

***Perceptions of Parents of Children with Autism Spectrum Disorders Towards
Their Partnerships with Teachers***

**Yun-Ju Hsiao, Ph.D.
Washington State University Tri-Cities**

Abstract

The purpose of this study was to investigate the parent perceptions of partnerships between parents of children with autism spectrum disorders (ASD) and teachers who provided services. The instrument used in this study was the *Beach Center Family-Professional Partnership Scale (Family Version)*. The results showed that parents of children with ASD were close to satisfied with their partnerships with teachers, but they were more satisfied with family-focused relationships rather than child-focused relationships. Two family demographic predictors that contributed significantly to family-professional partnership were the age of the first child with ASD and type of school services received.

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It is important for educational professionals to establish positive partnerships with families of their students (Blue-Banning, Summers, Frankland, Nelson, & Beegle, 2004; Dunlap & Fox, 2007; Summers et al., 2005). These positive partnerships are mutual supportive relationships built among families and professionals with the goal of meeting the needs of both children and their families (Summers et al., 2005). The importance of these positive partnerships between families of children with disabilities and the educational system is reinforced by the Individuals with Disabilities Education Act (IDEA, 2004), and this concept has been incorporated in one of the six principles of the IDEA (2004) focused on developing and implementing special education programs (Blue-Banning et al., 2004; Summers et al., 2005). Parental involvement in educational decision-making is mandated in this legislation.

As the prevalence of autism spectrum disorders (ASD) increases, the demands for educational professionals to provide services for students with ASD and their families have risen (Stoner & Angell, 2006; Stoner et al., 2005; White, 2014). Partnerships between families and professionals are critical for the success of all students (Giovacco-Johnson, 2009; Hindman & Morrison, 2011; Stevenson & Baker, 1987), including students with ASD. Unfortunately, although parent-professional partnerships have been addressed in federal policy, parents of children with ASD continue to express that they are not satisfied with the school services provided to their children (Fish, 2006; Starr & Foy, 2012; Stoner & Angell, 2006). White (2014) examined a total of 97 complaint investigations filed by parents of children with ASD in a Midwestern state of the United States from January 2004 to January 2009 to identify the most frequently complaint issues. Common complaint issues included (a) problems with content and implementation of the individualized education program (IEP), (b) parental involvement, (c) procedures of evaluation and services determination, (d) qualifications of teachers, paraprofessionals, and other school

staff serving students with ASD, and (e) behavior management and disciplinary procedures (White, 2014). White (2014) noted the issues regarding parental participation and proposed the importance of fostering honest, trustful, and respectful relationships with parents of students with ASD.

Aligned with the above complaint investigations, parents of children with ASD also reported negative experiences they had in IEP meetings and felt that they were not viewed as equal partners in the IEP process (Fish, 2006; Starr & Foy, 2012). Additionally, many parents of children with ASD believe that they are not welcome and that the educational system often views them as hostile, demanding, and adversarial (Stoner & Angell, 2006). It can be seen that these parents still believe that they do not have equal power in their relationships with teachers (Hodge & Runswick-Cole, 2008). The development of the positive partnerships between parents and educational professionals is certainly not easy. Thus, to establish partnerships between families of children with ASD and educational professionals is a critical issue to address (Stoner et al., 2005).

In order to establish positive partnerships between families of children with ASD and educational professionals, the first step that needs to be taken is to understand parental perceptions of their relationships with educational professionals who serve them and their children with ASD. In addition, research is needed to understand the relationship between family demographic variables and family-professional partnerships to identify ways for improving the relationships and meet the needs of each individual family. Although many studies have explored these issues, most studies regarding family-professional partnerships between families of children with ASD and educational professionals conducted in the United States have a small sample size and/or are qualitative studies (e.g., Fish, 2006; Stoner & Angell, 2006; Stoner et al., 2005; Spann, Kohler, & Soenksen, 2003). For example, Fish's (2006) study used seven participants from one family support group chapter to investigate perceptions of parent of students with ASD towards the IEP meeting, and both studies of Stoner and Angell (2006) and Stoner et al. (2005) used eight parents of children with ASD to investigate parent perceptions and roles when they monitored their children's educational programs and interacted with school professionals. The results of these studies seem difficult to generalize to other populations. It is therefore timely to extend these studies to include a larger sample of parents of children with ASD. This will allow more generalization of results and will help schools develop systems and policies to support the improvement of parent-professional partnerships. The current study expanded the participant pool and used a quantitative method to investigate the current status of partnerships between families of children with ASD and teachers as perceived by parents of children with ASD. Specifically, this study evaluated the difference in parental satisfaction between child-focused relationships and family-focused relationships, and the relationships between family demographic variables (e.g., ethnicity, education, income, marital status, age of the child with ASD, and type and length of services received) and family-professional partnerships. The research questions that guided the current study were as follows:

1. How did parents perceive the quality of their relationships with teachers who work with them and their children with ASD?
2. Was parental satisfaction different between child-focused relationships and family-focused relationships?

3. Could the satisfaction of the family-professional relationships as perceived by parents be predicted from their ethnicity, education, income, marital status, age of the child with ASD, and type and length of services received?

Method

In order to answer the proposed research questions, a survey research design was used to collect information about the perceptions of parents of children with ASD in regards to their partnerships with teachers who provided services to them and their children with ASD.

Participants

The participants of this study included parents with at least one child with ASD. Parents were recruited through the assistance of four sources, including an ASD center, two ASD organizations, and an ASD service provider in a southwestern U.S. state. There were 230 valid surveys finished by parents of children with ASD in this study. Of these participants, 85.7% were female ($n = 197$) and 14.3% were male ($n = 33$). Over half of the participants were White ($n = 152$, 66.1%). A majority of participants were married (67.4%), 21.8% were divorced or separated, and 9.8% were never married, widowed, or living with a partner. About 50% of participants had a bachelor's degree or higher. In terms of the total household income, 17% of participants had an income of less than \$29,999, 15.7% earned between \$30,000 and \$49,999, 23.9% earned between \$50,000 and 69,999, and the remaining 42.2% made more than \$70,000. Some parents had more than one child with ASD in their families; a total of 260 children with ASD were reported from these parents. Of the children with ASD, there were 215 boys (82.7%) and 45 girls (17.3%), aged younger than 5 (29, 11.2%), 5 to 12 (145, 55.8%), 13 to 18 (62, 23.8%), and older than 19 (23, 8.8%), and 1 (0.4%) was missing. More specific demographic information for participating parents and information on their children are shown in Table 1.

Table 1
Family Demographic Information

Characteristics	Number of Parents (%)
Gender	
Male	33 (14.3)
Female	197 (85.7)
Ethnicity	
White (non-Hispanic)	152 (66.1)
African American	13 (5.7)
American Indian or Alaska Native	0 (0.0)
Asian	12 (5.2)
Native Hawaiian/Pacific Islander	4 (1.7)
Hispanic or Latino	27 (11.7)

Two or more races	17 (7.4)
Other	5 (2.2)
Relationship status of parent(s) in household	
Married	155 (67.4)
Widowed	5 (2.2)
Divorced	39 (17.0)
Separated	11 (4.8)
Never married	10 (4.3)
Living with a partner	10 (4.3)
Educational background	
No high school diploma or GED	4 (1.7)
High school graduate (diploma or GED)	36 (15.7)
Postsecondary, but no degree	48 (20.9)
Associate's degree	25 (10.9)
Bachelor's degree	71 (30.9)
Graduate degree	46 (20.0)
Total household income	
\$ 10,000- \$ 19,999	11 (4.8)
\$ 20,000- \$ 29,999	28 (12.2)
\$ 30,000- \$ 39,999	17 (7.4)
\$ 40,000- \$ 49,999	19 (8.3)
\$ 50,000- \$ 59,999	28 (12.2)
\$ 60,000- \$ 69,999	27 (11.7)
≥ \$ 70,000	97 (42.2)
Missing	3 (1.3)
Number of children with ASD	
Male	215 (82.7)
Female	45 (17.3)
Age of children with ASD	
< 5	29 (11.2)
5- 12	145 (55.8)
13-18	62 (23.8)
> 19	23 (8.8)
Missing	1 (0.4)
Type of therapy received in school	
ABA (Lovaas, DTT, etc.)	47 (20.4)
Floortime/RDI	9 (3.9)
Speech therapy	142 (61.7)
Denver early childhood	6 (2.6)
Other	73 (31.7)
None of the above	58 (25.2)

Length of therapy received in school weekly	
0-5 hours	126 (54.8)
6-15 hours	22 (9.6)
16-25 hours	9 (3.9)
26-40 hours	14 (6.1)
> 40 hours	1 (0.4)
None	58 (25.2)

Note. Percentage for *Number* and *Age of children with ASD* was calculated using the number reported divided by the total number of children reported ($n = 260$). Some families have more than one child with ASD. Because parents checked all that apply for the item *Type of therapy received in school*, percentage for this demographic information was calculated using the number of parents reported divided by the total number of valid cases ($n = 230$).

Instrumentation

The *Beach Center Family-Professional Partnership Scale (Family Version)* (Summers et al., 2005) was the main instrument used in this study to examine the parental perceptions of satisfaction with partnerships between them and the teachers who served their family and child with ASD. This 18-item scale is comprised of two subscales: *Child-Focused Relationships* and *Family-Focused Relationships*. Each subscale has nine items. Parents were asked to rate their satisfaction concerning their partnerships with the main teacher who worked with their children with ASD over the past six months. They rated each item on a 5-point Likert scale from 1 to 5 (i.e., very dissatisfied, dissatisfied, neither satisfied nor dissatisfied, satisfied, and very satisfied).

In addition to the items on the *Beach Center Family-Professional Partnership Scale (Family Version)*, the survey also contained background information for the researcher to obtain family demographics from participating parents. This information included gender, ethnicity, educational background of the parent, relationship status of the parent(s) in household and total household income. These parents also self-reported information about their children with ASD, including number of children with ASD living in the home, gender and age of their children with ASD, type of therapy their children received in school, and weekly length of therapy received in school.

Data Collection and Analysis Procedures

A web-based survey software, *Qualtrics* (Qualtrics Labs Inc., 2009), was used to distribute and collect data. Invitations to participate in the study were made with the support of the four aforementioned ASD organizations; these organizations distributed the e-mails that invited parents to participate in the survey.

The analysis was computed using the *Statistical Package of Social Science* (SPSS). The research questions guided the data analysis. The mean score and standard deviation were used to calculate the descriptive statistics of the scale. A dependent *t*-test was used to examine the difference between child-focused and family-focused relationships as determined by parental satisfaction related to family-professional partnerships with teachers. A stepwise multiple regression analysis was conducted to determine which variables contributed significantly to the family-professional relationships. Dummy coding was employed to recode categorical variables: ethnicity (White vs. non-White), educational level (postsecondary, but no degree and undergraduate vs. associate's

degree and above), and relationship status of parents (parents who were married or living with a partner vs. one-parent family). Age of the first child with ASD and the type of services received in school were treated as continuous variables. Income level was recoded. Total household income level from $\leq \$19,000$ to $\$49,999$ was recoded as one, from $\$50,000$ to $\$69,999$ was recoded as two, and $\geq \$70,000$ was recoded as three. Length of services received in school was recoded. When the family received no service, it was recoded as one, 0-15 hours was recoded as two, and 16 hours and above was recoded as three. Alpha level was set at .05.

Results

The mean scores and standard deviations for each individual item, subscales, and whole scale of the *Beach Center Family-Professional Partnership Scale* perceived by parents of children with ASD were shown in Table 2. Examination of the grand mean score across 18 items of the scale revealed that overall, parental satisfaction of their partnerships with teachers was relatively positive ($M = 3.68$, $SD = 1.04$), with a range from 3.17 ($SD = 1.28$) to 4.12 ($SD = .95$). In the subscale, the average mean scores for child-focused relationships ($M = 3.54$, $SD = 1.13$) and family-focused relationship ($M = 3.82$, $SD = 1.00$) were relatively positive as well. Two items rated the lowest mean scores among all items were in the subscale of child-focused relationships. These two items were the item, “your child’s teacher helps you gain skills or information to get your child’s needs” ($M = 3.17$, $SD = 1.28$), and the item, “your child’s teacher provides services that meet the individual needs of your child” ($M = 3.23$, $SD = 1.32$).

Table 2

Descriptive Statistics of the Family-Professional Partnership Scale as Perceived by Parents

Scale	<i>M</i>	<i>SD</i>
Child-focused relationship	3.54	1.13
Your child’s teacher...		
Helps you gain skills or information to get your child’s needs.	3.17	1.28
Has the skills to help your child succeed.	3.40	1.29
Provides services that meet the individual needs of your child.	3.23	1.32
Speaks up for your child’s best interests when working with other staff.	3.44	1.25
Lets you know about the good things your child does.	3.64	1.32
Treats your child with dignity.	3.82	1.19
Builds on your child’s strengths.	3.62	1.25
Values your opinion about your child’s needs.	3.69	1.22

Keeps your child safe when your child is in his/her care.	3.87	1.14
Family-focused relationship	3.82	1.00
Your child's teacher...		
Is available when you need him/her.	3.63	1.22
Is honest, even when there is bad news to give.	3.77	1.14
Uses words that you understand.	4.12	.95
Protects your family's privacy.	3.93	1.00
Shows respect for your family's values and beliefs.	3.90	1.08
Listens without judging your child or family.	3.74	1.16
Is a person you can depend on and trust.	3.60	1.26
Pays attention to what you have to say.	3.72	1.21
Is friendly.	3.99	1.06
Grand total	3.68	1.04

A dependent *t*-test was used to examine the difference in parental satisfactions between child-focused relationships and family-focused relationships. The result indicated that there was a significant difference in parental satisfaction between child-focused relationships and family-focused relationships ($t = -9.34, p < .001$). That is, parents reported higher satisfaction with family-focused relationships than child-focused relationships.

A multiple regression analysis was conducted to predict perceived family-professional partnerships based on (a) ethnicity, (b) education, (c) income, (d) marital status, (e) age of the first child with autism, (f) type of services received, and (g) length of services received. The results indicated that the two variables that contributed significantly to the family-professional relationships were age of the first child with autism ($\beta = -.188, p < .01$) and type of school services received ($\beta = .154, p < .05$). The overall percentage of variance explained by these two variables was 6.8%. That is, as the age of the child with ASD got older, the parental satisfaction of family-professional partnerships decreased, and as the family of the child with ASD received more types of services in school, the perceived parental satisfaction of the family-professional relationships increased.

Discussion

The primary purpose of this study was to investigate parents' perceptions of their relationships with teachers who worked with them and their children with ASD. The findings of the present study indicate that parents of children with ASD were close to satisfied with the professional partnerships they had with teachers who served them and their children. These relatively positive satisfaction ratings are consistent with a previous study focused on parents of young children with disabilities (Summers, Hoffman, Marquis, Turnbull, & Poston, 2005). However, due to the grand mean score in this study being only close to the scale of satisfaction (i.e., lower than 4), it can be concluded that parents still believe there is room for improvement in the family-professional partnerships developed. Specifically, parents rated the item, "your child's teacher helps you gain skills or information to get your child's needs" and the item, "your child's teacher provides services that meet the individual needs of your child" with the mean scores close to "*neither satisfied nor dissatisfied*" in the domain of child-focused relationships. This implies that teachers might need to make more efforts in helping parents gain skills or information to meet their child's needs, and may need to develop an understanding of individual student's needs so that they can provide appropriate services. In addition, teachers might need to understand what parents' needs are first so that their help can meet those needs and find ways to support parents in gaining information and skills relative to identified needs. It could happen that teachers thought that they had made efforts to help parents, but parents thought that what teachers helped were not what they wanted.

The second finding from this study was that parents of children with ASD were more satisfied with family-focused relationships than child-focused relationships. This result is consistent with the work of Spann et al. (2003) concerning parents' involvement in, and perceptions of, their children's special education services. Spann et al. (2003) found that the majority of parents reported high to moderate satisfaction with the communication that they had with their children's school. However, many parents also indicated that their children's school did not address, or minimally address, the most pressing needs of their child. To explain this more elaborately, it is important to focus on the results of the subscales. The subscale of family-focused relationships focused on respectful and supportive programs for the family as a unit, and communication as one of the most important elements (Summers et al., 2005). The subscale of child-focused relationships emphasized attitudes, activities, and services for the child with a disability, particularly children with ASD. More specifically, these items concern the professionals being reliable and competent to provide services that meet a child's specific needs (Summers et al., 2005). Thus, the results of this study may imply that parents believe that teachers make efforts to communicate with them but do not address what parents consider the most pressing needs or priorities of their children with ASD. This result implicates that in order to improve the child-focused relationships, as mentioned above, teachers may need to understand what parents' most pressing concerns/priorities are for their children and what skills or competencies parents think that their children need the most help with (Spann et al., 2003).

The final important finding of this study was related to any variables that were predictors of parental satisfaction with their family-professional partnerships. These results indicated that two family demographic variables were statistically significant predictors of family-professional partnerships. They were the age of the first child with ASD and the type of services children

received in school. The results indicated that as a child with ASD got older, parental satisfaction with their family-professional partnerships decreased, and as the child with ASD received more types of school services, the parents rated their family-professional partnerships at a higher level. The finding that the age of the first child with ASD was a predictor of family-professional partnerships supports previous research that parents of older children with disabilities report lower levels of satisfaction with their partnerships with professionals (Spann et al., 2003; Summers et al., 2005). There are two potential explanations for this outcome. One is that teachers of students with ASD at different ages may develop partnerships with parents in different ways in terms of their compassion and willingness to accommodate children's individual needs (Spann et al., 2003); the other is that parents of older children with ASD may have engaged in more conflicts with teachers and this could lead to unreasonable expectations or negative views of teachers in their ability to show care and concern for their children with ASD (Spann et al., 2003). However, these explanations need to be further examined in detail. The result of the type of services received in school as a predictor of family-professional partnership could be explained using the study by Summers et al. (2007) in which the data indicated that the adequacy of service provision in early childhood programs was a significant predictor for family-professional partnerships. These results implicate that teachers may need to understand the age of the children and the type of services they receive prior to recommending services to parents and their children with ASD. However, in the current study, these two variables (e.g., age of the child with ASD, school services received) accounted only for a small portion of variance. This indicates that there are other factors related to family-professional partnerships that may impact the relationships more. Further research is needed to identify these factors.

Several limitations in this study should be acknowledged. As the data in this study were only collected in a southwest state of the United States, the representativeness of the sample is confined. For example, the majority of the participating parents in the current study were White and about half of them have a total household income more than \$60,000. Findings should not be generalized across the entire population of parents of children with ASD. Further studies need to recruit more varieties of participants in terms of different family demographic variables. Also, only parents with access to the internet were able to complete the survey. These parents might not represent those who were unable to access to internet.

In conclusion, the present study contributes to the current literature as it offers an overview of parental perceptions of satisfaction with the relationships with teachers who served them and their children with ASD, and identifies potential predictors related to their partnerships. Understanding the current status of partnerships between parents of children with ASD and teachers helps teachers further identify the strengths and weaknesses of the development of partnerships and helps professionals work toward improvement of the partnerships.

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About the Author

Yun-Ju Hsiao, Ph.D. is an Assistant Professor of Special Education in the Department of Teaching and Learning at Washington State University Tri-Cities. Her research interests include families of students with disabilities, evidence-based instructional strategies for students with autism spectrum disorders, and culturally responsive teaching preparation and practices in special education.