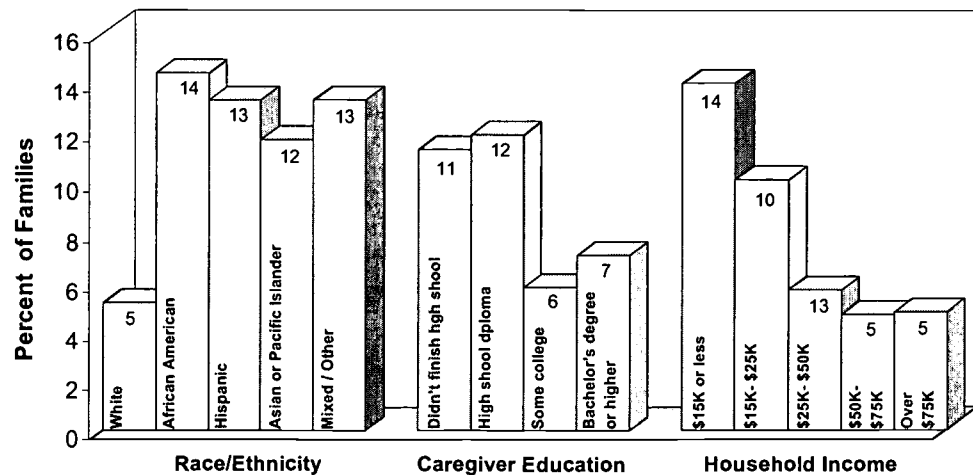
Figure 5
AMOUNT OF EFFORT REPORTED BY FAMILIES TO FIND SERVICES AND GET SERVICES STARTED



Even though finding and getting early intervention services started was a relatively easy process for most families, there were some differences in the level of reported effort for different kinds of families. The younger the child, the easier it was for families to find out about early intervention services. Fifty-nine percent of parents of children who entered at less than 12 months of age reported no effort at all, compared with 48% of those whose children entered between 12 and 24 months, and only 40% of families with children who entered at 24 months or older. The older children are more likely to be children with developmental delays; however, there were no differences among families of children with different eligibility reasons for early intervention, so the nature of the child's condition was not associated with difficulty in finding out about early intervention. The older children are seen by pediatricians less often, so that their families might have had less access to information. Also, the very fact that the families had more difficulty finding out about early intervention may have contributed to their beginning services at a later age. There were no differences related to age of child at entry with regard to the amount of effort to get services started once the family knew about services.

Overall, only 11% of families reported that it took a lot of effort to find out about early intervention services, but families of minority children were more likely to give this response. Whereas 8% of the families of White children said it took a lot of effort to find out about early intervention services, 13% of the African American and Hispanic families and 18% of the Asian or Pacific Islander families had trouble finding out about services. The pattern was similar for amount of effort to get services started. Only 5% of the White families reported that a lot of effort was needed to get services started. The comparable figures for African American, Hispanic, and Asian or Pacific Islander families were 14%, 13%, and 12%, respectively (see Figure 6).

Figure 6
FAMILIES WHO REPORTED A LOT OF EFFORT TO GET SERVICES STARTED, BY RACE/ETHNICITY, CAREGIVER EDUCATION, AND HOUSEHOLD INCOME



Families with less well educated caregivers and less household income also were more likely to have had to put forth a lot of effort to find out about services and to get services started. Of families in which the caregivers did not finish high school, 12% reported it took a lot of effort to find out about services, compared with 9% of those with at least a bachelor's degree. Similarly, 13% of families with household incomes of \$15,000 or less needed a lot of effort to find out about early intervention services, compared with 9% of those with incomes over \$75,000. The pattern was identical for amount of effort to get services started, with 11% of families with caregivers who did not finish high school reporting a lot of effort, compared with 7% for caregivers with at least a bachelor's degree. The comparable figures for families with household incomes of \$15,000 or less and over \$75,000 were 14% and 5%, respectively.

Developing a Plan for Services

The Individualized Family Service Plan is one of the key features (as well as a required component) of Part C services. The process of developing the plan should reflect a partnership between parents and professionals. Parents should be fully informed of their options and their rights so they can meaningfully participate in the decision-making that will result in services for their child and family (McGonigel, Kaufman, & Johnson, 1991).

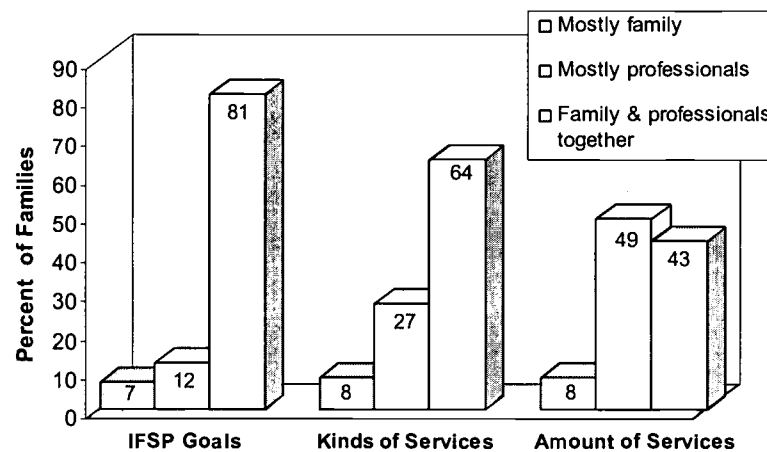
Families were asked whether they were "aware of a written plan that describes goals for [name of child] and the services [he/she] should receive? It may have been called an IFSP, Child and Family Service Plan, or something like that". Although all interviews were conducted within 4 months after an IFSP had been developed, a substantial proportion of families (18%) reported that they were not aware of such a plan.

Family members who were aware of the IFSP were asked to describe who decided on the goals or outcomes for the child or family, the kinds of services, and the amount of services: mostly the family, mostly professionals, or families and professionals together. They also were asked how they felt about their level of involvement in the decision-making process.

The extent of joint decision-making across the three kinds of decisions shows an interesting pattern (see Figure 7). For all three decisions (goals, kinds of services, amount of services), a small minority of families (7%-8%) reported that mostly the family made the decisions. A shifting balance of decision-making was evident across the three types of decisions. With respect to goals, four out of five families (81%) felt that this decision was made jointly by families and professionals, with professionals mostly deciding for only 12% of the families. Less joint decision-making was reported for determining the kinds of services: nearly two-thirds of the families (64%) felt the decision-making was joint, and 27% thought the decision was made mostly by professionals. Even less joint decision-making was perceived for the amount of services. Only 43% of families thought this decision was made jointly, and half (49%) thought it was made by professionals. Most families (77%)

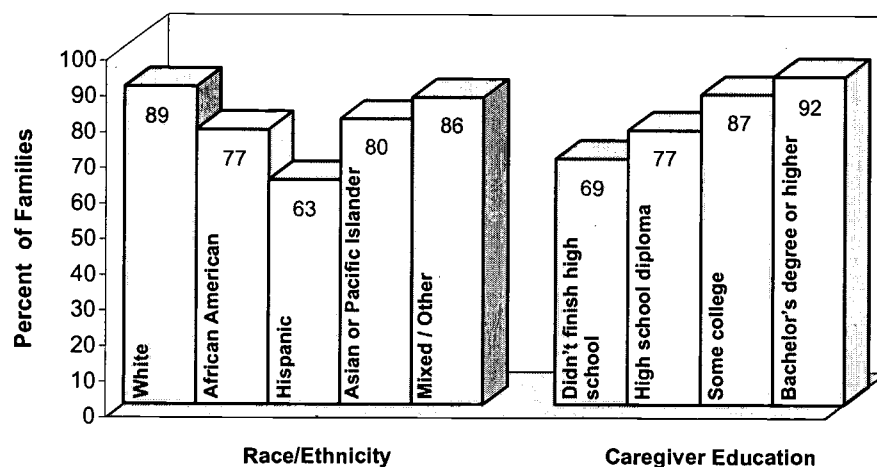
thought they were involved (the right amount) in the decision-making process, although more than one in five (22%) wanted more involvement, with only 1% wanting less.

Figure 7
FAMILIES' REPORTS OF WHO MADE DECISIONS ABOUT IFSP GOALS AND ABOUT KINDS AND AMOUNT OF SERVICES



There were some striking differences across families concerning who was and was not aware of the IFSP. Families of at-risk children were slightly less likely to be aware than families of children with developmental delays or diagnosed conditions (80%, compared with 83% for the latter two groups). Minority families, families with less well educated caregivers, families with less household income, and families for whom the language of the interview was Spanish were also less aware (see Figure 8). Eighty-nine percent of White families were aware of the IFSP, compared with 77% for African American families, 63% for Hispanic families, and 80% for Asian or Pacific Islander families. Only 69% of families with a caregiver who had not finished high school were aware of the IFSP, which was much less than the 92% of those with at least a bachelor's degree. Whereas only 71% of low-income families (\$15,000 or less) were aware of the IFSP, 94% of those with household incomes over \$75,000 reported such awareness. The differences for those interviewed in English or Spanish were the most dramatic: 84% awareness for English-speaking families, compared with only 35% for Spanish-speaking families. This difference is so large it could indicate that the Spanish-speaking families did not understand the interview question or that it was translated inappropriately. Alternatively, the finding could be valid. The language differences between the family and the program could have meant that the IFSP process was not explained to the family in a way that they understood.

**Figure 8
FAMILIES' AWARENESS OF THE IFSP,
BY RACE/ETHNICITY AND CAREGIVER EDUCATION**

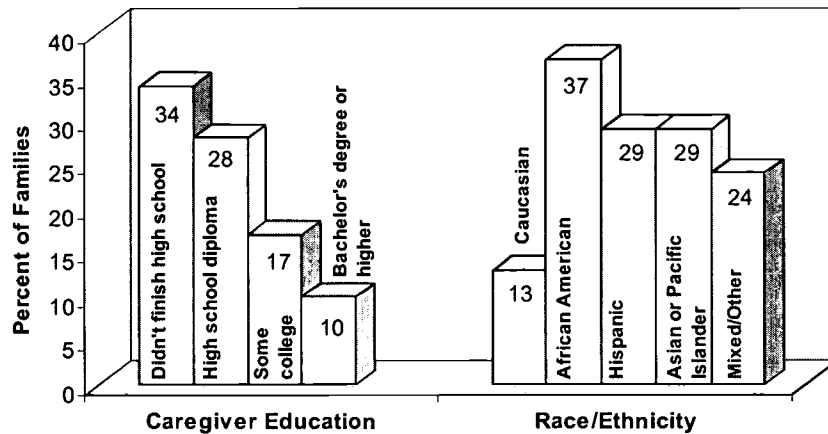


There were numerous differences across families with regard to how they perceived the decision-making process. Families with children with diagnosed conditions were least likely to think that decisions about goals and outcomes were made mostly by professionals (8%, compared with 12% for families of children with developmental delays and 14% for families of children with risk conditions). White families were more likely than minority families to see the decisions about the types of services as made jointly by the family and professionals (68%, compared with 59% for African Americans and 60% for Hispanics). High-income households were more likely to see the decisions about types of services as jointly made (62% for families with household incomes of \$15,000 or less, compared with 69% for those between \$50,000 and \$75,000). Families of children with developmental delays were less likely than those of children with diagnosed conditions or risk conditions to see the decision about amount of services as jointly made (40%, compared with 49% for the latter two groups).

Families with infants (less than 12 months old) were more likely to report they wanted more involvement than were families of children 12 to less than 24 months old, (24% and 19%, respectively). More minority families reported that they wanted more involvement. Only 13% of the White families wanted more involvement, compared with 37% of the African American families and 29% of the Hispanic and Asian or Pacific Islander families. The differences by caregiver education level and household income were equally striking (see Figure 9). More than a third (35%) of the families in which the caregiver had not finished high school reported wanting more involvement. The comparable figure for families with caregivers with a bachelor's degree or higher was only 10%. Similarly, one-third (34%) of families with household incomes of \$15,000 or less wanted more involvement, compared with 6% for families with incomes over \$75,000. There also was a difference with regard to the number of adults in the home. Thirty

percent of families with one adult wanted more involvement in decision-making, compared with 20% for households with two or more adults.

Figure 9
FAMILIES WHO WANTED MORE INVOLVEMENT IN DECISION-MAKING, BY CAREGIVER'S EDUCATION AND RACE/ETHNICITY



Parent Satisfaction

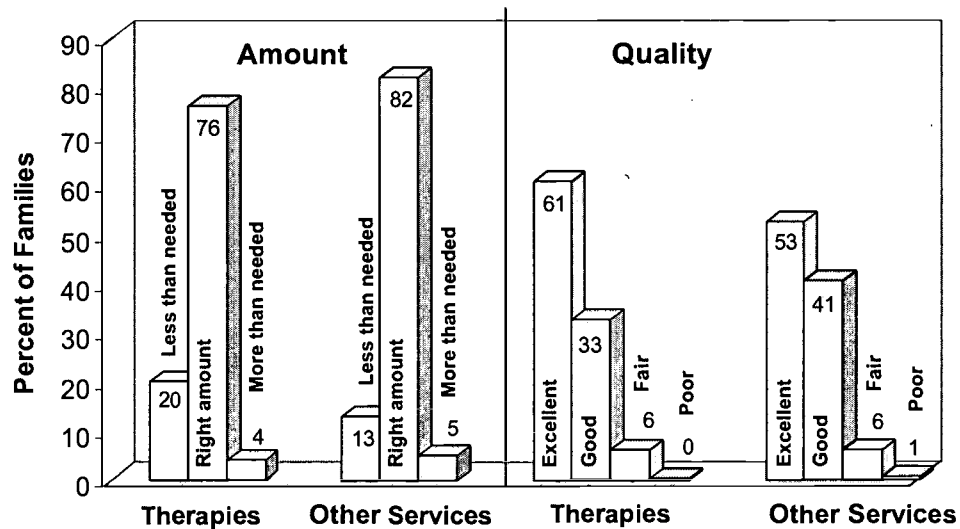
Families had been receiving services for only a short time when the interview was conducted. In fact, 27% of the families were not yet receiving any services. Nevertheless, it was important to get a sense of how satisfied families were with their first experience with early intervention services. Family members were asked to indicate whether they felt their child's speech, occupational, and physical therapy, as well as other early intervention services, were sufficient in amount (about right, more than needed, less than needed, enough for some but not others), whether they were individualized to their child's needs (highly, somewhat, not at all, mixed), and whether there were services that the family felt were needed but the child was not getting (yes or no; if yes, what other services were needed). Families also were asked to rate the perceived level of quality of those services.

Families generally were pleased with the amount of services being provided. More than half of the families (55%) reported that their child was receiving speech, occupational, or physical therapy, or some combination of the three. Of those receiving one or more of these services, three-fourths reported that their child was getting about the right amount of therapy (76%; see Figure 10). Most of the families whose child was receiving an early intervention service other than one of the three specified therapies thought the amount was about right (82%). However, one in five families (20%) indicated that their child was getting less therapy than needed, and one in eight (13%) reported that their child was getting less other early intervention services than needed.

One in seven families (14%) reported that there were services their child needed but wasn't getting. These families were asked what other services they thought their child needed. The most common additional services were speech therapy (39% of those indicating a need for other services), occupational therapy (22%), physical therapy (23%), play groups or play therapy (9%), and behavioral therapy (8%).²

Families also were asked to rate the quality of the services they were receiving. The overwhelming majority of families (93%) indicated that both their therapy services and other early intervention services were excellent or good. Fewer than 1% rated the quality of services as poor. About two-thirds (69%) rated the services as highly individualized, and another 28% rated the services as somewhat individualized. Only 3% felt that the services were not individualized at all.

Figure 10
FAMILIES' SATISFACTION WITH THE AMOUNT AND QUALITY OF SERVICES



Child and family characteristics were associated with families' perceptions of the amount of services their child was receiving. Families of children with diagnosed conditions were more likely to report that their child was receiving less therapy than needed (22%, compared with 20% for developmental delay and 18% for risk conditions). White families also were more likely than minority families to see their child as receiving less therapy than needed. Twenty-two percent of White families reported less therapy service than needed, compared with 17% for African American families, 16% for Hispanic families, and 14% for Asian or Pacific Islander families. The higher the level of caregiver education, the more likely the family was to report that the

² Families were allowed to name as many additional services as they wished; thus, percentages sum to more than 100%.

child was receiving less therapy than needed: 10% of the families with caregivers who had not finished high school, compared with 25% of families in which the caregiver had at least a bachelor's degree. Household income showed the same relationship, with higher-income families more likely to report that more therapy services were needed. Eighteen percent of families with household incomes of \$15,000 or less wanted more therapy services, compared with 25% of families with incomes between \$50,000 and \$75,000. The exception to the income relationship was families with incomes over \$75,000, only 18% of whom reported that their child was receiving less therapy than needed. One explanation could be that the families with the highest incomes were purchasing additional therapies; however, other data from the family interview did not show that higher-income families were more likely to have used their own funds or their insurance to obtain additional services.

There also were numerous differences across families with regard to the amount of nontherapy services. Minority families were more likely to report that their child was receiving more services than needed (9% African American, 10% Hispanic, 13% Asian or Pacific Islander, compared with only 2% White). The more education the caregiver had, the more likely the family was to report that the child was not receiving enough services. For example, 9% of families with caregivers who had not finished high school reported that their child was receiving less service than needed, compared with 16% of those with at least a bachelor's degree.

Different kinds of families also viewed the individualization of services and the quality of services differently. African Americans saw the services as less individualized than did other groups. Only 61% of the African American families saw the services as highly individualized, compared with 72% of White families. Low-income families also saw the services as less individualized; 62% of low-income families rated the services as highly individualized, compared with 72% of families with incomes over \$25,000.

Families of children with developmental delays or risk conditions were more likely to rate their services as fair or poor, compared with families of children with diagnosed conditions (7% and 11%, compared with 3%). African American and Hispanic families were less pleased with their nontherapy services, with 11% and 8% giving fair or poor ratings, compared with only 5% of the White families and 3% of the Asian/Pacific Islander families. Low-income families also were more likely to give fair or poor ratings to their nontherapy services than were upper-income families (10% for families with incomes of \$15,000 or less compared with 3% of those with incomes over \$75,000). There were no differences for any of the child or family characteristics with regard to whether the family said there were services the child needed but was not receiving.

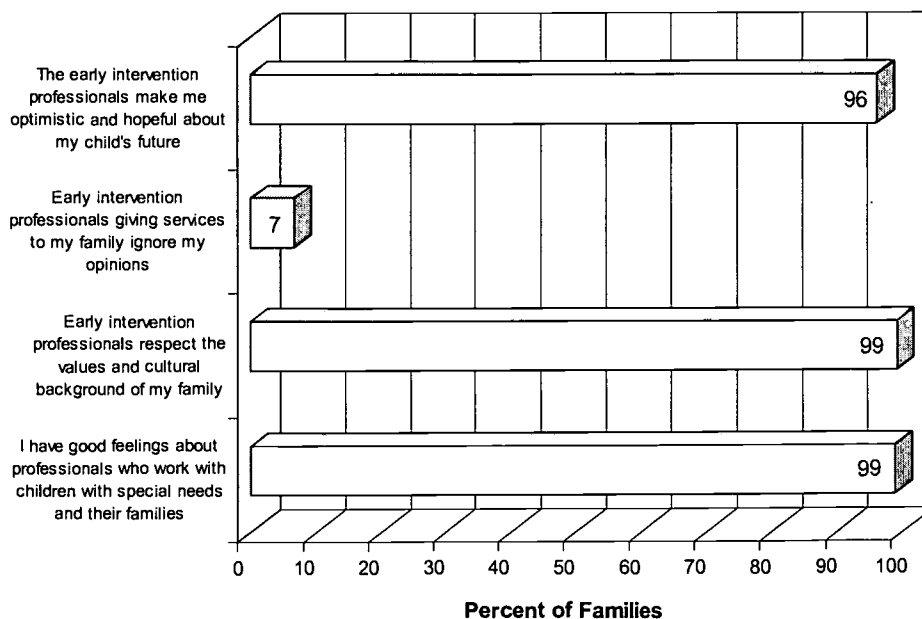
Interactions with Early Intervention Professionals

Families were asked how well they felt professionals who worked with their family had been communicating with each other about needs and services. They also were asked to rate the extent to which they had good feelings about professionals who work with children with special needs and their families, whether early intervention professionals respected the values and cultural background of their family, whether early intervention professionals ignored their opinions, and whether early intervention professionals made them feel optimistic and hopeful about their child's future.

More than half of the families (53%) reported that communication among professionals was excellent, with most of the remainder rating it as good (37%) and a minority rating it as fair (7%), poor (3%), or some OK and some not (<1%). One in 12 families reported working with only one professional (8%).

The families' ratings of early intervention professionals on several characteristics are displayed in Figure 11. Families reported a very high degree of satisfaction with early intervention professionals, with 96% or more agreeing or agreeing strongly that they had good feelings about early intervention professionals, that these professionals respected their families' values and cultural background, and that they helped them feel optimistic about their child's future. Families also felt that professionals were not ignoring the families' opinions: only 7% agreed that professionals ignored their opinions.

Figure 11
FAMILIES WHO AGREED OR STRONGLY AGREED WITH
STATEMENTS ABOUT EARLY INTERVENTION PROFESSIONALS

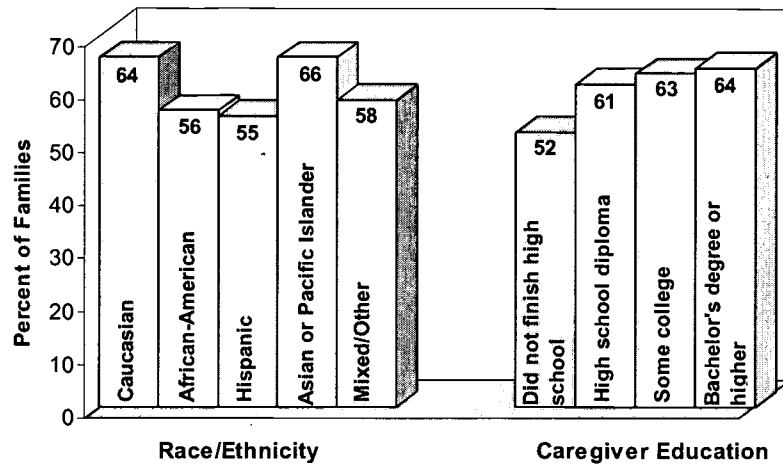


Families' opinions about the level of communication among professionals differed across different types of families. Families of children with risk conditions were more likely to rate the communication as excellent (61%), compared with families of children with developmental delays (51%) or diagnosed conditions (52%). More Asian or Pacific Islander families gave ratings of excellent (66%) than African American (56%), White (52%), or Hispanic (49%) families. Families with caregivers with at least a bachelor's degree were less likely to give a rating of excellent (46%), compared with other education levels (54% to 57%). Low-income families were the most pleased with the level of communication (61% rated it excellent, compared with 44% to 55% for the other groups). English-speaking families also were more pleased than Spanish-speaking families with the level of communication among professionals (54% rated it excellent, compared with 34%).

Families' feelings about professionals also were related to differences in families. Slightly more families of children with risk conditions had better feelings about special-needs professional than those of children with developmental delays or diagnosed conditions (68% strongly agreed, compared with 64% and 59%). Hispanic families and those for whom the interview was conducted in Spanish were less strong in their feelings about professionals (55% strongly agreed, compared with 62% to 67% for the other groups; 39% for Spanish-speaking families, compared with 65% for English-speaking families). The likelihood of having good feelings about special-needs professionals was related to both education and household income, with fewer less well educated and lowest-income families having good feelings.

There also were differences among families in how they perceived professionals' respect for their families' values and background. Families of children with risk conditions gave professionals higher ratings than families of children from the other two eligibility groups (64% strongly agreed, compared with 61% and 60%). Ethnicity, education level, and income all were related to families' perception of professionals' respect for their backgrounds. Hispanic and African American families gave professionals lower marks than Asian or Pacific Islander and White families (55% and 56% strongly agreed compared with 66% and 64%; see Figure 12). Families with more education and more income were more likely to see professionals as respecting their backgrounds. These families, of course, were closer to the professionals in education and income level, and possibly in race and ethnicity as well.

Figure 12
FAMILIES WHO STRONGLY AGREED THAT "EARLY INTERVENTION
PROFESSIONALS RESPECT THE VALUES AND CULTURAL
BACKGROUND OF MY FAMILY," BY RACE/ETHNICITY AND
CAREGIVER EDUCATION



SUMMARY AND CONCLUSIONS

This report describes several aspects of families' experiences in beginning early intervention services. The findings are based on interviews with a nationally representative sample of families participating in early intervention programs under Part C of the Individuals with Disabilities Education Act (IDEA). The report describes the timing of concerns, diagnosis, and entry into early intervention services, as well as parent perceptions of the identification process, the professionals with whom they interacted, and the resulting plan for goals and services. The study is unique in that it is the first to reflect parental perspectives shortly after entry into early intervention services. Furthermore, because the data are based on a nationally representative sample, it is the first such study that can be said to reflect the state of the nation on these issues.

The findings indicate that the process of entering early intervention services is working well for many families. There also is evidence, however, to suggest that the process does not work equally well for all families and that how well it works is related to characteristics of the children and families. The general findings are summarized first, followed by the findings related to differences among families with different kinds of children and different demographic characteristics.

The Process of Beginning Early Intervention Services

Children begin early intervention services at all ages between birth and 36 months. About 25% of children enter Part C services before 7 months of age. Fewer children enter at the end of the first year of life, and then the numbers increase again around 24 months of age and then decrease slightly up to 36 months of age. The study looked at the time spans between five critical events in the process of beginning early intervention services: first concerns, diagnosis, looking for early intervention services, referral, and IFSP. The data for the entire series of events refer only to children who entered early intervention before 31 months of age because that was the maximum age of children recruited into the study.

Retrospectively, caregivers reported a relatively short time between first concerns and first diagnosis (mean interval of 1.4 months). However, the mean time difference between caregiver report of diagnosis and agency report of referral for early intervention was 5.2 months. The average span between parent report of first diagnosis and IFSP was 6.9 months, and the span between initial concerns and development of the IFSP averaged 8.3 months. The delay in getting children and families into the early intervention system thus lies not in the length of time between first concerns and diagnosis, but rather in the length of time from diagnosis to referral for services. Unfortunately, the reasons for this delay cannot be ascertained from this study. Possible reasons could include parent preferences, distress, or uncertainty over desire for services (Abrams & Goodman, 1998); lack of coordination among the various agencies involved in early intervention (Harbin,

McWilliam, & Gallagher, 2000); failure to incorporate developmental or behavioral screening in standard pediatric examinations (Dobbs, Dworkin, & Bernstein, 1994; Li & Logan, 1996); or the fact that pediatricians as a group are more likely to refer for early intervention children with severe developmental delays or children who are older than 3 years (Epps & Kroeker, 1995a; 1995b). In reality, all of these and other factors probably play important roles, but the salience of each may vary by family and community. More detailed examinations of systems of services are needed to identify why it is taking so long to refer families to early intervention programs. Research can help identify the various types of barriers and the conditions under which they are likely to occur, but local service providers also will need to conduct their own evaluations to determine which factors are especially important in their community or with certain families. Most families (86%) reported that they discussed their concerns with a doctor or other medical professional, and most found this person to be very helpful (64%), although one in eight (12%) said the person was not at all helpful. Most families (about three-fourths) reported that finding early intervention programs and getting services started required little or no effort on their part. Only about 10% reported that finding or securing services required a lot of effort.

Although all families in the study had recently had an Individualized Family Service Plan developed, nearly one out of five (18%) were not aware of the existence of a written plan for goals and services (the IFSP). Of those parents who were aware of such a plan, most (81%) reported that families and professionals together developed the goals. However, less collaboration was reported in determining the kinds of services (64% parents and professionals together) or amount of services provided (43% families and professionals together). Families generally were pleased with the decision-making process. More than three-fourths (77%) were satisfied with their level of involvement in the process. More than one in five (22%), however, wanted more involvement.

Families also were very satisfied with the services they were receiving. It is important to remember that families were very early in their early intervention experience; 27% of families were not yet receiving any services. Almost all families who were receiving any services (97%) felt that the services they received were somewhat or highly individualized. Families were pleased with the amount and quality of the therapy services (speech, occupational, physical), as well as the other early intervention services provided. Three-fourths (76%) thought their child was receiving the right amount of therapy, but one in five (20%) reported that their child was getting less therapy than needed. One in seven (14%) thought their child needed a service that he or she was not getting. For these families, speech therapy (39% of those who believed the child needed another service), physical therapy (23%), and occupational therapy (22%) were most often seen as needed but not provided.

Families reported a high degree of satisfaction with early intervention professionals. They found the communication among the professionals who worked with their family to be good. Nearly all had good feelings about early intervention professionals and agreed that they respected the family's values and cultural

background. Families thought their opinions were being listened to and that professionals helped them feel hopeful about their child's future.

Differences among Families

For the majority of families, their first experiences with early intervention were very positive. This was not the case for some families, however, and often these differences were systematically related to the characteristics of the child or the sociodemographic characteristics of the family. The reader is reminded that there may be other families, as well, whose experience entering early intervention was so difficult or unpleasant that they opted not to pursue services. This latter group of families is not represented in these data because the study sample included only families for whom an IFSP was developed. This section summarizes the data for each of the family and child characteristics examined to see how the process of beginning early intervention services differed across families.

Eligibility Category. Children are eligible for early intervention under Part C of IDEA because of a developmental delay, a diagnosed condition, or, in some states, a risk condition. Across these three groups, there were striking differences in the ages at which someone first became concerned about the child and the length of time between first concerns and the development of the IFSP. The average age of first concerns for children with diagnosed conditions or a risk condition was in the 3rd month of life, compared with the 12th month for children with developmental delays. For children with diagnosed conditions, the IFSP was developed an average of 7.1 months later, or when the child was 9.4 months old. For children with developmental delays, the process took nearly 9 months, for an average age of 20 months at the time of the first IFSP.³

Families' perceptions of the process of entering early intervention services differed by eligibility category with regard to several dimensions of the experience, but none of the three groups consistently had the most positive or negative experience. Eligibility category was related to the likelihood of discussing concerns about the child with a doctor or other medical professional and the perceived helpfulness of that person. Families of children with diagnosed conditions were most likely to discuss their concerns with a doctor. Families of children with developmental delays found the doctor or other medical professional to be less helpful, compared with the other two groups.

Families of children with risk conditions were slightly less aware of the IFSP than families of children from the other two groups and less likely to see the decisions about goals as jointly made by families and professionals. Families of children with developmental delays were far more likely to think that professionals made the decisions about the amount of early intervention services (as opposed to seeing the decision as made by families and professionals jointly), but families of children with

³ The NEILS sample included only children under 31 months of age at IFSP, and it is the oldest children at IFSP who are most likely to have developmental delays. The average ages of critical events for children with developmental delays would certainly be even higher if the sample had included children up to 36 months of age at IFSP.

diagnosed conditions were more likely to think their child was receiving less therapy than needed. There were a few other statistically significant differences in the perceptions examined, but the numerical differences were fairly small.

Age at IFSP. Families of older entrants to early intervention services had a more difficult time connecting to services than parents of children who began early intervention services prior to 1 year of age. Families of older entrants were less likely to discuss their concerns with a doctor or other medical professional and less likely to find their doctor helpful, and it took them more effort to find out about early intervention services. Their difficulties might be due to an unwillingness to recognize a delay on the part of the medical profession. Research shows that pediatricians and other professionals may be reluctant to say that a child is delayed unless the delay is severe or the child is over 2 to 3 years of age (Bailey, Skinner, Hatton, & Roberts, 2000; Epps & Kroeker, 1995a; 1995b). Some of these difficulties may explain why these children were beginning early intervention services at a later age.

Child's age at entry was related to several other aspects of beginning early intervention services. Families of older children were less likely to see decision-making about amount of services as made jointly by families and professionals. They were more likely to think their child was receiving less nontherapy service than was needed and more likely to think that professionals ignored their opinions. Families of 12- to 24-month-olds at entry were more likely to be satisfied with their amount of involvement in the decision-making but less likely to think professionals made them feel hopeful about their child's future. In sum, aside from the convergence of findings that point to a more difficult entry process for older children, there were no consistent trends with regard to how families of children of different ages perceived their early experiences.

Gender. The process of entering early intervention services appears to be very similar for parents of boys and girls. Only one statistically significant difference was found across all the dimensions examined: parents of girls were more likely to feel that professionals ignored their opinions.

Race/Ethnicity. Unlike the other child and family characteristics discussed thus far, race/ethnicity showed a consistent pattern across many aspects of the process of beginning early intervention services. For most of these differences, minority families had a more negative experience than other families. Many of the differences were only a few percentage points, but the reoccurrence over so many different items in the family interview suggests that these differences are real and need to be addressed.

The experience of minority families differed in numerous ways:

- It was more difficult for minority families to find out about early intervention services and to get services started.
- Minority families were less aware of the IFSP.

- Minority families were less likely to feel that the decisions about types and amount of services were made jointly by both families and professionals, and were less likely to be satisfied with their level of involvement in the decision-making.
- Minority families were less likely to think services were individualized.
- Minority families rated the quality of nontherapy early intervention services lower.
- Minority families were less likely to think that professionals respected their values and cultural background and more likely to think that professionals ignored their opinions.
- Fewer minority families reported that professionals made them feel hopeful about their child's future.

For each of these aspects, at least two of the four minority groups examined had a more negative experience than the White families.

There also were some interesting deviations from this pattern. More White families felt that their doctor or other medical professional was not helpful when they were discussing their initial concerns about their child. Interestingly, White families were more likely than minority families to say their child was receiving less therapy than needed, and minority families were more likely than White families to say their child was receiving more therapy than needed.

Educational Level of the Primary Caregiver. The pattern for families of different levels of education (and income, as will be discussed in the next section) was similar to those just discussed. Nearly all of the comparisons examined showed differences in experiences and perceptions of services based on education level of the primary caregiver, with families with less well educated caregivers generally having a more negative experience. The following aspects of beginning early intervention services showed a direct relationship with education of the caregiver—that is, as education went up, the percentage of families with positive experiences increased. Those with less education were:

- Less likely to discuss concerns about their child with a doctor.
- More likely to report that it took a lot of effort to find early intervention services and get them started.
- Less aware of the IFSP.
- Less satisfied with their degree of involvement in the decision-making.
- Less likely to have good feelings about professionals.
- More likely to feel that professionals did not respect their values and cultural background and ignored their opinions.

- Less likely to believe that professionals made them feel hopeful about their child's future.

The reverse pattern occurred in three areas. Families with more highly educated caregivers were less likely to see their doctor as helpful and more likely to report that their child was receiving less therapy service than needed. More highly educated caregivers also more frequently rated the level of communication among professionals as fair or poor.

Household Income. Household income, which is correlated with both race/ethnicity and level of education, showed the same pattern as the previous two family characteristics. In each of the following, as household income increased, the percentage of families with a positive experience increased. Low-income families were:

- Less likely to discuss their concerns about their child with a doctor.
- More likely to report that it took a lot of effort to find out about services and get them started.
- Less aware of the IFSP.
- Less satisfied with their degree of involvement in the decision-making.
- Less likely to see services as individualized.
- Less likely to have good feelings about professionals.
- More likely to feel that professionals did not respect their values and cultural background and ignored their opinions.
- Less likely to believe that professionals made them feel hopeful about their child's future.

For a few of the aspects of entering early intervention services, the pattern was reversed. Upper-income families were less likely to report that their doctor was helpful when discussing initial concerns about the child. In general, the higher the income, the more likely the family was to report that the child was receiving less therapy than needed. The exception was families with household incomes over \$75,000 a year, whose responses to this question resembled those of the lowest-income families.

Number of Adults in the Household. The process of entering early intervention services differed little based on the number of adults in the household. Households with one adult were more likely to report the need to put forth a lot of effort to get early intervention services started, and more likely to have wanted more involvement in the decision-making.

Language of the Respondent. Several differences were found between families who were interviewed in English and those who were interviewed in Spanish. Spanish-speaking families had to put forth more effort to get early intervention services started and were far less aware of the IFSP. Spanish-speaking families also

were more likely to report that mostly professionals made the decisions about types of services. English-speaking families were more likely to report that the communication among professionals working with them was excellent, but they also were more likely to report that it was fair or poor (i.e., the Spanish-speaking families were more clustered in the middle rating of good). Finally, Spanish-speaking families were less likely to have good feelings about professionals, less likely to believe that professionals respected their values and cultural background, and more likely to feel that professionals ignored their opinions.

Conclusions

Collectively, these data suggest that the U.S. early intervention system operated under Part C of IDEA provides a positive and supportive entry into services for the vast majority of families who are enrolled in early intervention programs. Families report relative ease in accessing early intervention programs, perceive that services are based on individual child and family needs, and feel that they have a role in making key decisions about child and family goals. They report that they like early intervention professionals and that professionals make them feel hopeful about their child's future. The extent to which these perceptions remain stable over time will be assessed in subsequent interviews over the course of early intervention, at age 3, and in kindergarten.

A few aspects of the process of beginning early intervention services warrant closer examination and possible changes.

- The average time of 11.5 months between first concerns and IFSP for children who begin early intervention services at 24 months of age or older seems unnecessarily long.
- Families of children with developmental delays and even those with diagnosed conditions needed more help from their doctors when they first discussed their concerns about their child.
- Small percentages of families experienced difficulties in accessing services and felt that the amount of services received was inadequate, and nearly one-fifth were not aware of a written plan for goals and services.
- The recurring relationship between race/ethnicity, caregiver education level, and household income with so many different aspects of the entry process is especially troubling. None of the differences are large, but the persistence of these relationships across so many different items suggests that the process of entering early intervention services is not as supportive for families who are minority, less well educated, or low income.

Furthermore, all of these findings are based only on families who actually began early intervention services. The study has no data on the number or experiences of families who did not successfully complete the entry process.

Much of the process of beginning early intervention services is working well for most families, but there is room for improvement. Research needs to continue to explore some of the barriers to swifter and smoother access to early intervention services, especially for some families. National, state, and local evaluation efforts need to continue to focus on the effectiveness of policies and procedures related to the entry process. These findings suggest the need for models, practices, and professional skills that are more supportive of families who are poor or less well educated and who come from diverse ethnic backgrounds. The goals of easy access to information and services, family-professional partnerships, and high-quality services have already been achieved for many families. Now strategies need to be put in place to achieve them for all families.

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Appendix A

METHODOLOGY

METHODOLOGY

Sampling

A three-stage stratified sampling procedure was used to identify the sample for the study. In the first stage, 20 states were selected based on number of children served in early intervention programs and region of the country. The 20 sampled states also represented considerable variation with regard to lead agency and whether or not they served children at risk (Spiker et al., 1999). The second stage of the sampling involved the selection of counties based on the estimated number of children served in Part C programs. Within a state, 3 to 7 counties were selected, for a total of 93 counties. All points of entry or programs in a county for early intervention were invited to participate in the study.

The third stage of the sampling involved selection of the children and families. Each county was assigned a target number of families to recruit based on the number of families served. Study recruitment occurred on a staggered schedule in the 93 counties between September 1997, and November 1998. Demographic data without personal identifiers were collected on all families (N=5,668) who had never received early intervention services before and who enrolled in the early intervention programs in the sampled counties during each county's recruitment period. All families who met the study eligibility criteria (N=4,867) were to be invited by local early intervention staff to participate in the study. Study criteria required that the child be less than 31 months of age at the time the IFSP was signed, have an English- or Spanish-speaking adult in the household who could answer questions about the child and family, and be the only child in the family recruited for the study (siblings and other children of multiple birth sets were excluded). Not all families were invited within the required time frame, for various reasons. A total of 3,338 families, or 68.6% of those invited (N=4,653), agreed to participate. Written consent and basic contact information for each family was then sent to the research team.

Data Collection

The contact information was used to try to reach the family for a telephone interview. The interview, developed by the research team, covered a variety of topics, including characteristics of the child, characteristics of the family, the early identification process, initial services being provided, and respondent perceptions of the early identification and early intervention experience thus far. A complete copy of the survey can be obtained at the NEILS Web site: www.sri.com/neils/.

An experienced survey research unit that underwent rigorous training and ongoing supervision of the interview process conducted the interviews. Families were offered the option to complete the interview in English or Spanish. The interviews were conducted with computer-assisted telephone interviewing (CATI), meaning the interviewer read questions from the computer screen and entered responses directly into the computer. The computer provided the interviewer with the appropriate interview question based on the respondent's answer to earlier

questions. The initial family interview was to be completed within 16 weeks after the development of the first Individualized Family Service Plan (IFSP) with the person the family previously had identified as able to answer questions about the child. If that person was not available, the interview was completed with another household member who indicated that he or she could answer questions about the child. Fourteen percent of the interviews were conducted within 2 weeks of the (IFSP), 36% between 2 and 4 weeks of the IFSP, 18% between 4 to 6 weeks of the IFSP, and 25% between 6 and 16 weeks of the IFSP. Initial interviews were completed with 89% of the families (n= 2,974).

Families who could not be reached for an interview within 16 weeks were sent a mail survey. Information that was not considered to be time sensitive, such as the birth weight of the child, was collected through a subsequent interview if the interview team was able to reach the family for the next scheduled interview. Some data on family experiences was available for 3,224 families, or 97% of the study sample. Additional information about the study's methodology is presented at www.sri.com/neils.

Data Analysis

The data from the interviews, mail surveys, and subsequent interviews were combined. The data were weighted to represent all children entering Part C services in the United States during the recruitment period. All analyses were conducted with SUDAAN software for the statistical analysis of correlated data (Shah, Barnwell, & Bieler, 1997) to account for the complex probability sampling used in the design.

Appendix B

ADDITIONAL DATA TABLES

Table B-1a. Sample size and percentage distribution of child and family characteristics at entry

Characteristics	Sample size	Percentage
Total sample	3200	100.0
Child's eligibility category		
Developmental delay	1908	61.7
Diagnosed condition	667	21.6
At-risk of developmental delay	453	16.7
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	1293	41.4
12 months to less than 24 months	1007	30.7
24 months and older	900	27.9
Child's gender		
Male	1930	60.2
Female	1270	39.8
Child's race/ethnicity		
Caucasian	1629	53.4
African-American	687	21.0
Hispanic	609	16.0
Asian or Pacific Islander	106	3.8
American Indian or Alaska Native ¹	17	0.5
Mixed race or "other"	149	5.3
Primary female caregiver's educational attainment		
Less than high school diploma	491	15.9
GED or high school degree	974	31.8
Some college	879	28.0
Bachelor's degree or higher	815	24.3
Household income		
\$15,000 or less	783	26.8
\$15,001-\$25,000	477	15.8
\$25,001-\$50,000	849	28.6
\$50,001-\$75,000	501	16.1
Over \$75,000	400	12.7
Number of adults in household		
One	446	15.7
More than one	2712	84.3
Language of interview		
English	2947	94.4
Spanish	253	5.6

Percentages describe a nationally representative weighted sample and may not add to 100 due to rounding and/or missing data.

¹ In all subsequent tables, American Indian will be added into the Mixed race or "other" category.

Table B-1b. Standard errors for percentage distribution of child and family characteristics

Characteristics	Standard error
Child's eligibility category	
Developmental delay	5.0
Diagnosed condition	2.7
At-risk of developmental delay	2.7
Child's age at entry into early intervention/initial IFSP	
Less than 12 months	3.3
12 months to less than 24 months	1.6
24 months and older	1.9
Child's gender	
Male	1.6
Female	1.6
Child's race/ethnicity	
Caucasian	2.0
African-American	2.0
Hispanic	2.8
Asian or Pacific Islander	1.6
American Indian or Alaska Native ¹	0.3
Mixed race or "other"	1.1
Primary female caregiver's educational attainment	
Less than high school diploma	0.6
GED or high school degree	1.4
Some college	1.4
Bachelor's degree or higher	1.1
Household income	
\$15,000 or less	1.8
\$15,001-\$25,000	0.8
\$25,001-\$50,000	1.3
\$50,001-\$75,000	1.4
Over \$75,000	1.1
Number of adults in household	
One	1.4
More than one	1.4
Language of interview	
English	1.1
Spanish	1.1

¹ In all subsequent tables, American Indian will be added into the Mixed race or "other" category.

Table B-2a. Percentage distribution of parents discussing concerns about the child with a doctor by child and family characteristics at entry

Discuss concern with doctor	Yes	No
Total population estimate	85.5	14.5
Child's eligibility category ***		
Developmental delay	85.2	14.8
Diagnosed condition	94.3	5.7
At risk of developmental delay	79.7	20.3
Child's age at entry into early intervention/initial IFSP *		
Less than 12 months	89.1	10.9
12 months to less than 24 months	85.5	14.5
24 months and older	83.4	16.6
Child's gender		
Male	85.4	14.6
Female	85.8	14.2
Child's race/ethnicity *		
Caucasian	87.0	13.0
African-American	80.8	19.2
Hispanic	85.9	14.1
Asian or Pacific Islander	87.8	12.2
Mixed race or "other"	84.1	15.9
Primary female caregiver's educational attainment *		
Less than high school diploma	76.2	23.8
GED or high school diploma	84.1	15.9
Some college	88.3	11.7
Bachelor's degree or higher	90.3	9.7
Household income ***		
\$15,000 or less	79.5	20.5
\$15,001-\$25,000	83.9	16.1
\$25,001-\$50,000	86.5	13.5
\$50,001-\$75,000	91.6	8.4
Over \$75,000	92.5	7.5
Number of adults in household		
One	82.9	17.1
More than one	86.0	14.0
Language of interview		
English	85.3	14.7
Spanish	89.7	10.3

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-2b. Standard errors for percentage distribution of parents discussing concerns about the child with a doctor by child and family characteristics at entry

Discuss concern with doctor	Yes	No
Total population estimate	1.1	1.1
Child's eligibility category		
Developmental delay	1.1	1.1
Diagnosed condition	1.6	1.6
At risk of developmental delay	6.8	6.8
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	1.4	1.4
12 months to less than 24 months	2.3	2.3
24 months and older	1.1	1.1
Child's gender		
Male	0.9	0.9
Female	2.0	2.0
Child's race/ethnicity		
Caucasian	1.0	1.0
African-American	3.0	3.0
Hispanic	1.5	1.5
Asian or Pacific Islander	5.2	5.2
Mixed race or "other"	2.9	2.9
Primary female caregiver's educational attainment		
Less than high school diploma	3.7	3.7
GED or high school diploma	1.4	1.4
Some college	1.9	1.9
Bachelor's degree or higher	1.0	1.0
Household income		
\$15,000 or less	1.7	1.7
\$15,001-\$25,000	1.8	1.8
\$25,001-\$50,000	2.3	2.3
\$50,001-\$75,000	1.1	1.1
Over \$75,000	1.9	1.9
Number of adults in household		
One	2.6	2.6
More than one	1.3	1.3
Language of interview		
English	1.2	1.2
Spanish	2.4	2.4

Table B-3a. Percentage distribution of parents' ratings of helpfulness of doctor at the time of initial concerns about the child by child and family characteristics at entry

How helpful was the doctor at that time?	Very	Somewhat	Not at all	Mixed
Total population estimate	64.3	22.1	12.1	1.5
Child's eligibility category ***				
Developmental delay	60.0	24.8	13.6	1.6
Diagnosed condition	66.2	19.3	13.2	1.4
At risk of developmental delay	78.8	16.3	4.8	0.0
Child's age at entry into early intervention/initial IFSP ***				
Less than 12 months	73.5	17.0	8.1	1.4
12 months to less than 24 months	57.9	24.3	16.0	1.8
24 months and older	56.1	28.2	14.5	1.3
Child's gender				
Male	63.0	23.0	12.6	1.4
Female	66.2	20.7	11.5	1.6
Child's race/ethnicity ***				
Caucasian	61.2	24.2	13.3	1.3
African-American	69.0	19.8	10.5	0.7
Hispanic	66.8	18.9	10.9	3.4
Asian or Pacific Islander	70.0	24.3	3.0	2.7
Mixed race or "other"	66.8	16.0	16.7	0.5
Primary female caregiver's educational attainment ***				
Less than high school diploma	68.7	18.4	11.8	1.2
GED or high school diploma	67.7	21.4	10.0	1.0
Some college	62.3	22.0	13.4	2.2
Bachelor's degree or higher	58.9	25.7	13.7	1.6
Household income ***				
\$15,000 or less	69.6	18.6	11.1	0.7
\$15,001-\$25,000	66.7	19.7	12.8	0.7
\$25,001-\$50,000	63.4	21.3	12.5	2.8
\$50,001-\$75,000	59.4	24.5	14.9	1.3
Over \$75,000	61.4	29.3	7.8	1.5
Number of adults in household				
One	64.3	20.9	12.9	1.9
More than one	64.2	22.3	12.0	1.4
Language of interview				
English	63.5	22.6	12.4	1.5
Spanish	76.9	14.2	7.1	1.8

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

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Table B-3b. Standard errors for percentage distribution of parents' ratings of helpfulness of doctor at the time of initial concerns about the child by child and family characteristics at entry

How helpful was the doctor at that time?	Very	Somewhat	Not at all	Mixed
Total population estimate	1.1	1.2	0.7	0.5
Child's eligibility category				
Developmental delay	1.7	1.5	0.8	0.6
Diagnosed condition	2.5	1.7	1.7	0.3
At risk of developmental delay	2.5	2.4	2.4	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	1.8	1.7	1.1	0.7
12 months to less than 24 months	1.9	1.9	1.3	0.7
24 months and older	1.2	1.4	0.8	0.6
Child's gender				
Male	1.3	1.2	1.0	0.5
Female	1.5	1.5	1.8	0.8
Child's race/ethnicity				
Caucasian	1.4	0.9	1.3	0.3
African-American	2.9	3.1	1.0	0.4
Hispanic	3.3	1.6	1.1	1.8
Asian or Pacific Islander	9.6	6.1	2.9	4.0
Mixed race or "other"	9.0	4.2	6.9	0.8
Primary female caregiver's educational attainment				
Less than high school diploma	3.6	3.8	1.8	0.4
GED or high school diploma	2.0	2.6	1.3	0.3
Some college	2.8	2.6	1.0	1.2
Bachelor's degree or higher	3.2	2.4	1.5	0.4
Household income				
\$15,000 or less	2.0	2.3	1.3	0.3
\$15,001-\$25,000	2.6	3.0	2.7	0.3
\$25,001-\$50,000	2.2	2.2	1.0	1.3
\$50,001-\$75,000	2.8	3.6	2.4	0.7
Over \$75,000	1.9	2.4	1.7	0.7
Number of adults in household				
One	3.7	3.2	1.8	2.0
More than one	1.1	1.0	0.9	0.4
Language of interview				
English	1.0	1.1	0.8	0.5
Spanish	5.8	5.0	2.1	0.8

Table B-4a. Percentage distribution of parents' ratings of amount of effort to find early intervention services by child and family characteristics at entry

Amount of effort to find early intervention services	A lot of effort	Some effort	Little effort	No effort at all
Total population estimate	10.8	13.8	25.3	50.1
Child's eligibility category				
Developmental delay	11.0	16.1	27.3	45.5
Diagnosed condition	10.8	11.7	24.9	52.6
At risk of developmental delay	9.9	8.8	17.6	63.7
Child's age at entry into early intervention/initial IFSP ***				
Less than 12 months	9.2	10.0	22.3	58.5
12 months to less than 24 months	12.8	16.0	23.6	47.6
24 months and older	11.0	17.2	31.6	40.3
Child's gender				
Male	10.5	14.0	24.5	51.1
Female	11.4	13.6	26.5	48.5
Child's race/ethnicity ***				
Caucasian	8.4	13.6	26.3	51.8
African-American	13.1	14.8	26.3	45.7
Hispanic	12.5	11.9	21.8	53.8
Asian or Pacific Islander	17.7	18.3	25.5	38.4
Mixed race or "other"	15.8	14.6	22.0	47.7
Primary female caregiver's educational attainment ***				
Less than high school diploma	12.3	11.3	28.5	47.9
GED or high school diploma	12.2	12.5	23.9	51.4
Some college	9.0	14.4	24.2	52.4
Bachelor's degree or higher	9.3	17.3	25.9	47.5
Household income ***				
\$15,000 or less	12.7	14.2	22.1	51.0
\$15,001-\$25,000	11.7	13.4	27.2	47.7
\$25,001-\$50,000	9.7	12.3	25.7	52.3
\$50,001-\$75,000	7.1	14.3	26.5	52.2
Over \$75,000	8.8	18.2	27.4	45.7
Number of adults in household				
One	12.2	16.3	21.8	49.7
More than one	10.4	13.6	25.8	50.2
Language of interview *				
English	10.8	14.3	25.6	49.3
Spanish	11.4	6.4	19.6	62.6

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-4b. Standard errors for percentage distribution of parents' ratings of amount of effort to find early intervention services by child and family characteristics at entry

Amount of effort to find early intervention services	A lot of effort	Some effort	Little effort	No effort at all
Total population estimate	0.6	0.9	0.9	1.2
Child's eligibility category				
Developmental delay	1.2	1.9	1.5	3.3
Diagnosed condition	1.6	1.2	1.4	2.6
At risk of developmental delay	1.8	1.7	2.4	3.6
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	0.8	1.8	1.2	2.3
12 months to less than 24 months	1.0	1.9	1.4	1.6
24 months and older	2.0	3.3	2.0	4.2
Child's gender				
Male	0.8	1.2	1.1	1.3
Female	1.1	1.8	1.6	2.2
Child's race/ethnicity				
Caucasian	0.7	1.4	1.2	1.6
African-American	1.3	2.5	1.1	3.0
Hispanic	2.1	1.1	2.5	2.1
Asian or Pacific Islander	7.2	5.7	8.1	7.5
Mixed race or "other"	2.7	3.3	3.8	6.3
Primary female caregiver's educational attainment				
Less than high school diploma	2.2	1.2	2.8	3.2
GED or high school diploma	1.1	1.4	2.8	3.1
Some college	1.1	2.6	1.1	3.1
Bachelor's degree or higher	0.9	1.6	2.4	2.2
Household income				
\$15,000 or less	2.2	1.7	2.2	3.3
\$15,001-\$25,000	1.7	1.9	2.5	2.5
\$25,001-\$50,000	1.4	1.3	1.9	2.9
\$50,001-\$75,000	1.5	2.1	3.4	3.4
Over \$75,000	1.5	2.6	3.0	4.4
Number of adults in household				
One	2.1	2.3	2.5	4.1
More than one	0.9	1.0	1.0	1.4
Language of interview				
English	0.7	1.1	0.9	1.3
Spanish	1.3	2.2	4.0	5.1

Table B-5a. Percentage distribution of parents' ratings of amount of effort to get services started by child and family characteristics at entry

Amount of effort to get services started	A lot of effort	Some effort	Little effort	No effort at all
Total population estimate	9.2	14.3	33.7	42.7
Child's eligibility category				
Developmental delay	9.5	15.7	34.5	40.4
Diagnosed condition	7.6	13.5	34.5	44.4
At risk of developmental delay	10.5	9.4	30.8	49.3
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	9.3	11.9	31.8	47.0
12 months to less than 24 months	8.1	15.0	35.8	41.0
24 months and older	10.4	17.0	34.4	38.2
Child's gender				
Male	8.5	14.9	34.5	42.1
Female	10.3	13.4	32.6	43.7
Child's race/ethnicity ***				
Caucasian	5.2	15.5	35.6	43.6
African-American	14.4	13.6	34.6	37.4
Hispanic	13.3	11.5	27.1	48.0
Asian or Pacific Islander	11.7	15.0	31.2	42.1
Mixed race or "other"	13.3	13.3	33.2	40.2
Primary female caregiver's educational attainment ***				
Less than high school diploma	11.3	11.4	37.1	40.3
GED or high school diploma	11.9	12.2	30.0	45.9
Some college	5.8	15.3	33.5	45.5
Bachelor's degree or higher	7.1	18.0	37.6	37.4
Household income ***				
\$15,000 or less	13.5	14.2	31.7	40.6
\$15,001-\$25,000	10.1	13.0	29.3	47.6
\$25,001-\$50,000	5.7	14.2	33.8	46.2
\$50,001-\$75,000	4.7	15.9	39.7	39.7
Over \$75,000	4.8	15.1	35.8	44.3
Number of adults in household ***				
One	15.7	17.3	26.8	40.2
More than one	7.7	13.9	35.1	43.3
Language of interview **				
English	9.0	14.8	34.2	41.9
Spanish	13.0	4.8	25.5	56.7

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-5b. Standard errors for percentage distribution of parents' ratings of amount of effort to get services started of families by child and family characteristics at entry

Amount of effort to get services started	A lot of effort	Some effort	Little effort	No effort at all
Total population estimate	0.8	1.2	1.2	2.0
Child's eligibility category				
Developmental delay	1.0	1.6	1.1	2.6
Diagnosed condition	1.6	1.3	2.4	2.7
At risk of developmental delay	2.3	2.9	3.2	4.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	1.0	1.6	1.6	2.5
12 months to less than 24 months	1.2	2.4	1.5	2.4
24 months and older	1.6	1.8	2.0	2.3
Child's gender				
Male	0.7	1.2	1.6	1.7
Female	1.3	1.5	1.8	3.1
Child's race/ethnicity				
Caucasian	0.7	1.7	1.3	2.1
African-American	2.0	1.3	2.9	3.7
Hispanic	3.1	1.7	2.6	2.8
Asian or Pacific Islander	2.7	3.6	8.5	9.6
Mixed race or "other"	2.5	2.6	3.1	5.2
Primary female caregiver's educational attainment				
Less than high school diploma	2.2	1.8	3.1	2.7
GED or high school diploma	2.2	2.4	1.8	3.4
Some college	0.8	1.7	2.2	2.6
Bachelor's degree or higher	1.6	2.0	1.5	2.4
Household income				
\$15,000 or less	1.4	2.1	1.1	3.0
\$15,001-\$25,000	1.4	1.8	1.9	2.2
\$25,001-\$50,000	1.7	1.8	3.1	3.9
\$50,001-\$75,000	1.3	2.4	2.4	2.6
Over \$75,000	2.5	2.6	2.3	3.4
Number of adults in household				
One	2.7	2.1	1.8	3.6
More than one	0.9	1.2	1.4	2.2
Language of interview				
English	0.8	1.3	1.2	2.0
Spanish	4.1	0.9	6.8	5.0

Table B-6a. Percentage distribution of parents' awareness of IFSP by child and family characteristics at entry

At entry: Aware of IFSP?	Yes	No
Total population estimate	81.6	18.4
Child's eligibility category **		
Developmental delay	83.6	16.4
Diagnosed condition	82.0	18.0
At risk of developmental delay	76.4	23.6
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	79.8	20.2
12 months to less than 24 months	82.7	17.3
24 months and older	82.8	17.2
Child's gender		
Male	81.8	18.2
Female	81.1	18.9
Child's race/ethnicity ***		
Caucasian	88.5	11.5
African-American	76.8	23.2
Hispanic	62.5	37.5
Asian or Pacific Islander	79.7	20.3
Mixed race or "other"	86.4	13.6
Primary female caregiver's educational attainment ***		
Less than high school diploma	68.6	31.4
GED or high school diploma	76.8	23.2
Some college	86.9	13.1
Bachelor's degree or higher	91.6	8.4
Household income ***		
\$15,000 or less	71.3	28.7
\$15,001-\$25,000	76.0	24.0
\$25,001-\$50,000	85.8	14.2
\$50,001-\$75,000	91.9	8.1
Over \$75,000	93.9	6.1
Number of adults in household		
One	77.2	22.8
More than one	82.7	17.3
Language of interview ***		
English	84.3	15.7
Spanish	34.5	65.5

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-6b. Standard errors for percentage distribution of parents' awareness of IFSP by child and family characteristics at entry

At entry: Aware of IFSP?	Yes	No
Total population estimate	2.8	2.8
Child's eligibility category		
Developmental delay	2.4	2.4
Diagnosed condition	3.8	3.8
At risk of developmental delay	2.9	2.9
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	2.5	2.5
12 months to less than 24 months	3.3	3.3
24 months and older	3.3	3.3
Child's gender		
Male	3.0	3.0
Female	2.5	2.5
Child's race/ethnicity		
Caucasian	3.0	3.0
African-American	3.6	3.6
Hispanic	6.3	6.3
Asian or Pacific Islander	4.2	4.2
Mixed race or "other"	3.2	3.2
Primary female caregiver's educational attainment		
Less than high school diploma	4.2	4.2
GED or high school diploma	3.2	3.2
Some college	3.0	3.0
Bachelor's degree or higher	2.8	2.8
Household income		
\$15,000 or less	2.5	2.5
\$15,001-\$25,000	5.7	5.7
\$25,001-\$50,000	3.9	3.9
\$50,001-\$75,000	1.8	1.8
Over \$75,000	1.9	1.9
Number of adults in household		
One	2.5	2.5
More than one	2.9	2.9
Language of interview		
English	3.1	3.1
Spanish	3.0	3.0

Table B-7a. Percentage distribution of parents' ratings of involvement in decision-making about goals and outcomes on IFSP by child and family characteristics at entry

At entry: Who set goals/outcomes on IFSP?	Mostly family	Mostly professionals	Both family/professionals
Total population estimate	7.3	11.9	80.9
Child's eligibility category *			
Developmental delay	6.2	12.2	81.6
Diagnosed condition	11.1	7.9	81.0
At risk of developmental delay	7.2	13.9	78.9
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	8.8	13.2	78.1
12 months to less than 24 months	5.2	10.0	84.8
24 months and older	7.4	12.1	80.5
Child's gender			
Male	7.6	11.9	80.5
Female	6.7	11.8	81.5
Child's race/ethnicity **			
Caucasian	7.7	10.6	81.7
African-American	7.0	12.8	80.1
Hispanic	7.5	16.6	75.8
Asian or Pacific Islander	7.3	10.7	82.1
Mixed race or "other"	3.0	11.3	85.7
Primary female caregiver's educational attainment			
Less than high school diploma	8.9	12.8	78.3
GED or high school diploma	7.8	11.0	81.2
Some college	6.0	13.1	80.9
Bachelor's degree or higher	6.8	11.0	82.2
Household income ***			
\$15,000 or less	7.6	13.3	79.1
\$15,001-\$25,000	10.0	15.4	74.6
\$25,001-\$50,000	5.8	9.4	84.8
\$50,001-\$75,000	6.0	9.6	84.3
Over \$75,000	8.8	10.9	80.3
Number of adults in household			
One	5.6	11.4	83.0
More than one	7.4	11.9	80.7
Language of interview			
English	7.4	11.5	81.2
Spanish	3.1	27.3	69.6

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-7b. Standard errors for percentage distribution of parents' ratings of involvement in decision-making about goals and outcomes on IFSP by child and family characteristics at entry

At entry: Who set goals/outcomes on IFSP?	Mostly family	Mostly professionals	Both family/professionals
Total population estimate	1.0	2.3	1.6
Child's eligibility category			
Developmental delay	0.7	1.4	1.2
Diagnosed condition	1.9	1.9	1.4
At risk of developmental delay	1.7	4.3	3.3
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	1.8	3.6	3.2
12 months to less than 24 months	0.6	1.8	1.9
24 months and older	1.4	2.1	1.9
Child's gender			
Male	0.8	2.2	1.9
Female	1.6	3.1	1.9
Child's race/ethnicity			
Caucasian	2.0	3.4	2.5
African-American	1.3	2.1	3.0
Hispanic	2.0	3.8	3.0
Asian or Pacific Islander	3.6	2.6	4.8
Mixed race or "other"	1.4	3.0	3.3
Primary female caregiver's educational attainment			
Less than high school diploma	4.0	4.3	3.7
GED or high school diploma	0.9	2.0	1.8
Some college	1.0	2.5	2.1
Bachelor's degree or higher	1.9	3.1	2.2
Household income			
\$15,000 or less	1.2	2.0	2.4
\$15,001-\$25,000	3.0	4.3	3.5
\$25,001-\$50,000	1.0	2.2	1.5
\$50,001-\$75,000	1.8	2.4	2.5
Over \$75,000	2.1	2.5	2.4
Number of adults in household			
One	0.8	2.0	2.4
More than one	1.2	2.5	1.7
Language of interview			
English	1.0	2.4	1.7
Spanish	3.2	8.9	9.9

Table B-8a. Percentage distribution of parents' ratings of decision-making about types of services by child and family characteristics at entry

At entry: Who decided on types of services?	Mostly family	Mostly professionals	Both family/ professionals
Total population estimate	8.5	27.4	64.1
Child's eligibility category			
Developmental delay	7.7	27.4	64.8
Diagnosed condition	11.2	25.0	63.9
At risk of developmental delay	9.2	28.1	62.7
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	8.0	28.5	63.5
12 months to less than 24 months	9.6	27.9	62.6
24 months and older	8.0	25.2	66.8
Child's gender			
Male	8.4	27.6	64.1
Female	8.7	27.1	64.2
Child's race/ethnicity **			
Caucasian	8.1	24.2	67.7
African-American	8.9	32.4	58.7
Hispanic	8.4	31.8	59.8
Asian or Pacific Islander	11.7	31.4	56.9
Mixed race or "other"	7.9	24.8	67.3
Primary female caregiver's educational attainment *			
Less than high school diploma	9.7	31.1	59.2
GED or high school diploma	8.7	27.1	64.2
Some college	8.6	27.3	64.1
Bachelor's degree or higher	6.8	25.3	67.9
Household income ***			
\$15,000 or less	9.8	28.1	62.1
\$15,001-\$25,000	9.7	29.0	61.4
\$25,001-\$50,000	8.0	24.7	67.2
\$50,001-\$75,000	3.7	27.3	69.0
Over \$75,000	8.1	29.0	63.0
Number of adults in household			
One	7.5	29.4	63.1
More than one	8.7	27.0	64.2
Language of interview *			
English	8.3	26.7	65.0
Spanish	11.5	38.5	50.0

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-8b. Standard errors for percentage distribution of parents' ratings of decision-making about types of services by child and family characteristics at entry

At entry: Who decided on types of services?	Mostly family	Mostly professionals	Both family/professionals
Total population estimate	1.1	1.5	1.1
Child's eligibility category			
Developmental delay	1.0	1.3	1.4
Diagnosed condition	2.4	2.2	2.1
At risk of developmental delay	2.4	3.0	3.5
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	1.6	2.1	2.4
12 months to less than 24 months	1.7	2.6	2.7
24 months and older	1.0	2.6	3.0
Child's gender			
Male	1.1	1.4	1.3
Female	1.4	1.8	1.2
Child's race/ethnicity			
Caucasian	1.4	2.2	1.4
African-American	2.2	2.3	2.5
Hispanic	1.7	4.1	3.0
Asian or Pacific Islander	3.6	3.5	2.8
Mixed race or "other"	3.2	4.1	6.1
Primary female caregiver's educational attainment			
Less than high school diploma	2.7	3.4	2.7
GED or high school diploma	1.3	1.4	1.7
Some college	1.7	1.8	1.8
Bachelor's degree or higher	1.1	3.0	2.7
Household income			
\$15,000 or less	1.7	3.0	3.7
\$15,001-\$25,000	2.0	2.6	2.4
\$25,001-\$50,000	1.2	1.5	1.5
\$50,001-\$75,000	1.5	3.8	2.7
Over \$75,000	1.5	2.6	2.3
Number of adults in household			
One	1.9	2.1	3.3
More than one	1.1	1.7	1.1
Language of interview			
English	1.1	1.6	1.3
Spanish	3.4	9.0	7.3

Table B-9a. Percentage distribution of parents' ratings of decision-making about amount of services by child and family characteristics at entry

At entry: Who decided on amount of services?	Mostly family	Mostly professionals	Both family/professionals
Total population estimate	7.6	49.4	43.0
Child's eligibility category ***			
Developmental delay	6.7	53.4	39.9
Diagnosed condition	9.6	41.4	49.0
At risk of developmental delay	9.2	41.8	49.0
Child's age at entry into early intervention/initial IFSP *			
Less than 12 months	7.6	46.5	46.0
12 months to less than 24 months	8.4	47.8	43.8
24 months and older	6.5	55.6	37.9
Child's gender			
Male	7.1	50.8	42.1
Female	8.2	47.3	44.4
Child's race/ethnicity *			
Caucasian	7.6	49.0	43.4
African-American	7.7	50.5	41.8
Hispanic	7.6	51.9	40.5
Asian or Pacific Islander	10.2	43.3	46.5
Mixed race or "other"	4.9	47.7	47.3
Primary female caregiver's educational attainment *			
Less than high school diploma	9.1	46.3	44.5
GED or high school diploma	6.1	47.6	46.3
Some college	7.5	54.0	38.5
Bachelor's degree or higher	7.5	49.4	43.0
Household income ***			
\$15,000 or less	10.6	45.6	43.9
\$15,001-\$25,000	5.0	52.8	42.2
\$25,001-\$50,000	7.1	49.7	43.2
\$50,001-\$75,000	6.0	51.4	42.6
Over \$75,000	7.0	53.0	40.1
Number of adults in household			
One	7.4	50.0	42.6
More than one	7.6	49.3	43.1
Language of interview			
English	7.5	49.2	43.3
Spanish	9.0	52.5	38.5

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-9b. Standard errors for percentage distribution of parents' ratings of decision-making about amount of services by child and family characteristics at entry

At entry: Who decided on amount of services?	Mostly family	Mostly professionals	Both family/professionals
Total population estimate	1.0	2.9	2.2
Child's eligibility category			
Developmental delay	1.2	3.2	2.4
Diagnosed condition	1.7	3.3	3.5
At risk of developmental delay	2.9	3.3	1.9
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	1.1	2.4	1.9
12 months to less than 24 months	1.7	4.0	2.8
24 months and older	1.0	3.3	2.6
Child's gender			
Male	1.1	3.2	2.5
Female	1.1	2.7	1.9
Child's race/ethnicity			
Caucasian	1.1	3.9	3.1
African-American	1.4	4.8	4.1
Hispanic	2.0	4.7	3.1
Asian or Pacific Islander	3.6	6.9	7.0
Mixed race or "other"	1.1	3.7	3.9
Primary female caregiver's educational attainment			
Less than high school diploma	2.4	5.1	5.2
GED or high school diploma	1.2	3.3	2.7
Some college	1.8	4.0	3.0
Bachelor's degree or higher	1.0	4.0	3.5
Household income			
\$15,000 or less	2.4	3.3	3.1
\$15,001-\$25,000	1.2	3.5	3.4
\$25,001-\$50,000	0.7	3.6	3.3
\$50,001-\$75,000	1.9	6.2	5.2
Over \$75,000	1.3	3.9	3.7
Number of adults in household			
One	1.9	3.1	2.8
More than one	1.2	3.2	2.3
Language of interview			
English	1.0	3.1	2.3
Spanish	3.0	5.9	4.2

Table B-10a. Percentage distribution of parents' ratings about services decisions by child and family characteristics at entry

At entry: Feelings about service decisions	Wanted more involvement	Involved the right amount	Wanted less involvement
Total population estimate	21.6	77.3	1.1
Child's eligibility category **			
Developmental delay	20.9	78.1	1.1
Diagnosed condition	22.0	77.7	0.3
At risk of developmental delay	21.8	76.3	1.8
Child's age at entry into early intervention/initial IFSP *			
Less than 12 months	23.8	75.1	1.1
12 months to less than 24 months	18.9	80.2	1.0
24 months and older	21.6	77.3	1.1
Child's gender			
Male	21.3	77.5	1.2
Female	22.1	77.0	0.9
Child's race/ethnicity ***			
Caucasian	12.7	86.7	0.6
African-American	37.3	60.7	2.0
Hispanic	29.1	69.9	1.0
Asian or Pacific Islander	29.1	69.3	1.6
Mixed race or "other"	23.6	74.6	1.8
Primary female caregiver's educational attainment ***			
Less than high school diploma	34.5	64.0	1.5
GED or high school diploma	28.0	70.9	1.1
Some college	16.8	82.0	1.2
Bachelor's degree or higher	9.7	90.3	0.0
Household income ***			
\$15,000 or less	33.9	64.3	1.8
\$15,001-\$25,000	30.0	69.9	0.1
\$25,001-\$50,000	16.0	82.6	1.4
\$50,001-\$75,000	10.6	89.3	0.1
Over \$75,000	5.8	93.9	0.3
Number of adults in household **			
One	29.3	68.4	2.3
More than one	20.0	79.4	0.7
Language of interview			
English	21.5	77.5	1.1
Spanish	24.7	74.2	1.2

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-10b. Standard errors for percentage distribution of parents' ratings of services decisions by child and family characteristics at entry

At entry: Feelings about service decisions	Wanted more involvement	Involved the right amount	Wanted less involvement
Total population estimate	1.6	1.7	0.3
Child's eligibility category			
Developmental delay	2.1	2.3	0.3
Diagnosed condition	1.8	1.9	0.2
At risk of developmental delay	1.8	1.8	0.9
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	1.4	1.5	0.5
12 months to less than 24 months	1.9	1.8	0.4
24 months and older	3.2	3.7	0.7
Child's gender			
Male	1.8	2.0	0.4
Female	1.7	1.9	0.3
Child's race/ethnicity			
Caucasian	1.2	1.4	0.3
African-American	2.8	3.5	1.1
Hispanic	3.5	3.3	0.5
Asian or Pacific Islander	6.6	7.6	1.2
Mixed race or "other"	3.6	4.1	1.7
Primary female caregiver's educational attainment			
Less than high school diploma	4.0	3.6	0.7
GED or high school diploma	2.9	2.9	0.6
Some college	2.1	2.1	0.5
Bachelor's degree or higher	1.1	1.1	0.0
Household income			
\$15,000 or less	1.8	2.4	1.1
\$15,001-\$25,000	3.7	3.7	0.1
\$25,001-\$50,000	2.4	2.8	0.5
\$50,001-\$75,000	1.6	1.6	0.1
Over \$75,000	1.6	1.5	0.2
Number of adults in household			
One	2.2	2.7	1.4
More than one	2.0	2.0	0.1
Language of interview			
English	1.8	2.0	0.3
Spanish	3.7	3.7	0.7

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Table B-11a. Percentage distribution of children receiving services by child and family characteristics

Is child receiving services?	Yes	No
Total population estimate	73.4	26.6
Child's eligibility category		
Developmental delay	74.1	25.9
Diagnosed condition	73.6	26.4
At risk of developmental delay	73.4	26.6
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	73.8	26.2
12 months to less than 24 months	74.7	25.3
24 months and older	71.4	28.6
Child's gender *		
Male	72.1	27.9
Female	75.4	24.6
Child's race/ethnicity *		
Caucasian	75.7	24.3
African-American	67.9	32.1
Hispanic	70.2	29.8
Asian or Pacific Islander	83.3	16.7
Mixed race or "other"	73.4	26.6
Primary female caregiver's educational attainment		
Less than high school diploma	67.8	32.2
GED or high school diploma	72.7	27.3
Some college	72.6	27.4
Bachelor's degree or higher	78.7	21.3
Household income		
\$15,000 or less	69.9	30.1
\$15,001-\$25,000	72.3	27.7
\$25,001-\$50,000	73.9	26.1
\$50,001-\$75,000	73.5	26.5
Over \$75,000	80.7	19.3
Number of adults in household		
One	70.1	29.9
More than one	74.1	25.9
Language of interview		
English	73.7	26.3
Spanish	69.3	30.7

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

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Table B-11b. Standard errors for percentage distribution of children receiving services by child and family characteristics

Is child receiving any services?	Yes	No
Total population estimate	4.3	4.3
Child's eligibility category		
Developmental delay	4.1	4.1
Diagnosed condition	4.4	4.4
At risk of developmental delay	6.5	6.5
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	5.1	5.1
12 months to less than 24 months	4.2	4.2
24 months and older	3.9	3.9
Child's gender		
Male	4.3	4.3
Female	4.4	4.4
Child's race/ethnicity		
Caucasian	4.0	4.0
African-American	5.7	5.7
Hispanic	6.5	6.5
Asian or Pacific Islander	8.4	8.4
Mixed race or "other"	6.3	6.3
Primary female caregiver's educational attainment		
Less than high school diploma	5.9	5.9
GED or high school diploma	4.5	4.5
Some college	4.8	4.8
Bachelor's degree or higher	3.9	3.9
Household income		
\$15,000 or less	6.2	6.2
\$15,001-\$25,000	6.5	6.5
\$25,001-\$50,000	3.6	3.6
\$50,001-\$75,000	4.3	4.3
Over \$75,000	4.5	4.5
Number of adults in household		
One	5.7	5.7
More than one	4.3	4.3
Language of interview		
English	4.2	4.2
Spanish	7.9	7.9

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Table B-12a. Percentage distribution of children receiving speech/occupational/physical therapy by child and family characteristics at entry

Is child receiving speech/occupational/physical therapy?	Yes	No
Total population estimate	55.1	44.9
Child's eligibility category **		
Developmental delay	59.8	40.2
Diagnosed condition	52.1	47.9
At risk of developmental delay	43.7	56.3
Child's age at entry into early intervention/initial IFSP *		
Less than 12 months	51.3	48.7
12 months to less than 24 months	58.2	41.8
24 months and older	57.2	42.8
Child's gender		
Male	54.5	45.5
Female	55.9	44.1
Child's race/ethnicity **		
Caucasian	58.9	41.1
African-American	45.6	54.4
Hispanic	51.7	48.3
Asian or Pacific Islander	59.7	40.3
Mixed race or "other"	58.2	41.8
Primary female caregiver's educational attainment **		
Less than high school diploma	46.4	53.6
GED or high school diploma	51.9	48.1
Some college	57.7	42.3
Bachelor's degree or higher	62.4	37.6
Household income ***		
\$15,000 or less	43.8	56.2
\$15,001-\$25,000	53.3	46.7
\$25,001-\$50,000	57.7	42.3
\$50,001-\$75,000	57.4	42.6
Over \$75,000	68.1	31.9
Number of adults in household ***		
One	45.3	54.7
More than one	57.1	42.9
Language of interview		
English	55.1	44.9
Spanish	54.3	45.7

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

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Table B-12b. Standard errors for percentage distribution of children receiving speech/occupational/physical therapy by child and family characteristics at entry

Is child receiving speech/occupational/ physical therapy?	Yes	No
Total population estimate	3.5	3.5
Child's eligibility category		
Developmental delay	2.8	2.8
Diagnosed condition	4.0	4.0
At risk of developmental delay	5.1	5.1
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	4.0	4.0
12 months to less than 24 months	4.5	4.5
24 months and older	1.8	1.8
Child's gender		
Male	3.0	3.0
Female	4.4	4.4
Child's race/ethnicity		
Caucasian	4.1	4.1
African-American	4.4	4.4
Hispanic	5.5	5.5
Asian or Pacific Islander	10.1	10.1
Mixed race or "other"	5.2	5.2
Primary female caregiver's educational attainment		
Less than high school diploma	3.1	3.1
GED or high school diploma	4.1	4.1
Some college	4.0	4.0
Bachelor's degree or higher	4.0	4.0
Household income		
\$15,000 or less	3.7	3.7
\$15,001-\$25,000	6.5	6.5
\$25,001-\$50,000	2.5	2.5
\$50,001-\$75,000	5.1	5.1
Over \$75,000	4.9	4.9
Number of adults in household		
One	3.3	3.3
More than one	3.6	3.6
Language of interview		
English	3.4	3.4
Spanish	6.6	6.6

Table B-13a. Percentage distribution of parents' ratings of amount of therapy received by child and family characteristics at entry

Amount of therapy received	More than needed	About the right amount	Less than needed	Enough of some/not of others
Total population estimate	3.7	76.0	19.9	0.4
Child's eligibility category **				
Developmental delay	4.0	75.6	19.8	0.6
Diagnosed condition	1.6	75.9	22.4	0.0
At risk of developmental delay	6.4	75.7	17.9	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	3.8	77.9	18.4	0.0
12 months to less than 24 months	4.8	74.0	20.9	0.3
24 months and older	2.5	75.7	21.0	0.9
Child's gender				
Male	3.7	75.1	20.7	0.5
Female	3.7	77.4	18.8	0.1
Child's race/ethnicity ***				
Caucasian	1.6	76.0	22.0	0.4
African-American	7.7	75.8	16.5	0.0
Hispanic	4.8	79.0	15.9	0.4
Asian or Pacific Islander	7.1	78.7	14.3	0.0
Mixed race or "other"	7.6	67.2	23.8	1.4
Primary female caregiver's educational attainment ***				
Less than high school diploma	6.5	83.5	9.9	0.0
GED or high school diploma	4.2	77.4	18.0	0.5
Some college	3.2	74.1	22.5	0.2
Bachelor's degree or higher	2.7	72.0	24.7	0.6
Household income ***				
\$15,000 or less	3.6	78.2	17.9	0.3
\$15,001-\$25,000	4.4	75.5	20.1	0.0
\$25,001-\$50,000	2.8	75.4	21.6	0.2
\$50,001-\$75,000	2.0	71.4	25.2	1.3
Over \$75,000	2.4	79.5	18.1	0.0
Number of adults in household *				
One	3.6	75.6	20.8	0.0
More than one	3.7	75.9	19.9	0.4
Language of interview				
English	3.5	75.7	20.3	0.4
Spanish	7.0	80.5	12.6	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-13b. Standard errors for percentage distribution of parents' ratings of amount of therapy received by child and family characteristics at entry

Amount of therapy received	More than needed	About the right amount	Less than needed	Enough of some/not of others
Total population estimate	0.6	2.8	2.5	0.1
Child's eligibility category				
Developmental delay	0.4	2.2	2.1	0.2
Diagnosed condition	0.9	3.4	3.6	0.0
At risk of developmental delay	4.0	5.6	4.3	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	1.3	2.9	2.4	0.0
12 months to less than 24 months	1.0	3.4	3.2	0.3
24 months and older	0.8	3.2	3.3	0.6
Child's gender				
Male	0.6	3.6	3.3	0.2
Female	0.9	2.7	2.4	0.2
Child's race/ethnicity				
Caucasian	0.4	3.4	3.3	0.2
African-American	2.1	4.3	2.6	0.0
Hispanic	1.5	2.4	2.9	0.4
Asian or Pacific Islander	3.4	9.3	6.7	0.0
Mixed race or "other"	4.8	5.2	4.1	1.1
Primary female caregiver's educational attainment				
Less than high school diploma	1.5	2.7	2.3	0.0
GED or high school diploma	0.8	3.5	2.9	0.3
Some college	1.0	2.8	2.5	0.2
Bachelor's degree or higher	0.9	4.4	4.2	0.3
Household income				
\$15,000 or less	1.3	4.0	3.8	0.3
\$15,001-\$25,000	0.9	2.9	3.0	0.0
\$25,001-\$50,000	0.6	4.5	4.5	0.2
\$50,001-\$75,000	0.8	5.5	5.2	1.0
Over \$75,000	1.4	2.1	2.6	0.0
Number of adults in household				
One	1.5	3.6	3.8	0.0
More than one	0.8	3.1	2.7	0.2
Language of interview				
English	0.6	3.0	2.6	0.1
Spanish	2.0	2.8	2.5	0.0

Table B-14a. Percentage distribution of parents' ratings of amount of non-therapy EI services by child and family characteristics at entry

Amount of non-therapy EI services	More than needed	About the right amount	Less than needed
Total population estimate	5.3	82.1	12.6
Child's eligibility category			
Developmental delay	6.2	80.6	13.2
Diagnosed condition	4.3	83.1	12.6
At risk of developmental delay	5.7	86.7	7.6
Child's age at entry into early intervention/initial IFSP *			
Less than 12 months	4.4	84.7	11.0
12 months to less than 24 months	5.6	82.3	12.1
24 months and older	6.9	76.3	16.7
Child's gender			
Male	6.1	82.0	12.0
Female	4.3	82.2	13.5
Child's race/ethnicity ***			
Caucasian	1.9	85.1	12.9
African-American	9.2	78.5	12.3
Hispanic	9.7	78.4	11.9
Asian or Pacific Islander	12.6	74.6	12.8
Mixed race or "other"	3.7	83.2	13.1
Primary female caregiver's educational attainment *			
Less than high school diploma	8.4	83.1	8.6
GED or high school diploma	8.0	80.4	11.5
Some college	3.3	83.3	13.4
Bachelor's degree or higher	1.6	82.4	16.0
Household income ***			
\$15,000 or less	5.8	83.3	10.9
\$15,001-\$25,000	10.3	75.8	14.0
\$25,001-\$50,000	4.6	83.4	12.0
\$50,001-\$75,000	1.3	81.4	17.3
Over \$75,000	1.6	83.3	15.1
Number of adults in household			
One	5.4	82.1	12.5
More than one	5.4	82.0	12.6
Language of interview			
English	5.4	81.9	12.7
Spanish	4.8	84.9	10.3

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

Table B-14b. Standard errors for percentage distribution of parents' ratings of amount of non-therapy EI services by child and family characteristics at entry

Amount of non-therapy EI services	More than needed	About the right amount	Less than needed
Total population estimate	0.8	1.2	1.3
Child's eligibility category			
Developmental delay	1.3	1.9	1.7
Diagnosed condition	1.7	3.6	3.2
At risk of developmental delay	1.7	2.9	2.3
Child's age at entry into early intervention/initial IFSP			
Less than 12 months	1.2	2.0	1.5
12 months to less than 24 months	1.4	2.6	2.3
24 months and older	2.2	2.4	2.0
Child's gender			
Male	1.0	1.1	1.6
Female	0.9	2.1	2.1
Child's race/ethnicity			
Caucasian	0.5	1.7	1.6
African-American	1.8	3.0	3.9
Hispanic	4.3	5.8	2.7
Asian or Pacific Islander	4.5	12.0	8.2
Mixed race or "other"	2.1	4.2	4.0
Primary female caregiver's educational attainment			
Less than high school diploma	2.9	3.1	2.0
GED or high school diploma	1.2	2.1	1.8
Some college	0.8	1.8	1.9
Bachelor's degree or higher	1.1	2.2	2.0
Household income			
\$15,000 or less	1.1	3.6	3.0
\$15,001-\$25,000	2.8	6.0	7.2
\$25,001-\$50,000	1.2	2.1	2.0
\$50,001-\$75,000	0.9	3.4	3.4
Over \$75,000	1.3	2.9	2.0
Number of adults in household			
One	1.3	3.5	3.5
More than one	0.8	0.9	1.2
Language of interview			
English	0.8	1.2	1.4
Spanish	2.2	3.9	3.9

Table B-15a. Percentage distribution of parents' ratings of individualization of services by child and family characteristics at entry

Individualization of services offered	Highly individualized	Somewhat individualized	Not individualized	Mixed
Total population estimate	68.6	28.0	3.2	0.2
Child's eligibility category				
Developmental delay	69.6	27.0	3.2	0.2
Diagnosed condition	65.8	30.3	3.4	0.4
At risk of developmental delay	69.1	27.8	3.1	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	69.3	27.9	2.6	0.2
12 months to less than 24 months	68.7	27.4	3.5	0.5
24 months and older	67.4	28.8	3.8	0.1
Child's gender				
Male	69.5	27.2	3.1	0.3
Female	67.3	29.2	3.3	0.2
Child's race/ethnicity ***				
Caucasian	71.9	25.3	2.4	0.4
African-American	60.6	34.0	5.4	0.0
Hispanic	65.2	31.2	3.6	0.0
Asian or Pacific Islander	68.2	29.6	2.3	0.0
Mixed race or "other"	72.8	24.2	2.9	0.0
Primary female caregiver's educational attainment **				
Less than high school diploma	66.6	28.2	4.5	0.7
GED or high school diploma	61.9	34.7	3.5	0.0
Some college	74.4	23.5	1.9	0.2
Bachelor's degree or higher	71.2	25.3	3.2	0.3
Household income **				
\$15,000 or less	61.8	32.4	5.8	0.0
\$15,001-\$25,000	65.7	30.8	2.9	0.7
\$25,001-\$50,000	71.9	25.2	2.7	0.2
\$50,001-\$75,000	72.7	25.3	1.8	0.2
Over \$75,000	71.3	26.6	2.1	0.0
Number of adults in household				
One	63.4	33.3	3.3	0.0
More than one	69.5	27.2	3.0	0.3
Language of interview				
English	68.9	27.7	3.1	0.2
Spanish	64.1	32.3	3.6	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-15b. Standard errors for percentage distribution of parents' ratings of individualization of services by child and family characteristics at entry

Individualization of services offered	Highly individualized	Somewhat individualized	Not individualized	Mixed
Total population estimate	1.3	1.1	0.5	0.1
Child's eligibility category				
Developmental delay	2.1	2.1	0.4	0.2
Diagnosed condition	3.8	2.7	2.0	0.3
At risk of developmental delay	1.5	1.6	1.2	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.2	2.1	0.4	0.1
12 months to less than 24 months	1.9	1.6	0.8	0.4
24 months and older	2.7	2.6	0.9	0.0
Child's gender				
Male	1.8	1.5	0.7	0.2
Female	1.8	1.4	0.8	0.1
Child's race/ethnicity				
Caucasian	1.8	1.6	0.5	0.2
African-American	2.6	2.9	1.4	0.0
Hispanic	3.0	2.6	0.9	0.0
Asian or Pacific Islander	6.6	5.2	1.7	0.0
Mixed race or "other"	3.1	3.4	2.6	0.0
Primary female caregiver's educational attainment				
Less than high school diploma	3.4	4.5	2.3	0.9
GED or high school diploma	2.7	2.1	0.8	0.0
Some college	1.6	1.8	0.6	0.2
Bachelor's degree or higher	3.3	3.3	0.9	0.2
Household income				
\$15,000 or less	3.8	2.6	2.5	0.0
\$15,001-\$25,000	3.1	3.4	0.9	1.0
\$25,001-\$50,000	2.6	2.3	0.8	0.2
\$50,001-\$75,000	3.7	3.6	0.5	0.2
Over \$75,000	3.7	3.8	0.6	0.0
Number of adults in household				
One	4.0	2.8	1.9	0.0
More than one	1.5	1.2	0.5	0.2
Language of interview				
English	1.4	1.2	0.4	0.1
Spanish	5.7	6.2	2.1	0.0

Table B-16a. Percentage distribution of parents' ratings of services and therapy needed but not receiving by child and family characteristics at entry

Services and therapy needed but not receiving	Yes	No
Total population estimate	13.8	86.2
Child's eligibility category		
Developmental delay	14.0	86.0
Diagnosed condition	16.0	84.0
At risk of developmental delay	7.7	92.3
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	10.2	89.8
12 months to less than 24 months	16.2	83.8
24 months and older	16.6	83.4
Child's gender		
Male	13.5	86.5
Female	14.4	85.6
Child's race/ethnicity		
Caucasian	13.3	86.7
African-American	12.5	87.5
Hispanic	17.4	82.6
Asian or Pacific Islander	10.5	89.5
Mixed race or "other"	16.5	83.5
Primary female caregiver's educational attainment		
Less than high school diploma	7.6	92.4
GED or high school diploma	13.0	87.0
Some college	15.8	84.2
Bachelor's degree or higher	15.8	84.2
Household income		
\$15,000 or less	13.6	86.4
\$15,001-\$25,000	13.3	86.7
\$25,001-\$50,000	13.9	86.1
\$50,001-\$75,000	14.2	85.8
Over \$75,000	12.7	87.3
Number of adults in household		
One	14.0	86.0
More than one	13.7	86.3
Language of interview		
English	13.4	86.6
Spanish	21.8	78.2

*Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.*

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Table B-16b. Standard errors for percentage distribution of parents' ratings of services and therapy needed but not receiving by child and family characteristics at entry

Services and therapy needed but not receiving	Yes	No
Total population estimate	1.3	1.3
Child's eligibility category		
Developmental delay	1.1	1.1
Diagnosed condition	3.6	3.6
At risk of developmental delay	2.6	2.6
Child's age at entry into early intervention/initial IFSP		
Less than 12 months	1.7	1.7
12 months to less than 24 months	1.7	1.7
24 months and older	2.5	2.5
Child's gender		
Male	1.3	1.3
Female	1.5	1.5
Child's race/ethnicity		
Caucasian	1.4	1.4
African-American	2.4	2.4
Hispanic	3.2	3.2
Asian or Pacific Islander	7.8	7.8
Mixed race or "other"	4.9	4.9
Primary female caregiver's educational attainment		
Less than high school diploma	2.2	2.2
GED or high school diploma	1.7	1.7
Some college	3.2	3.2
Bachelor's degree or higher	2.2	2.2
Household income		
\$15,000 or less	1.8	1.8
\$15,001-\$25,000	2.4	2.4
\$25,001-\$50,000	2.9	2.9
\$50,001-\$75,000	3.2	3.2
Over \$75,000	2.9	2.9
Number of adults in household		
One	2.3	2.3
More than one	1.3	1.3
Language of interview		
English	1.4	1.4
Spanish	5.0	5.0

Table B-17a. Percentage distribution of parents' ratings of quality of therapy being received by child and family characteristics at entry

Quality of therapy being received	Excellent	Good	Fair	Poor
Total population estimate	60.8	32.6	6.2	0.4
Child's eligibility category ***				
Developmental delay	59.2	33.7	6.7	0.4
Diagnosed condition	62.4	34.3	3.2	0.0
At risk of developmental delay	63.3	26.1	9.9	0.7
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	65.3	29.0	5.1	0.6
12 months to less than 24 months	59.0	32.1	8.6	0.3
24 months and older	56.3	38.5	5.1	0.1
Child's gender				
Male	59.2	33.7	6.7	0.4
Female	63.0	31.1	5.6	0.4
Child's race/ethnicity ***				
Caucasian	60.9	32.3	6.5	0.3
African-American	61.5	30.7	7.6	0.2
Hispanic	62.2	31.5	5.3	1.0
Asian or Pacific Islander	59.6	34.6	5.8	0.0
Mixed race or "other"	54.0	42.8	3.2	0.0
Primary female caregiver's educational attainment ***				
Less than high school diploma	61.4	29.4	9.2	0.0
GED or high school diploma	61.5	31.9	6.0	0.7
Some college	65.7	30.1	4.1	0.1
Bachelor's degree or higher	54.3	37.8	7.4	0.5
Household income ***				
\$15,000 or less	62.7	29.7	7.4	0.2
\$15,001-\$25,000	63.6	31.5	4.9	0.0
\$25,001-\$50,000	60.0	32.3	7.4	0.2
\$50,001-\$75,000	55.7	35.5	7.9	0.9
Over \$75,000	62.1	36.2	1.8	0.0
Number of adults in household				
One	56.6	34.9	7.9	0.7
More than one	61.5	32.2	6.0	0.3
Language of interview				
English	61.4	32.0	6.2	0.4
Spanish	50.0	43.9	6.1	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

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Table B-17b. Standard errors for percentage distribution of parents' ratings of quality of therapy being received by child and family characteristics at entry

Quality of therapy being received	Excellent	Good	Fair	Poor
Total population estimate	1.3	0.9	1.0	0.2
Child's eligibility category				
Developmental delay	1.9	1.6	1.3	0.2
Diagnosed condition	3.4	4.1	1.3	0.0
At risk of developmental delay	3.7	3.6	3.2	0.8
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.3	1.7	1.2	0.5
12 months to less than 24 months	3.1	2.5	1.4	0.3
24 months and older	2.5	2.7	1.4	0.1
Child's gender				
Male	2.4	1.3	1.7	0.2
Female	1.7	2.0	0.6	0.2
Child's race/ethnicity				
Caucasian	1.2	1.1	1.1	0.2
African-American	2.9	3.0	2.2	0.2
Hispanic	3.6	3.1	1.4	0.5
Asian or Pacific Islander	6.3	6.3	4.3	0.0
Mixed race or "other"	7.6	7.4	1.8	0.0
Primary female caregiver's educational attainment				
Less than high school diploma	5.6	4.0	2.4	0.0
GED or high school diploma	3.3	2.4	1.3	0.3
Some college	2.7	2.1	1.3	0.1
Bachelor's degree or higher	2.2	1.9	2.6	0.5
Household income				
\$15,000 or less	3.5	3.5	1.1	0.2
\$15,001-\$25,000	4.7	3.9	3.1	0.0
\$25,001-\$50,000	3.5	2.6	1.5	0.2
\$50,001-\$75,000	5.4	4.3	3.9	0.8
Over \$75,000	2.7	2.4	1.1	0.0
Number of adults in household				
One	4.6	3.8	1.9	0.8
More than one	1.1	0.9	1.0	0.1
Language of interview				
English	1.5	1.1	1.1	0.2
Spanish	5.6	5.8	2.6	0.0

Table B-18a. Percentage distribution of parents' ratings of quality of services other than therapy by child and family characteristics at entry

Quality of services other than therapy	Excellent	Good	Fair	Poor
Total population estimate	52.5	40.6	6.2	0.7
Child's eligibility category				
Developmental delay	49.2	42.9	7.1	0.9
Diagnosed condition	57.2	37.3	5.5	0.0
At risk of developmental delay	59.8	34.0	5.1	1.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	53.3	40.9	5.5	0.3
12 months to less than 24 months	52.8	39.7	7.0	0.6
24 months and older	50.7	41.2	6.7	1.4
Child's gender				
Male	52.0	41.3	6.1	0.6
Female	53.2	39.6	6.4	0.7
Child's race/ethnicity ***				
Caucasian	54.5	40.2	5.1	0.3
African-American	50.1	39.2	9.7	1.0
Hispanic	50.5	41.6	6.2	1.6
Asian or Pacific Islander	54.8	42.6	2.6	0.0
Mixed race or "other"	50.3	43.4	5.6	0.7
Primary female caregiver's educational attainment **				
Less than high school diploma	50.9	41.0	6.8	1.4
GED or high school diploma	47.9	44.1	7.2	0.8
Some college	62.9	32.3	4.8	0.0
Bachelor's degree or higher	50.5	42.8	6.3	0.4
Household income *				
\$15,000 or less	54.0	36.5	8.0	1.5
\$15,001-\$25,000	47.3	43.3	8.8	0.6
\$25,001-\$50,000	55.9	39.3	4.8	0.0
\$50,001-\$75,000	55.2	37.4	7.5	0.0
Over \$75,000	51.3	45.9	2.8	0.0
Number of adults in household				
One	46.6	39.4	11.4	2.7
More than one	54.3	40.5	5.0	0.2
Language of interview				
English	52.7	40.5	6.1	0.7
Spanish	49.7	41.8	8.5	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-18b. Standard errors for percentage distribution of parents' ratings of quality of services other than therapy by child and family characteristics at entry

Quality of services other than therapy	Excellent	Good	Fair	Poor
Total population estimate	1.9	1.4	1.1	0.2
Child's eligibility category				
Developmental delay	1.2	1.5	0.9	0.3
Diagnosed condition	3.4	4.2	3.2	0.0
At risk of developmental delay	5.8	4.9	2.0	1.1
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.9	2.5	1.4	0.3
12 months to less than 24 months	2.9	2.8	1.7	0.5
24 months and older	2.5	2.8	1.6	0.7
Child's gender				
Male	2.7	2.4	1.3	0.3
Female	3.1	2.4	1.3	0.6
Child's race/ethnicity				
Caucasian	3.6	3.0	1.4	0.3
African-American	2.7	4.2	2.7	0.5
Hispanic	4.6	5.2	1.5	1.0
Asian or Pacific Islander	7.0	8.0	2.0	0.0
Mixed race or "other"	8.8	8.2	3.0	0.9
Primary female caregiver's educational attainment				
Less than high school diploma	5.2	4.7	1.5	0.7
GED or high school diploma	2.6	3.5	2.5	0.6
Some college	6.8	5.7	1.7	0.0
Bachelor's degree or higher	2.9	2.8	2.5	0.6
Household income				
\$15,000 or less	4.5	3.5	1.6	0.6
\$15,001-\$25,000	5.2	4.1	2.8	0.8
\$25,001-\$50,000	2.8	4.0	1.7	0.0
\$50,001-\$75,000	6.8	4.5	3.7	0.0
Over \$75,000	5.6	5.6	1.3	0.0
Number of adults in household				
One	3.8	4.0	2.9	1.1
More than one	1.9	1.5	1.1	0.1
Language of interview				
English	2.0	1.3	1.1	0.3
Spanish	5.9	9.1	5.4	0.0

Table B-19a. Percentage distribution of parents' ratings of professionals' communication with each other by child and family characteristics at entry

Professionals' communication with each other	Excellent	Good	Fair	Poor	Some OK/ some not
Total population estimate	52.7	36.8	6.7	3.1	0.6
Child's eligibility category **					
Developmental delay	50.7	39.2	6.8	2.6	0.7
Diagnosed condition	52.1	37.2	7.0	3.1	0.6
At risk of developmental delay	60.7	28.1	7.1	3.5	0.6
Child's age at entry into early intervention/initial IFSP ***					
Less than 12 months	55.1	34.2	6.4	3.4	0.9
12 months to less than 24 months	50.2	38.3	6.9	4.1	0.4
24 months and older	51.8	39.4	7.2	1.3	0.4
Child's gender					
Male	50.6	37.9	6.8	4.0	0.7
Female	55.7	35.2	6.7	1.8	0.6
Child's race/ethnicity ***					
Caucasian	51.7	36.6	6.8	4.1	0.7
African-American	55.8	34.5	6.8	2.2	0.7
Hispanic	49.2	42.0	6.5	1.6	0.7
Asian or Pacific Islander	65.7	30.5	1.9	1.9	0.0
Mixed race or "other"	52.2	35.9	10.3	1.7	0.0
Primary female caregiver's educational attainment ***					
Less than high school diploma	56.6	34.2	6.7	2.4	0.0
GED or high school diploma	54.1	36.9	6.0	2.7	0.2
Some college	55.2	34.2	7.5	2.0	1.2
Bachelor's degree or higher	45.6	41.7	6.7	5.1	1.0
Household income ***					
\$15,000 or less	60.9	29.9	6.1	3.1	0.0
\$15,001-\$25,000	51.0	34.7	11.2	2.1	1.0
\$25,001-\$50,000	55.4	34.5	7.1	2.3	0.7
\$50,001-\$75,000	44.2	42.5	7.4	6.0	0.0
Over \$75,000	50.4	42.9	3.2	1.7	1.8
Number of adults in household					
One	53.1	35.5	8.6	2.4	0.3
More than one	52.8	37.0	6.3	3.1	0.7
Language of interview ***					
English	53.9	35.5	6.8	3.3	0.5
Spanish	34.1	58.1	5.8	0.0	1.9

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-19b. Standard errors for percentage distribution of parents' ratings of professionals' communication with each other by child and family characteristics at entry

Professionals' communication with each other	Excellent	Good	Fair	Poor	Some OK/ some not
Total population estimate	2.5	2.1	0.5	0.6	0.2
Child's eligibility category					
Developmental delay	3.4	3.0	1.2	0.7	0.2
Diagnosed condition	3.5	2.4	1.2	1.1	0.3
At risk of developmental delay	3.7	4.4	2.3	1.5	0.6
Child's age at entry into early intervention/initial IFSP					
Less than 12 months	2.3	1.4	1.3	1.0	0.3
12 months to less than 24 months	2.7	2.7	1.6	1.5	0.3
24 months and older	5.2	4.9	0.9	0.6	0.4
Child's gender					
Male	2.9	3.1	0.9	0.9	0.2
Female	2.6	1.9	1.0	0.6	0.3
Child's race/ethnicity					
Caucasian	2.9	2.7	1.1	1.0	0.2
African-American	4.0	3.5	1.2	0.7	0.7
Hispanic	4.5	4.2	0.9	1.0	0.5
Asian or Pacific Islander	8.5	9.2	1.4	1.4	0.0
Mixed race or "other"	4.1	3.3	3.2	1.5	0.0
Primary female caregiver's educational attainment					
Less than high school diploma	3.7	2.2	1.5	1.4	0.0
GED or high school diploma	2.8	3.0	0.9	0.6	0.2
Some college	4.4	3.9	0.5	1.0	0.5
Bachelor's degree or higher	4.7	3.2	1.8	1.5	0.4
Household income					
\$15,000 or less	3.8	4.7	0.6	1.4	0.0
\$15,001-\$25,000	3.7	2.8	3.0	1.3	0.6
\$25,001-\$50,000	4.4	3.1	0.9	0.9	0.5
\$50,001-\$75,000	3.1	2.3	1.6	2.3	0.0
Over \$75,000	4.6	3.6	2.5	0.7	0.9
Number of adults in household					
One	4.0	4.1	1.7	0.7	0.4
More than one	2.8	2.1	0.8	0.7	0.2
Language of interview					
English	2.6	2.2	0.5	0.6	0.2
Spanish	5.0	4.6	1.7	0.0	1.4

Table B-20a. Percentage distribution of families' agreement with "I have good feelings about the professionals who work with children with special needs and their families."

Have good feelings about the professionals who work with children	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	63.3	35.2	1.4	0.2
Child's eligibility category **				
Developmental delay	63.9	34.6	1.2	0.3
Diagnosed condition	59.1	38.2	2.7	0.0
At risk of developmental delay	68.2	31.7	0.1	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	62.6	35.7	1.7	0.0
12 months to less than 24 months	64.5	34.4	0.7	0.5
24 months and older	62.8	35.4	1.7	0.0
Child's gender				
Male	63.6	35.4	0.9	0.1
Female	62.8	34.9	2.0	0.2
Child's race/ethnicity ***				
Caucasian	65.2	33.4	1.1	0.3
African-American	63.5	34.9	1.5	0.1
Hispanic	55.4	43.0	1.6	0.0
Asian or Pacific Islander	66.8	30.0	3.2	0.0
Mixed race or "other"	61.6	37.1	1.3	0.0
Primary female caregiver's educational attainment ***				
Less than high school diploma	51.9	46.1	2.0	0.0
GED or high school diploma	64.2	34.1	1.8	0.0
Some college	66.8	31.5	1.3	0.4
Bachelor's degree or higher	65.2	33.9	0.7	0.2
Household income ***				
\$15,000 or less	58.2	38.5	2.7	0.6
\$15,001-\$25,000	63.8	33.5	2.8	0.0
\$25,001-\$50,000	66.7	32.8	0.4	0.1
\$50,001-\$75,000	66.8	32.2	0.9	0.1
Over \$75,000	69.2	30.8	0.0	0.0
Number of adults in household				
One	65.6	32.2	1.5	0.6
More than one	63.1	35.5	1.3	0.1
Language of interview **				
English	64.6	33.9	1.4	0.2
Spanish	39.4	59.2	1.4	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-20b. Standard errors for percentage distribution of families' agreement with "I have good feelings about the professionals who work with children with special needs and their families."

Have good feelings about the professionals who work with children	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	1.6	1.6	0.2	0.1
Child's eligibility category				
Developmental delay	2.4	2.3	0.4	0.1
Diagnosed condition	2.9	2.9	0.6	0.0
At risk of developmental delay	2.2	2.2	0.1	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.4	2.6	0.5	0.0
12 months to less than 24 months	3.2	3.4	0.4	0.3
24 months and older	3.2	3.1	0.5	0.0
Child's gender				
Male	1.8	1.8	0.3	0.1
Female	2.1	2.2	0.4	0.2
Child's race/ethnicity				
Caucasian	1.5	1.7	0.4	0.1
African-American	3.2	3.1	0.7	0.1
Hispanic	5.0	5.1	0.7	0.0
Asian or Pacific Islander	5.3	6.4	2.4	0.0
Mixed race or "other"	4.1	3.9	1.3	0.0
Primary female caregiver's educational attainment				
Less than high school diploma	5.5	5.2	0.8	0.0
GED or high school diploma	3.4	3.1	0.7	0.0
Some college	2.3	2.3	0.6	0.3
Bachelor's degree or higher	2.0	1.9	0.3	0.2
Household income				
\$15,000 or less	3.9	3.9	0.9	0.3
\$15,001-\$25,000	3.0	3.4	1.5	0.0
\$25,001-\$50,000	3.0	2.9	0.2	0.1
\$50,001-\$75,000	3.8	3.7	0.5	0.1
Over \$75,000	4.4	4.4	0.0	0.0
Number of adults in household				
One	4.7	5.1	0.9	0.5
More than one	1.5	1.5	0.3	0.1
Language of interview				
English	1.4	1.4	0.3	0.1
Spanish	5.7	5.5	1.9	0.0

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Table B-21a. Percentage distribution of families' agreement with "The early intervention professionals respect the values and cultural background of my family."

Professionals respect the values and cultural background of my family	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	61.1	37.8	1.0	0.1
Child's eligibility category				
Developmental delay	61.0	37.8	0.9	0.2
Diagnosed condition	60.4	38.9	0.7	0.0
At risk of developmental delay	64.4	34.1	1.5	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	60.7	38.5	0.8	0.0
12 months to less than 24 months	63.1	35.9	1.0	0.0
24 months and older	59.3	39.0	1.2	0.5
Child's gender				
Male	60.4	38.3	1.2	0.1
Female	62.0	37.1	0.6	0.2
Child's race/ethnicity ***				
Caucasian	64.5	35.1	0.4	0.0
African-American	56.0	41.3	2.2	0.5
Hispanic	55.0	44.0	1.1	0.0
Asian or Pacific Islander	66.4	33.6	0.0	0.0
Mixed race or "other"	58.4	39.4	2.2	0.0
Primary female caregiver's educational attainment *				
Less than high school diploma	52.0	45.8	2.2	0.0
GED or high school diploma	61.4	37.5	0.8	0.3
Some college	63.2	35.8	1.0	0.0
Bachelor's degree or higher	64.1	35.4	0.4	0.2
Household income *				
\$15,000 or less	55.6	42.0	2.4	0.0
\$15,001-\$25,000	59.5	38.9	0.9	0.7
\$25,001-\$50,000	64.4	34.9	0.7	0.0
\$50,001-\$75,000	66.8	32.7	0.5	0.0
Over \$75,000	65.9	33.5	0.2	0.3
Number of adults in household				
One	53.5	44.4	2.2	0.0
More than one	62.6	36.5	0.8	0.2
Language of interview **				
English	62.1	36.8	1.0	0.1
Spanish	42.7	56.7	0.6	0.0

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

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Table B-21b. Standard errors for percentage distribution of families' agreement with "The early intervention professionals respect the values and cultural background of my family."

Professionals respect the values and cultural background of my family	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	1.3	1.3	0.3	0.1
Child's eligibility category				
Developmental delay	2.0	1.9	0.5	0.2
Diagnosed condition	2.7	2.6	0.3	0.0
At risk of developmental delay	3.0	3.1	0.6	0.0
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.8	2.5	0.4	0.0
12 months to less than 24 months	2.6	2.7	0.4	0.0
24 months and older	2.7	2.2	0.8	0.5
Child's gender				
Male	1.1	1.2	0.5	0.1
Female	2.0	1.9	0.2	0.3
Child's race/ethnicity				
Caucasian	1.9	1.9	0.3	0.0
African-American	3.7	3.3	0.7	0.6
Hispanic	3.9	3.9	0.5	0.0
Asian or Pacific Islander	6.4	6.4	0.0	0.0
Mixed race or "other"	6.2	7.1	1.8	0.0
Primary female caregiver's educational attainment				
Less than high school diploma	4.6	4.7	1.2	0.0
GED or high school diploma	3.4	3.0	0.6	0.4
Some college	3.0	2.9	0.4	0.0
Bachelor's degree or higher	2.5	2.4	0.3	0.2
Household income				
\$15,000 or less	4.8	4.4	0.8	0.0
\$15,001-\$25,000	3.0	2.8	1.0	0.9
\$25,001-\$50,000	2.1	2.1	0.3	0.0
\$50,001-\$75,000	5.2	5.2	0.4	0.0
Over \$75,000	3.2	3.3	0.3	0.3
Number of adults in household				
One	7.1	6.3	1.4	0.0
More than one	1.5	1.6	0.2	0.2
Language of interview				
English	1.2	1.2	0.3	0.1
Spanish	5.6	5.2	0.8	0.0

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Table B-22a. Percentage distribution of families' agreement with "The early intervention professionals giving services to my family ignore my opinion."

Professionals giving services to my family ignore my opinions	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	2.5	4.3	40.3	52.9
Child's eligibility category **				
Developmental delay	1.0	4.1	40.9	54.0
Diagnosed condition	3.0	3.9	41.7	51.3
At risk of developmental delay	6.3	5.7	36.3	51.6
Child's age at entry into early intervention/initial IFSP ***				
Less than 12 months	4.5	5.0	36.2	54.2
12 months to less than 24 months	1.6	4.2	43.3	50.9
24 months and older	0.5	3.2	43.1	53.1
Child's gender *				
Male	2.3	3.3	40.6	53.8
Female	2.9	5.7	40.0	51.5
Child's race/ethnicity ***				
Caucasian	1.9	3.1	36.8	58.2
African-American	2.2	6.2	46.8	44.9
Hispanic	3.1	7.1	48.7	41.0
Asian or Pacific Islander	7.9	3.8	34.1	54.2
Mixed race or "other"	4.1	2.4	35.4	58.2
Primary female caregiver's educational attainment ***				
Less than high school diploma	4.9	8.1	52.5	34.5
GED or high school diploma	4.2	4.9	43.5	47.4
Some college	1.7	3.5	38.5	56.2
Bachelor's degree or higher	0.3	2.2	31.5	66.0
Household income ***				
\$15,000 or less	5.3	8.0	48.6	38.1
\$15,001-\$25,000	2.2	4.9	42.6	50.3
\$25,001-\$50,000	1.4	2.6	38.4	57.6
\$50,001-\$75,000	1.9	1.6	35.6	60.8
Over \$75,000	0.5	0.6	28.1	70.9
Number of adults in household *				
One	5.9	9.6	39.7	44.8
More than one	2.0	3.3	40.3	54.4
Language of interview **				
English	2.5	4.0	38.5	55.0
Spanish	3.3	9.4	72.9	14.4

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

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Table B-22b. Standard errors for percentage distribution of families' agreement with "The early intervention professionals giving services to my family ignore my opinion."

Professionals giving services to my family ignore my opinions	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	0.8	0.5	1.3	1.3
Child's eligibility category				
Developmental delay	0.3	0.7	1.5	1.7
Diagnosed condition	1.0	1.7	3.9	2.7
At risk of developmental delay	2.7	2.2	3.5	2.6
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	1.5	0.8	1.8	1.6
12 months to less than 24 months	0.5	0.9	2.1	1.9
24 months and older	0.3	1.2	2.2	2.1
Child's gender				
Male	0.9	0.4	1.2	1.4
Female	0.8	0.8	2.9	2.9
Child's race/ethnicity				
Caucasian	0.9	0.5	1.6	1.8
African-American	0.9	1.6	2.3	2.5
Hispanic	0.8	2.2	2.9	3.1
Asian or Pacific Islander	4.4	1.3	4.8	5.2
Mixed race or "other"	3.0	1.5	4.7	3.0
Primary female caregiver's educational attainment				
Less than high school diploma	1.8	1.7	4.6	4.1
GED or high school diploma	1.4	1.1	2.0	1.6
Some college	0.7	1.1	2.5	3.3
Bachelor's degree or higher	0.1	0.7	3.8	3.7
Household income				
\$15,000 or less	2.0	1.5	3.4	3.1
\$15,001-\$25,000	1.4	1.9	3.9	4.0
\$25,001-\$50,000	0.6	0.7	2.8	3.0
\$50,001-\$75,000	1.0	0.9	2.7	2.6
Over \$75,000	0.4	0.6	4.5	4.6
Number of adults in household				
One	2.8	1.8	3.3	2.4
More than one	0.5	0.3	1.2	1.3
Language of interview				
English	0.9	0.4	1.4	1.6
Spanish	1.2	3.3	4.6	2.7

Table B-23a. Percentage distribution of families' agreement with "The early intervention professionals make me feel hopeful about my child's future."

Professionals make me hopeful about my child's future	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	58.4	37.5	3.1	1.0
Child's eligibility category				
Developmental delay	57.6	37.9	3.6	0.9
Diagnosed condition	54.7	42.6	2.4	0.3
At risk of developmental delay	64.6	32.3	2.3	0.8
Child's age at entry into early intervention/initial IFSP **				
Less than 12 months	60.0	36.3	3.1	0.6
12 months to less than 24 months	56.0	38.2	4.3	1.6
24 months and older	59.0	38.5	1.5	1.0
Child's gender				
Male	59.9	35.3	3.8	0.9
Female	56.3	40.6	1.9	1.2
Child's race/ethnicity ***				
Caucasian	61.6	35.4	2.3	0.6
African-American	53.7	39.8	4.2	2.4
Hispanic	56.7	38.2	4.7	0.4
Asian or Pacific Islander	61.5	34.2	1.1	3.2
Mixed race or "other"	46.8	48.7	3.7	0.8
Primary female caregiver's educational attainment ***				
Less than high school diploma	47.7	42.7	7.5	2.1
GED or high school diploma	59.9	36.3	3.1	0.8
Some college	59.9	36.1	2.4	1.6
Bachelor's degree or higher	61.2	37.4	1.3	0.1
Household income ***				
\$15,000 or less	56.5	37.1	4.8	1.6
\$15,001-\$25,000	59.1	35.5	4.0	1.3
\$25,001-\$50,000	61.2	35.5	2.2	1.0
\$50,001-\$75,000	57.8	40.9	1.0	0.3
Over \$75,000	66.8	31.3	1.8	0.0
Number of adults in household				
One	55.5	39.6	4.2	0.8
More than one	59.0	37.1	2.8	1.1
Language of interview				
English	59.0	36.9	3.0	1.1
Spanish	47.5	47.5	4.8	0.3

Percentages describe a nationally representative weighted sample and may not add to 100 because of rounding and/or missing data; * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$.

Table B-23b. Standard errors for percentage distribution of families' agreement with "The early intervention professionals make me feel hopeful about my child's future."

Professionals make me hopeful about my child's future	Strongly agree	Agree	Disagree	Strongly disagree
Total population estimate	1.4	0.9	0.4	0.5
Child's eligibility category				
Developmental delay	1.7	1.3	0.3	0.5
Diagnosed condition	3.0	2.4	1.1	0.2
At risk of developmental delay	3.6	4.1	1.3	0.4
Child's age at entry into early intervention/initial IFSP				
Less than 12 months	2.0	2.3	0.8	0.3
12 months to less than 24 months	2.5	2.4	0.5	1.3
24 months and older	3.3	3.1	0.6	0.5
Child's gender				
Male	2.0	1.5	0.6	0.7
Female	1.8	1.4	0.7	0.4
Child's race/ethnicity				
Caucasian	1.7	1.2	0.9	0.3
African-American	2.7	3.2	1.5	1.4
Hispanic	3.5	3.7	1.5	0.3
Asian or Pacific Islander	7.4	6.6	0.8	2.4
Mixed race or "other"	4.9	4.7	1.6	0.8
Primary female caregiver's educational attainment				
Less than high school diploma	2.3	3.4	1.3	2.6
GED or high school diploma	4.3	3.6	1.0	0.5
Some college	1.4	1.4	0.7	0.5
Bachelor's degree or higher	2.0	2.0	0.5	0.1
Household income				
\$15,000 or less	6.2	4.8	1.3	1.9
\$15,001-\$25,000	4.4	3.4	1.3	1.1
\$25,001-\$50,000	2.7	3.0	0.6	0.5
\$50,001-\$75,000	5.0	5.0	0.6	0.3
Over \$75,000	3.0	2.9	0.8	0.0
Number of adults in household				
One	4.5	5.5	1.9	0.3
More than one	1.3	0.8	0.6	0.5
Language of interview				
English	1.4	0.9	0.4	0.5
Spanish	4.9	5.1	2.5	0.3



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