

COUNSELING PARENTS OF HANDICAPPED CHILDREN:
A STUDY OF SELECTED SCHOOL DIVISIONS IN VIRGINIA

by
Bernice Wilson Munsey

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APPROVED:

Charles W. Humes, Chairman

Jimmie C. Fortune

Thomas E. Gatewood

Johnnie Miles

Jacqueline Eig

Richard D. Blocker

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(ABSTRACT)

The purpose of this study was to obtain baseline data on the implementation of counseling for parents of handicapped children in selected school divisions in Virginia. The 135 school divisions in Virginia were ranked by size of special education population as of the child count of December 1982. Thirty of the school divisions were selected as the sample by systematic random sampling procedures.

Two survey instruments were designed: one for school division superintendents and one for parents of handicapped students. Each of the 30 school division superintendents was sent one questionnaire. Eight, twelve, or sixteen parent questionnaires were sent to each of the 30 school divisions. The number depended on the size of the special education population in the school division. Half of the parent questionnaires were sent to the superintendent and half to the chairperson of the local Special Education Advisory Committee for distribution to parents of their choosing. There were 356 parent questionnaires in all. There was a 42% superintendent response and a 24% parent response.

Interviews were conducted with five of the seven school divisions which had responded that parent counseling was an integral part of the regular school program for handicapped children. The U.S. Department of Education, Office of Special Education and Rehabilitative Services, validated both the definition of parent counseling used in the research and the reasonableness and importance of the study findings.

Results of the research indicated that none of the school divisions which participated in the study provided parent counseling as an integral part of the regular school program for handicapped students; that provision of parent counseling depended upon individuals in the school system who perceived a need and made the effort to implement parent counseling; that during the course of this study there was a decrease in parent counseling services in some of the school divisions and no increase in parent counseling in any of the school divisions; and, that parent counseling has not appeared in state plans and has not been monitored by federal or state departments of education.

Dedicated
to
My Daughter

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Next, I wish to thank Dr. Dean Hummel, of Virginia Tech, for insisting that I complete my doctorate and that I write my dissertation on the subject of the handicapped. I deeply regret that he retired and I was left without his support during my dissertation years. I may someday forgive him for telling me the dissertation process would be the easiest part of my doctoral program.

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CHAPTER I

INTRODUCTION

Need for the Study

The Education for All Handicapped Children Act of 1975 (P.L. 94-142) "immediately began to assume an independent identity as watershed legislation that had significantly reshaped Federal policy toward the education of handicapped persons" (Osman, 1979, p. 1). Public Law 94-142 not only established the right of handicapped children ages three through twenty-one years to a free appropriate public education, it also guaranteed the protection of their parents' rights including the right to be involved in virtually every aspect of their handicapped child's education.

Areas of this parental involvement include: the parents' right to be informed of and to give consent for the testing of their handicapped child by the local school division; the parents' right to be informed of and to attend the local school division meetings which determine their child's eligibility to receive services under the regulations of P.L. 94-142 and the parents' right to

participate in the development of their child's Individualized Educational Program (I.E.P.) (Department of Health, Education, and Welfare, 1977).

Public Law 94-142 was the culmination of years of efforts by parents, professionals (primarily educators), and legislators on behalf of the education of the handicapped. Now, a decade after passage of this law, no legislation pertaining to the education of handicapped children has surpassed this landmark law. Since the enactment of P.L. 94-142 in 1975, and the subsequent publication of its regulations in 1977, there has been much research concerning the history of the law, the law as a whole, and selected entitlements of the law. Research is plentiful now concerning general implementation of certain of the law's mandates, but there is still a paucity of studies about implementation of other areas of this law.

Most parental involvement established by P.L. 94-142 focuses on the provision of appropriate services for their handicapped child. Parent counseling, mentioned several times in the regulations, is another form of parental involvement. Parent counseling is a service provided directly to the parent. There is, at this time, a dearth of studies regarding the provision of counseling for parents of handicapped students by school divisions (local education agencies).

The wording of the references to parent counseling are, in most cases, identical in the regulations of P.L. 94-142 and in "The Regulations Governing Special Education Programs for Handicapped Children and Youth in Virginia" (Commonwealth of Virginia, Department of Education, 1984). For example:

"Related services . . . the term also includes . . . parent counseling and training" (Department of Health, Education, and Welfare, 1977, p. 42479) (Commonwealth of Virginia, Department of Education, 1984, p. 128).

"Audiology includes . . . counseling and guidance of pupils, parents and teachers regarding hearing loss" (Department of Health, Education, and Welfare, 1977, p. 42479) (Commonwealth of Virginia, Department of Education, 1984, p. 112).

"Parent counseling and training means assisting parents in understanding the special needs of their child and providing parents with information about child development" (Department of Health, Education, and Welfare, 1977, p. 42479) (Commonwealth of Virginia, Department of Education, 1984, p. 124).

"Psychological services include . . . planning and managing a program of psychological services including psychological counseling for children and parents" (Department of Health, Education, and Welfare, 1977, p.

42479) (Commonwealth of Virginia, Department of Education, pp. 126, 127).

"Social work services (note: Virginia uses the terms 'Sociological services') in schools includes . . . group and individual counseling with the child and family" (Department of Health, Education, and Welfare, 1977, p. 42480) (Commonwealth of Virginia, Department of Education, p. 131).

"Speech pathology including . . . counseling and guidance of parents, children and teachers regarding speech and language disorders" (Department of health, Education, and Welfare, p. 42480. There is no comparable reference in the Virginia regulations.

This research is a study of parent counseling. For this study parent counseling is defined as it is referred to in the regulations of P. L. 94-142: parent counseling and training, assisting parents in understanding the special needs of their child and providing parents with information about child development, psychological counseling for parents, group and individual counseling with the family.

The literature agrees that counseling of parents of handicapped children is needed, that it can directly benefit the parents and can indirectly benefit their handicapped children. This belief is expressed in various ways.

Need for ongoing counseling relationships, not just a one-time session, is emphasized in the literature. The single most important need throughout their handicapped child's developmental years is "constructive professional counseling" (Norton, 1976, p. 202). Counseling parents to help them understand their child's disability can improve the working relationship of parents and educators (Christopher, 1983). If the handicapped and their parents are not helped by more and better counseling, the failure to do so will cause everyone additional pain (Buscaglia, 1975). Parents, as change agents, have a critical need for parent training and education in order to understand and implement professional recommendations (Jenkins, 1981). An extensive review of the literature revealed unanimous opinion that parent counseling is at least beneficial, if not essential (Burggraf, 1979; Cable, 1977; Kameen and MacIntosh, 1979; Olshansky, 1979; Roberds-Baxter, 1984).

Most of the literature concerning parental involvement in the education of their handicapped children since passage of P.L. 94-142 appears to focus on parents in the Individualized Educational Program (I.E.P.) process and at meetings of parents and professionals who work with their handicapped child. Far less research has been conducted on parent counseling and on their satisfaction with the parent counseling they have received.

One study of parental satisfaction selected several regulated areas of the law to investigate a relationship between compliance with selected rules and parental satisfaction. The rules selected included: identification of the child as eligible for services under provisions of P.L. 94-142, placement of the child in special education self-contained or resource classes, parental permission for testing, parental written permission for placement, information given parents of their right to appeal if the parent disagreed with the placement, parents' awareness of their right to read their child's records, whether parents had been asked to prepare an I.E.P. for their child, whether parents were invited at least once a year to an I.E.P. review meeting, and whether the parents believed their child was placed in the right special education program. In that study, parents were then asked how satisfied they were with their child's special education program (Polifka, 1981). Parent counseling was not identified as one of the areas investigated in that study of selected rules and parental satisfaction.

An exploratory study in Colorado of parental satisfaction identified some of the variables which might contribute to parental satisfaction with staffings because of the researcher's position that "Given that parents can be a valuable resource . . . the degree to which they are

satisfied with staffings may contribute to their willingness to assist in their child's educational program. To the extent this is true, satisfaction with staffings is an important issue in education" (Witt, J.C., Miller, D., McIntyre, R.M., & Smith, D., 1984, p. 28). This survey obtained demographic data: child's handicapping condition, number of staffings attended by parents, educational level of both parents, and if parents had been involved in due process hearings. Items on the survey related to parental participation in staffings.

No investigation of local school divisions' systemwide counseling services for parents of handicapped students and parental satisfaction was found in the literature. In this study the following questions were addressed:

1. How is parent counseling defined by local school divisions and parents?
2. Do local school divisions and parents perceive a difference between parent counseling and parent conferences?
3. To whom is parent counseling provided? (Is it influenced by age and/or handicapping condition of the child?)
4. How is counseling provided to parents of handicapped students in Virginia school divisions?

Statement of the Problem

The U.S. Department of Education has recognized the problem of limited research on the subject of parent involvement in the education of their handicapped children. "Despite the high visibility of parents on the special education scene, research and development related to the role of parents in the education of the handicapped has not kept pace. While some research on parent roles is available, and numerous materials directed toward parents are available, a great deal more needs to be done in this area" (Department of Education, 1983, p. 13).

In May, 1985, Dr. Harvey Liebergott, Branch Chief, Related Personnel Branch, Division of Personnel Preparation, Office of Special Education and Rehabilitative Services, U.S. Department of Education, wrote in response to an inquiry: "I have not forgotten your question about the need for baseline data for counseling for parents of handicapped children. In fact, I have checked with several colleagues who should know and we have very little data even with regard to what is being provided and no data with regard to quality of services. Obviously, we would be very interested in any data you could provide and might well make parent counseling a priority in the related services competition. In addition, your question has made me

realize that we are probably interpreting the training allowed under parent organization projects too narrowly as being simply that which provides parents with objective knowledge of facts, when we should also be giving parents counseling and psychological support" (Appendix A).

A review of the literature reveals a problem of insufficient information concerning the implementation of parent counseling by local school divisions. Since related services which help a handicapped student are to be specified on the student's I.E.P., parent counseling, as a related service, could then be specified on their child's I.E.P. A Congressional Research Service update of P.L. 94-142 reported, "the provision of required related services has proven to be one of the most difficult and costly problems encountered by local school districts. Numerous problems have arisen with regard to exactly what 'mix' of related services must be provided for each handicapped child attending public or private schools and what agencies are responsible for paying the costs of providing needed services. As a result of their problems, many school districts are cautious in their related service commitments" (Fraas, 1984, p. 11). Has parent counseling, as a related service, also been affected?

The regulations of P.L. 94-142 and the Commonwealth of Virginia identify a number of possible counselors: social

workers, psychologists, guidance counselors, audiologists, speech pathologists, and "other qualified personnel" (Department of Health, Education, and Welfare, 1977, pp. 42470, 42480) (Commonwealth of Virginia, Department of Education, 1984, p. 114). The regulations are both brief and vague, however, concerning of what parent counseling should primarily consist and are silent concerning who is to have primary responsibility for counseling parents of handicapped students or when, where and how parent counseling is to be provided. The regulations do not indicate whether parent involvement in parent counseling should include their having a role in determining what counseling would be helpful to them.

The Federal regulations of P.L. 94-142 and the regulations of the Commonwealth of Virginia refer to parent counseling as: counseling and training, guidance and counseling, psychological counseling, individual and group counseling. Humes stated that "counseling can range from psychiatric assistance to advice about academic offerings" (Humes, 1978, p. 194). How do local school divisions interpret the meaning of "parent counseling"? Is it possible that parent counseling is being provided in a myriad of ways across school divisions?

How do parents interpret the meaning of parent counseling? Is it possible: that parents may differ among

themselves in their interpretation of the meaning of parent counseling?; that the providers (local school divisions) and the consumers (parents) may differ in their interpretations of the meaning of parent counseling?; that the local school divisions and parents may differ in their satisfaction, or dissatisfaction, with the provision of parent counseling?

Is parent counseling implemented systemwide as an integral part of the regular school program for handicapped students in local school divisions? Is it implemented systematically at all? Is it provided ad hoc? Does the implementation of parent counseling vary from school division to school division? Is parent counseling provided to selected parents? Do factors such as age or handicapping condition influence the selection of parents for counseling?

What is the parental interpretation of the parent counseling? Does the extent of the involvement of parents in the counseling process appear to influence the parents' interpretation of and satisfaction with parent counseling? The answers to the above questions cannot be found in the literature.

In summary, parent counseling is mentioned repeatedly in both the regulations of P.L. 94-142 and the Commonwealth of Virginia. However, there is neither baseline data about

the implementation of parent counseling nor information and perception data from providers and consumers concerning the provision of parent counseling.

Purpose of the Study

The purpose of this research was to do a baseline study of one aspect of parental involvement in the education of handicapped children. The counseling of parents of handicapped students, as referred to in the regulations of P.L. 94-142 and the Commonwealth of Virginia, was the area of parental involvement selected for this study.

The following questions were asked for the purpose of obtaining baseline data about the implementation of parent counseling:

1. How is parent counseling defined by local school divisions and parents?
2. Do local school divisions and parents perceive a difference between parent counseling and parent conferences?
3. To whom is parent counseling provided? Is it influenced by age and/or handicapping condition of the child?
4. How is counseling provided to parents of handicapped students in Virginia school divisions?

It is hoped that the results of this study will contribute to the currently limited knowledge about the implementation of parent counseling. The data about parent counseling and the simultaneous responses of both local school divisions and parents may then be of use to local, state, and Federal agencies and to parents of handicapped students as they work in the partnership established by the Education for All Handicapped Children Act.

Issues related to parent counseling were selected for investigation following an analysis of P.L. 94-142, its regulations, the regulations of the Commonwealth of Virginia, and a review of the literature which is documented in Chapter II. Factors which might influence the provision of counseling for parents of handicapped children were included in the baseline study:

- continuum of parent counseling
- format of counseling
- parents' need for counseling
- notice of availability of parent counseling
- schedule of parent counseling
- parent counselor
- selection of parent counseling topics
- students' ages
- students' handicapping conditions
- students' school placement

-- students' class setting

No hypotheses are set forth in this study. Because of the paucity of data on the subject, the four research questions seek responses which will provide baseline information and add to the data currently available.

Definition of Terms

Definitions of some of the terms used in this research come from the statute and regulations of P.L. 94-142 and from Virginia regulations. Other terms are defined according to generally agreed-upon usage.

Definitions from P.L. 94-142

"Special education' means specifically designated instruction, at no cost to parents or guardians, to meet the unique needs of a handicapped child, including classroom instruction, and instruction in hospitals and institutions . . ."

"Related services' means transportation, and such developmental, corrective, and other supportive services (including speech pathology and audiology, psychological services, physical and occupational therapy, recreation, and medical and counseling services . . ."

"Free appropriate public education' means special education and related services which (A) have been provided

at public expense, under public supervision and direction, and without charge . . ." (Education for All Handicapped Children Act of 1975).

Definitions from Regulations of P.L. 94-142

* "Handicapped children" means those children evaluated . . . as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf-blind, multi-handicapped, or as having specific learning disabilities, who, because of those impairments need special education and related services . . ."

"Parent" . . . means a parent, a guardian, a person acting as a parent of a child, or a surrogate parent who has been appointed . . . The term does not include the State if the child is a ward of the State . . . The term parent is defined to include persons acting in the place of a parent, such as a grandmother, or step-parent with whom the child lives, as well as persons who are legally responsible for a child's welfare . . ."

"Qualified" means that a person has met State educational agency approved or recognized certification, licensing, registration, or other comparable requirements which apply to the area in which he or she is providing special education or related services . . ."

"Related services" means supportive services as are

required to assist a handicapped child to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training . . ."

"Counseling services' means services provided by qualified social workers, psychologists, guidance counselors, or other qualified personnel . . ."

* "Parent counseling and training' means assisting parents in understanding the special needs of their child and providing information about child development . . ."

"Psychological services' include . . . planning and managing a program of psychological services, including psychological counseling for children and parents . . ."

"Social work services in schools' include . . . group and individual counseling with the child and family . . ."

"Speech pathology' includes . . . counseling and guidance of parents, children and teachers regarding speech and language disorders . . ."

"There are certain kinds of services which might be provided by persons from varying professional backgrounds and with a variety of operational titles, depending upon

requirements in individual states. For example, counseling services might be provided by social workers, psychologists, or guidance counselors . . . depending upon State standards" (Department of health, Education, and Welfare, 1977, pp. 42478-42480).

Definitions from "Handbook for Parents of Handicapped Children, Rights and Responsibilities" (Commonwealth of Virginia, Department of Education, 1982) and "The Regulations Governing Special Education Programs for Handicapped Children and Youth in Virginia" (Commonwealth of Virginia, Department of Education, 1984) are virtually identical to the Federal regulations.

For the purposes of this study, the following terms used in the study were defined according to generally agreed-upon usage with the approval of the doctoral committee.

* "Parent counseling" is defined as providing counseling services to parents consisting of counseling and training, assisting parents in understanding the special needs of their child and providing parents with information about child development, psychological counseling for parents, group and individual counseling with the family.

"Regular classroom" is a classroom to which non-handicapped students are routinely assigned.

"Resource room/learning center" means a room, or

rooms, in a regular school in which special educational services are provided to handicapped students for less than a school day.

"Self-contained classroom" is a classroom in which special educational services are provided to handicapped students who are assigned to that class for most, or all, of the school day.

"Special education center" is a separate school building all of whose students are handicapped and receive special educational services.

"Homebound/hospital" means the site of special educational services provided to handicapped students who, at the time, are unable to attend a less restrictive environment such as one of the previously identified and defined class and school placements.

"Informational counseling" means the provision of concrete information such as that which concerns course offerings, progress of students, legal rights of handicapped students and their parents.

"Adjustment/psychological counseling" means the provision of services designed to improve parent-child relationships, identify and reduce concerns, evaluate and improve and maintain family dynamics.

Limitations of the Study

The geographic area selected for study was the Commonwealth of Virginia. This research was a study of parent counseling and its implementation in selected local school divisions in one State. Any attempt to make generalizations from the results of this investigation must consider the limitations of the geographic area studied.

The populations identified were school division superintendents in Virginia and parents of handicapped students in those school divisions. School division superintendents in the sample school divisions were selected and contacted directly. Due to confidentiality, parents were not contacted directly. Parents in the sample were selected and contacted by the school division superintendent or by the chairperson of the local special education advisory committee in each of the identified school divisions. The indirect selection of parents could have an impact on the study. Chapter IV discusses the results.

The survey instruments required the respondents, both the parents and the school division superintendents, to use recall, memory. Recognition of this as a possible limitation of the study is noted.

The study is limited to parent counseling and does not include a study of parent training. There are much

research and implementation data about parent training. Parent counseling was identified for study because of the lack of data about the implementation of parent counseling.

Assumptions of the Study

The survey instruments were assumed to be capable of eliciting responses which would obtain description, perception, opinion, and satisfaction data from local school division superintendents and parents of handicapped students. Analysis of the data, it was assumed, would provide answers to the research questions. Underlying assumptions were that responses would be valid and reliable. It was also assumed that there would be no collaboration between respondents. The validity of the study relied on these assumptions.

Summary

Public Law 94-142 established many rights of handicapped children. This landmark legislation also guaranteed the right of parents of handicapped children to be active participants in the education of their children. One area of parental involvement is the provision of counseling for parents.

Baseline data are not available concerning the local school divisions' implementation of parent counseling. The dearth of literature and baseline information led to the study which seeks to add to the body of knowledge about the provision of parent counseling.

CHAPTER II

REVIEW OF THE LITERATURE

Public Law 94-142 established a partnership of parents and professionals with the common purpose of assuring each handicapped child an appropriate education. This partnership was the culmination of many years of parental involvement on behalf of their handicapped children and the work of professionals. "Without parental pressure, many of the services now provided to handicapped children would not exist" (Witt, et al., 1984, p. 27). With the passage of P.L. 94-142 in 1975, and the publication of its regulations in 1977, parental involvement became a part of that law. Parent counseling, the local school divisions' provision of counseling services for parents of handicapped students, is one aspect of that involvement. }

A review of the literature reveals that parents, not so long ago, were frequently considered to be part of the problem, and sometimes the cause of their child's handicap (Kirk & Gallagher, 1979; Witt, et al., 1984). In order to understand more clearly the evolution of involvement of parents of handicapped children, and specifically involvement in parent counseling, a review of the history of the relationship between parents and educators is presented.

No single professional is assigned primary responsibility for counseling parents (Christopher, 1983). Almost a decade after the publishing of regulations of P.L. 94-142, a comprehensive review of the literature reveals no clear picture of the provision of parent counseling services in local school divisions, no indication of who has assumed primary responsibility for parent counseling, no study of the involvement of parents of handicapped children in parent counseling throughout local school divisions, and no study of perceptions of local school divisions and parents concerning parent counseling and their satisfaction with it.

There are ten subsections of the review of selected literature: 1) parent involvement - a history, 2) rationale for parent counseling, 3) continuum of parent counseling, 4) individual or group counseling, 5) relationship between parent and parent counselor, 6) models of parent counseling, 7) studies of parent counseling, 8) qualifications of parent counselors, 9) training of parent counselors, 10) parent counseling and P.L. 94-142.

Parent Involvement - A History

Katz (1961) described the evolution of parent involvement between the end of World War II and 1961 as parents

moving from isolation and aloneness to parents taking constructive action to do something about their child's situation and banding together with other parents to create a sudden and forceful emergence of self-organized groups whose phenomenal growth was significant in American life. As a result of the personal involvement of thousands of parents and the unique dynamism of parent groups, public policy in the United States was influenced in remarkably little time and millions of Federal and state dollars were appropriated for research and programs (Katz, 1961). The rapid growth of the Association for Children with Learning Disabilities (A.C.L.D.) was described as parent power consisting of parents who had learned where to exert pressure and had formed an organization to work from that strength to improve the educational situation and future of their handicapped children (Brutten, Richardson & Mangel, 1973).

McDowell (1976) wrote that although many people endorsed the rights of handicapped children, the parents played a key part in the growth of the awareness of the rights of the handicapped. It was his belief that parents initially simply sought help for their handicapped child and did not originally set out to change the system (McDowell, 1976).

In the late 1960s, legislation began to be passed

which established certain rights for some categories of handicapping conditions. Learning disability was one of the last handicaps to be specifically named in law. Five years after agreement upon the name for the handicap and the establishment of A.C.L.D. by parents, a bill was presented in Congress which would establish and define learning disability as a handicap recognized and served by law.

The statement of one of the five parents representing A.C.L.D. at the Congressional hearings on the Children with Learning Disabilities Act of 1969 corroborated McDowell's position that parents did not initially set about to change the system but only to help their handicapped child. The parent testified that, "sometimes the parent, recognizing his role as diagnostician, forms an Association, as I have done, in an attempt to reconcile conflicting diagnoses and to learn as much as possible as fast as possible to help his own child and others who do not fall completely into any of the existing educational categories" (House of Representatives, 1969, p. 165). The fledgling state association, founded one year before, and at that time consisting of 60% parent and 40% professional membership, had a conducted a needs assessment by surveying every school and health district in Virginia to determine the extent of facilities and services for the learning disabled. The

results had indicated need for adequate numbers of teachers trained to appropriately educate students with learning disabilities; need for recognition of the handicap; need for early and accurate diagnosis, treatment and education; need for model centers, and need for adequate funding (House of Representatives, 1969, p. 165). In an attempt to seek help for the children, enough parents had indeed concluded that the system might need to be changed, by law.

In Virginia, as in other states, the right to an education was granted to only certain categories of handicapped children and, in Virginia, the right was first given to the hearing impaired. In 1970, when the parent-authored Education for All Handicapped Children Act in Virginia was not reported out of committee, the General Assembly authorized its Virginia Advisory Legislative Council (V.A.L.C.) to study the needs of all handicapped children and adults in Virginia and to report their findings prior to the 1972 session of the legislature. The Virginia Education for All Handicapped Children Act, written by a parent of a handicapped child, was one of seven major proposals of the V.A.L.C. committee which became law in 1972, three years before passage of P.L. 94-142.

Cruickshank (1967) had written that the ideal situation is one where parents and professionals work through existing professional agencies toward common goals rather

than create separate parent-run programs. Katz (1961) had indicated earlier that this ideal did not always work. He found that, when parents did not find existing agencies ready and able to provide the requested help, the parents would create their own services to meet the need. The passage of legislation for the handicapped helped to establish a closer working relationship of parents and professionals in a common agency environment. However, as the rights of handicapped children to an appropriate education and access to such programs began to be established, the argument to include parents of handicapped children in the educational process of their handicapped children became stronger.

More professionals became advocates for the parents of handicapped children. Stott (1972) admonished that psychologists and teachers should not consider parental evaluations as necessarily biased. Some professionals felt sure that professionals may have been wrong in several instances and the parents' right. Martin (1973) felt that parents should not have to change public attitudes but that, because the public continued to need to learn, parents had become teachers of that public which did not yet offer education to their handicapped children.

Parents were self-advocates claiming the right to participate in meetings which concerned their child and

their right to read professional documents about their child. "It is said that parents initiate change and professionals implement change. We parents are initiating this change of policy. It is time for professionals to implement. Then, perhaps we can really unite to help our children as well as ourselves . . . An appropriate working relationship requires respect and trust. Why shouldn't we be trusted with information about our own children? The parent-professional team should acknowledge their differences in role and training. But neither should respect, or permit, discrimination. The child is obviously less well served by this outmoded policy" (Munsey, 1973, p. 23).

Support for parent involvement grew (Brutten, et al., 1973). Busken (1975) reminded professionals that they could observe, study, and make recommendations, but that parents live every day with the reality of their child's handicap. That year, P.L. 94-142 became law and a partnership of parents and professionals were established.

Rationale for Parent Counseling

McDowell (1976) wrote that parent counseling is considered to be a necessary component of most programs which provide services for handicapped children. For many years, according to Buscaglia (1975) studies had indicated that

parents of the handicapped needed more and better counseling. If the handicapped and their parents are not helped, the failure to do so will cause everyone additional pain (Buscaglia, 1975).

Christopher (1983) concluded that the literature reveals that counseling parents to help them understand their child's disability can improve the working relationship of parents and educators. Parents are change agents and they have a critical need for parent training and education as they must understand the educational evaluations in order to help them implement their recommendations (Jenkins, 1981).

Buscaglia (1975) proclaimed that parents have the same needs: to be shown, taught and led. We need, he said, to be told alternative ways of doing things. Most parents are not professionals trained to work with the handicapped; most have to be taught how to help their handicapped children; and, he proposed that by working together both parents and professionals could do a better job. Parents must make all of the most crucial decisions and therefore need the knowledge and self-confidence to make the right decisions (Kratoville, 1972).

Olshansky (1970) stated that parents undergo a chronic sorrow the intensity of which will vary from time to time and from one family to another. He recommended help for

the parents' sorrow and concrete programs which help them with their child.

Public Law 94-142 includes parent counseling during the years the child is covered by the law. Counseling for parents of adolescents would, then, also be available. Cable (1977) believed that group counseling for parents of adolescents could offer the parents techniques of management and home teaching which would, in turn, make the entire family's comfort and mental health better.

Parents' needs for counseling do not diminish with time, according to the literature. Buscaglia described developmental stages through which parents progress and which they must sometimes re-experience and cope with again (Buscaglia, 1975). "Parents have a beautiful way of never giving up; still, many report feelings of grief, disbelief, or anger after living with a disabled child for twenty years . . . The emotional and environmental changes that a disabled child brings into the family resonate throughout it forever" (Burggraf, 1979, p. 215).

What do parents want counseling to be? The literature reports that parents want an empathetic, honest relationship, specific assistance with I.E.P.s, behavioral assistance with their child, and skills to help their handicapped child deal with his/her handicap (Kameen and McIntosh, 1979; Gold and Richmond, 1979; Burggraf, 1979). Some

literature mentions the need to help parents to adjust to the fact that they have a handicapped child and to the needs of the child (Fairfield, 1983).

Some of the literature deals with specifics: "Parents want to be recognized for the work they have already done. They seek to have future educational endeavors build on that work, not to begin again. Counselors can help discover what parents have already taught the child, how they have done it, and what still needs to be taught . . . They have a right to know what educational opportunities exist for their child as well as what community resources and rehabilitation services are available . . . Parents of disabled children want and need the understanding of concerned, caring and knowledgeable counselors. Understanding is a beginning, however, it is not enough" (Burggraf, 1979, pp. 216-218).

The single most important parental need throughout their child's developmental years is "constructive professional counseling" (Norton, 1979, p. 202). There will always be parents who have just learned that their child has a handicap (McDowell, 1976). It is important to consider the individual needs of parents when providing parent counseling services. It is also important to determine how they are responding to counseling. "In counseling, it is important to check with parents to determine how they are

hearing and processing the information received" (Prescott and Iselin, 1978, p. 175).

There is an awareness of the needs of individual parents in the literature. The comfort level of the parents' involvement in their handicapped child's education should be determined not by generalized expectations but by parents' preference (McMillan and Turnbull, 1983).

Because the research has consistently "supported direct involvement by parents" (Witt, et al., 1984, p. 28), some educators have advocated more parental involvement. Both the letter and the spirit of P.L. 94-142 demand this, the authors insist. It is likely that people who are involved in defining problems and in developing strategies to solve them will be more willing to share the responsibility. "Despite the numerous advantages of and reasons for personal involvement in inter-disciplinary staffings, there is nowhere close to an equal partnership with parents" (Witt, et al., 1984, p. 28). Kroth and Kroth (1976) asserted it is important to be able to determine the readiness level of the parent and to be aware of the appropriate time to respond to the parent's feelings in order to work successfully with parents.

When planning services, the diverse needs of parents and the individual preference for counseling and other forms of parental involvement should be taken into account

(Margalit, 1982; Turnbull and Turnbull, 1982). "Of course, final decisions in the counseling process must be made by the parents; the counselor's responsibility is to assist the parents in decision-making for the maximum benefit of all involved" (Norton, 1976, p. 204).

Continuum of Parent Counseling

There is a continuum of counseling services that extends from advice about courses to psychotherapeutic intervention (Humes, 1978). McDowell (1976) observed that parent counseling programs consisted first of information counseling, then of psychotherapeutic counseling, then of parent training programs. For the purpose of this research, parent counseling strategies were termed as follows: informational, training, and adjustment/psychological. The issue of the continuum raised questions about the content of parent counseling, as well as qualifications and training of the parent counselor.

The types of parent counseling depend on several factors such as the child's handicap, the presenting problem, and the profession of the parent counselor (Burggraf, 1979). Another factor is how the provider of parent counseling defines the term.

Individual or Group Counseling

Both individual and group counseling are felt to be helpful, but emphasis in the literature seems to favor the benefits of group counseling. One advantage of group counseling is that the counselor can meet common parental needs for information about disabilities, about P.L. 94-142 and the rights accorded children and parents under the law, and the Federal and state regulations. Parents in a group counseling situation can also deal with similar problems and solutions (Kameen and Huber, 1979). The issue of who provides the parent counseling and of what the counseling consists arises again when considering individual or group counseling (McDowell, 1976).

Perosa and Perosa (1981) suggested parents and siblings be counseled together and separately. They also asserted that the counselor can integrate a holistic view of the child's situation by being the team facilitator and systems processor who assures that every professional understands services and family dynamics. Without this sensitivity, they predict the team will fail the child.

Relationship Between Parent and Parent Counselor

A description of the relationship between home and

school, between parent and counselor, can be found in the literature. "Parents have been and continue to be the primary teachers of their children. If helping professionals can accept the basic truth, they can help parents accept consultation with dignity. Counselors can help parents organize for the best interests of their child and obtain the benefits of some long overdue help for themselves. Parents can do for their child what they want done. Counselors can help them do it" (Burggraf, 1979, p. 220).

The definition of parent counseling, the specific needs of the parents at the time, the profession of the parent counselor, and the form of parent counseling all overlap when considering the parent-counselor relationship. McDowell (1976) indicated that it may be appropriate at times for the counselor to be authoritative and direct, and at other times to be more of a listener and sometimes to be a facilitator helping parents to become informed and trained to find other support services to help themselves and their children.

"It is important to provide assistance at the level (of need) it is requested . . . counselors will only be able to express caring to the extent that they truly care . . . a client's willingness to be open is in proportion to the counselor's willingness to be open" (Prescott and

Hulnick, 1979, p. 264). A relationship between parents and counselor can be established only within an open atmosphere where parents permit their feelings to be known and where work can be accomplished on parents' issues leading to the parents' working more effectively with their handicapped child (Prescott and Hulnick, 1979). Parents must know that counselors are always ready to support and encourage the parents and their children and to refer them, as appropriate, to other service providers (Norton, 1976).

Models of Parent Counseling

In a review of parent involvement programs, Shapero and Forbes (1981) also studied parent counseling and parent training models and recommended that future counseling programs consider the individual needs of parents and select carefully from the variety of parent counseling program models available. These reviews of studies concluded that parent involvement programs, in general, had a positive effect on learning disabled children's academic performance, especially tutoring and counseling programs. "Future studies must examine those techniques used successfully as well as those used with inconclusive results to appropriately extend the existing research . . . with the advent of Public Law 94-142 and its mandate for parental

involvement, there is a growing need to identify successful programs in this area. It is the responsibility of future researchers to determine those components that contribute to program success" (Shapero and Forbes, 1981, p. 503).

Adamson's three dimensional classification system of counseling parents of learning disabled children is considered by Shapero and Forbes (1981) to be a good model. The three dimensions are education, interpretation and habilitation. The education dimension served to reduce anxiety. Interpretation involved parents in interpreting the meaning of their child's behavior, and habilitation included tutoring. These three dimensions correspond, roughly, to the categories of information, adjustment/psychological, and training used in this study.

Wilson (1979) made observations about parent training models and categorized them as "therapy and discussion groups; . . . behavioral training; . . . teaching and/or other supportive training. The use of one of these approaches to the exclusion of others, does not take advantage of current diagnostic potential. At present, there is only limited literature to point out those characteristics which would indicate the preference for one type of parental involvement or another" (Wilson, 1979, p. 50).

The goals of counseling, according to Gold and Richmond (1979), are to assist parents in exploration of

all aspects of a situation, to increase their knowledge and understanding of their child's development, and to help parents look at their parental role and at the complex relationship of parent and child. Gold and Richmond (1979) also cite Heisler's recommendation to parents that they be empathetic with their child's unhappy feelings so that the child does not become apathetic and listless. Rogerian-like acceptance of the child is Heisler's way of increasing the handicapped child's self-esteem which, in turn, will help the child to become more independent and self-supporting.

Gold and Richmond (1979) also reviewed Bricklin's psychoeducational model which consists of a group parent format with provision by the counselor of specific information about learning disabled children and the individual child, as well as an opportunity for parents to discuss their feelings. Parents learn how to be accurate listeners and observers of their child's behavior. They decide what they want their child to learn. The Bricklin model allows for individual counseling if the parent is not ready for the group. Each group consists of parents of children of like disabilities and ages. Gold and Richmond (1979), in their study of several models, see the benefits of the Bricklin model to be that of guiding parents to see their children from several perspectives, to see their role as

change agents, to learn how to set limits, and to know their child's actions are not totally the parents' responsibility.

The Mirror Model of Parental Involvement has four levels of parent needs ranging from needs all parents have to needs few parents have. This model gives specific suggestions how to meet each level of parent needs (Kroth, Ottoni and Parks, 1982).

In a 1976 evaluation of parent training materials, Kroth and Kroth (1976) found Dinkmeyer and McKay's Systematic Training for Effective Parenting (S.T.E.P.) program to be helpful. S.T.E.P. is designed to deal with normal problems of typical parents and it is not considered by the author to be group therapy specifically for parents of handicapped children. Because of its design to improve communication skills of family members, Kroth and Kroth (1976) felt it would be useful to parents of handicapped children.

Many parent counseling programs focus on present needs. The literature contains data indicating parents also need information and reassurance regarding future opportunities and careers for their handicapped child (Texas Education Agency, 1978; Brolin and Gysbers, 1979).

Lichter (1976) urged that communication with parents begin with listening and proposed both a Rogerian

client-centered approach and active listening based upon Parent Effectiveness Training (P.E.T.). Lichter sought to bring parents of handicapped children out of their isolation with the teacher's respect for the parent's potential for self-knowledge using the Rogerian model. To move parents from self-knowledge to active involvement, Lichter recommended the P.E.T. active listening approach which parents can implement with their children. Active listening using the P.E.T. approach would, he believed, expand on the self-knowledge and would give support to parents in their own independent thinking and ability to solve problems.

"Active listening clarifies word meanings, conveys attentiveness, elicits information, and facilitates sharing of feelings. It is the process of feeding back to the parent our interpretation of what was said, including the emotions behind it. The parent, then, can confirm or correct our understanding . . . Active listening is effective when you are confronted with the recurring grief of parents with special children . . . Grief can be a positive process which allows growth, but it is, nevertheless, very painful. It is especially difficult for parents of handicapped children as they experience grief anew at various times in their child's development. When other children of their child's age start to school, begin dating, graduate,

or marry, parents of special children are reminded of their loss and their grief is rekindled" (Roberds-Baxter, 1984, p. 58).

Studies of Parent Counseling

It is not uncommon to find that the conclusions of one study conflict with the conclusions of another. A study of the effect of parent counseling on the academic functioning of handicapped children assessed the effect of four treatments on academic performance of learning disabled students: combination of parent counseling and tutoring; combination of information provided by mail to parents and tutoring; tutoring exclusively, and regular curriculum. The results indicated that a significant increase in children's achievement and IQ scores occurred only with the combination of special teaching strategies and direct parent counseling. The researchers drew two conclusions: 1) that it is possible for parents to have significant effect on a child's performance on an intelligence test, and 2) that the cognitive-affective mode of learning should be the treatment (Edgerly, 1975).

Another study of another model produced different conclusions though both studies concluded that children benefit from their parents' receiving parent counseling.

Sumlin (1978) designed an affective-cognitive group counseling program referring to it as training rather than counseling in an attempt to make it sound less threatening to the target group of parents of elementary aged handicapped children. In this study, the cognitive group's post scores were significantly higher than those of the affective-cognitive group. Specific recommendations of the Sumlin study may provide clues as to some of the facts which might have led to the results. Sumlin recommended a parent be co-leader with the rationale that it would diminish skepticism of the leader and offer a model. The counseling environment must be stimulating, pleasant and comfortable. Public relations materials should include mass media and mail, be attractive, and include reminder notes and calls. Child care, transportation and refreshments must be available (Sumlin, 1978).

Another study which focused on two selected parent counseling approaches identified feelings in one and behavior in the other. Success criteria were: direct observations, attitudinal scales, maternal reports and frequency counts to measure outcome. The conclusion was reached that, for the sample population of parents of mentally retarded children, the group which focused on the behavior, rather than feelings, made significantly greater improvement (Tavormina, 1975). The investigator recommended that

further research be conducted using other parents of mentally retarded children and parents of children with other handicapping conditions. It is difficult to assume that an eight week program, no matter how effective, could solve problems that have taken years to develop" (Tavormina, 1975, p. 30).

The Adlerian Open Center Family Counseling Model was implemented by Smithells (1983). This model has five basic assumptions: 1) family dynamics are similar but concerns vary from family to family, 2) families and children lack information but are not sick, 3) interpersonal nature of relationships is acknowledged by recognizing children's behavior as disturbing, 4) people can learn through educational experiences, and 5) ultimate concern is the child's educability. Use of the Adlerian Model with families of three to five year old non-retarded physically handicapped youngsters was reported in one study to result in significant positive changes in several areas. There were positive changes in parental perception of their child's behavior as well as increases in the child's constructive social behavior, level of maturity, and social readiness for kindergarten. Parental attendance showed a strong correlation with child improvement. The conclusion was drawn that a successful model is one which is both educational and concerned to a certain extent with social issues

(Smithells, 1983).

The Smithells study was supported by a long-running Adlerian based parent counseling program which began prior to P.L. 94-142 and was continuing in expanded ways three years later. The program was based on Adlerian child rearing principles and three concepts: 1) behavior as goal directed with consequences, 2) democratic child raising methods, and 3) parent involvement which generated a supportive system among parents. Exceptionalities of the children ranged from profound to mildly mentally retarded students in special education programs in a consolidated school district. Because there were initially no parent counseling services, school staff were asked to help parents understand their handicapped child and to develop parenting skills. After a needs assessment, specific parental concerns and issues were addressed. The program grew as parent participants began to run groups and more parents in an increased number of schools became involved. Over the first three year period, there was a 75% - 80% school staff attendance which prompted the school district to offer in-service credits. Evaluation results indicated that parents had more positive attitudes toward their child's capabilities and they reported a decrease in their child's disruptive behaviors (Yura, Zuckerman, Betz, and Newman, 1979).

Studies indicate that other parent counseling programs were based not on a specific counseling model but on an assessment of parental needs. Feuquay (1979) assessed parental needs and initiated a parent counseling program with the purpose of determining the effects of structured group counseling with elementary aged learning disabled students and parents counseling on the self-concept of the children and on the student behaviors as observed by their teachers. There were significantly improved behaviors in both.

In 1979, one author felt services for parents tended to be done at random with minimal needs assessment in the planning of the programs and recommended that relevance be considered in planning parent programs in the future (Wilson, 1979).

Qualifications of Parent Counselors

Public Law 94-142 stipulates that parent counselors be qualified (Department of Health, Education, and Welfare, 1977). The issue arises, again, of who provides the service and of what it consists. "The 'Related Services' section of P.L. 94-142 is valuable in specifying the duties of counselors per se, and defines counseling services as those provided by qualified social workers, psychologists,

guidance counselors, or other qualified personnel . . . Specifically mentioned is 'parent counseling and training' which means assisting parents in understanding the special needs of their children and providing them with information about child development" (Hosie, 1979, p. 271).

One study of special education teachers' perceptions of the role of counselors regarding handicapped children in public schools indicated that parent consultations are second in importance only to individual counseling (Kameen and Huber, 1979). Counseling literature indicates, of course, that counselors should provide parent counseling (Prescott and Iselin, 1978; Kameen and McIntosh, 1979). Humes stated that counselors should be involved in the delivery of parent counseling services (Humes, 1978; Hohenshil and Humes, 1979). It is possible, indeed probable, that other authors use the term 'counselor' in the generic sense.

It is suggested that the distinction between the roles of counselor and teacher will diminish and counseling of parents will become more of an integral part of the total program (McDowell, 1976). Shapero and Forbes (1981) observed that teachers were being trained to work with parents by providing information and counseling. Some suggestions to help teachers conduct parent conferences were developed based on review of professional counseling

literature (Price and March, 1985). Again, there is the complaint that the language of the regulations is not clear on the issue (Hosie, 1979).

Sumlin (1978), as cited earlier in this chapter, had recommended a parent serve as co-leader in parent counseling sessions to serve as a model and to reduce skepticism. There was in this study no mention of required formal educational qualifications of the parent co-leader.

Training of Parent Counselors

"It is felt that many people involved in 'counseling' do not prepare themselves adequately, consider their techniques sufficient, or plan their sessions carefully. It appears that many personnel attempt to counsel without a clear conception of (1) what the problem is, (2) what the person's understanding of the situation is, (3) how can the counselor communicate most clearly with the parents, and (4) what do the parents want/need/expect from the session?" (Connolly, 1978, p. 116). Connolly was referring to counseling parents of school-aged children, not specifically parents of handicapped children, but his admonition would apply equally to parents of regular and special education students.

There is unanimous agreement in the literature that

parent counselors be skilled. Some have concluded that each population with special needs requires counselors who are highly trained to work with that special needs group, and they must have the temperament to do so (Flugman, Goldman and Katz, 1979). This conclusion could be extended to include parents of the handicapped, a special needs population.

There is more similarity than difference between the sort of counselor parents need and the sort of counselor any client would need. Parents of handicapped children usually seek acceptance from a counselor with whom they can comfortably share their self-doubts and their concerns about their child; a counselor who is skilled, sensitive and honest with them in the counseling process (Burggraf, 1979). Subtle communication and counseling skills, and keen psychological awareness are requirements of counselors of parents of learning disabled children (Gold and Richmond, 1979).

The counselor's previous training may not be sufficient to counsel the handicapped and their parents (Hosie, 1979). "Most counselor education programs have not required sufficient coursework in the area of handicapping conditions. To assume that developmental counseling skills can be applied easily to handicapped populations glosses over serious questions about professional competence and

responsibility. Counselors need to acquire additional knowledge about handicapping conditions and their implications for multifactored assessment, specialized information services, consultation skills, and individual and group counseling techniques" (Hohenshil and Humes, 1979, p. 224).

Publishers have produced materials to assist professionals in their work with parents, and counselors can supplement their counselor-led parent counseling sessions with parent education materials which have been evaluated and have been judged to be appropriate, with modification, for their parent counselees (Burggraf, 1979).

Two methods to teach special education professionals to develop empathetic behaviors toward parents were the subject of a study by Rogers (1979): 1) the traditional approach of reading about and discussing problems of parents of handicapped children, and 2) a workshop format using methods common to counselor training programs -- roleplaying and videotaping. The results indicated the second model was the more successful.

Once skilled in the area of parent counseling, counselors can become trainers of others who will be working with parents of handicapped students. "Many resource researchers lack consulting skills. Counselors might, therefore, serve as teacher trainers by providing these persons with counseling and consulting skills for their

work with handicapped students on a daily basis. Resource teachers might also be taught group consulting skills so that they can conduct parent or teacher discussion groups on understanding and dealing with different handicapping conditions" (Kameen and McIntosh, 1979, p. 243).

Parent Counseling and P.L. 94-142

A review of the literature reveals there are parent counseling programs operating under P.L. 94-142, but few, if any, systematically serve all parents of all handicapped students in a school division. McDowell (1976) regretted that in most programs contact with parents consisted of limited reports of the child's situation or progress. McDowell felt this focus on the child is very important but should not be in isolation. The needs that the parents have are important and there should be ongoing parent and program interaction. McDowell recited excuses for not maintaining parent counseling programs: limited funds, inadequately trained professionals, too little time, parental attendance problems. Some excuses are valid, but the commitment to serve handicapped children extends to the responsibility to serve the needs of parents (McDowell, 1976).

McDowell (1976) was optimistic about the effects of

P.L. 94-142 since the parent would no longer be an outsider but would now be actively involved in the counseling process. Five years later, a different opinion was expressed. Carlson (1981), in her paper concerning the integration of handicapped children in the least restrictive environment, asserted that parental and legislative expectations of the potential of P.L. 94-142 were unrealistic and excessively optimistic since the reality is distant from what some had hoped it would be.

The American Personnel and Guidance Association (1982), now the American Association of Counseling and Development, expressed a similar concern that parent counseling had not yet been emphasized enough or fully implemented during the first five years of the law and that without parent counseling in the definition, where parent counseling is now being implemented, it might cease to exist altogether.

There have been some recommendations that parent counseling be written in the student's I.E.P. Kameen and McIntosh (1979) said a "realistic limit of the school counselor's role would be the assessment of I.E.P.s in the affective domain . . . These could include administering such instruments as self-concept measures, interest inventories, and sociograms; observing the handicapped student in the school environment; and conducting systematic

consultations with the teachers, parents and peers of handicapped students, as well as the students themselves" (Kameen and McIntosh, 1979, p. 243).

In 1979, a study of physicians -- general, family and pediatricians -- indicated that one-third of those studied were unfamiliar with P.L. 94-142 (McDonald, Carlson, Palmer and Slay, 1979). Therefore, it is possible that the school may be among the first to provide information, training and counseling for parents of handicapped children. No investigation of local school divisions' systemwide counseling services for parents of handicapped students and personal satisfaction was found in the literature.

Summary

The purpose of this review of the literature was to study the implementation of parent counseling for parents of handicapped children to determine if parent counseling is implemented systemwide or a regular basis. Ten areas of importance to the counseling of parents were identified.

Conclusions may be drawn from the literature review. Much is known about the evolution of parental involvement in the education of their handicapped children. Parent counseling is considered to be, at the very least, helpful (Burggraf, 1979; Buscaglia, 1972, 1975; Cable, 1977;

Christopher, 1983; Gold and Richmond, 1979; Jenkins, 1981; McDowell, 1976).

The regulations of P.L. 94-142 and of the Commonwealth of Virginia, as well as the literature contain discussion of the qualifications and training of parent counselors (Department of Health, Education, and Welfare, 1977; Flugman, Goldman and katz, 1979; Gold and Richmond, 1979; Hohenshil and Humes, 1979; Shapero and Forbes, 1981). The literature contains, also, descriptions of some counseling models which can be used in the counseling of parents of handicapped students. The literature also contains studies of the effectiveness of certain parent counseling models (Brolin and Gysbers, 1979; Kroth and Kroth, 1976; Shapero and Forbes, 1981; Texas Education Agency, 1978).

Studies can be found in the literature of counseling for parents of children of specific ages and with specific handicapping conditions (Edgerly, 1975; Feuquay, 1979; Smithells, 1983; Sumlin, 1978; Tavormina, 1975). A review of the literature resulted in no reports of local school divisions' systematically providing counseling for parents of all handicapped students in the school division.

In order for P.L. 94-142 to succeed, rather than fail, attention must be paid to the attitudes of those affected (Sproles, Panther, and Lanier, 1978). The literature was reviewed in vain to determine the perceptions and opinions

of two of the parties affected by the parent counseling process: school divisions and parents.

The paucity of literature on the provision of parent counseling in local school divisions and on the perceptions of the affected parties led to this study. The methodology utilized to determine how parent counseling is being offered in Virginia is described in Chapter III.

CHAPTER III

METHODOLOGY

The purpose of the research was to obtain specific baseline data about the counseling of parents of handicapped students who receive special education services. Parent counseling is a service identified in the regulations (Department of Health, Education, and Welfare, 1977) (Commonwealth of Virginia, Department of Education, 1984).

Chapter III includes discussion of the methodology used to obtain the baseline data on the counseling of parents of handicapped children referred to in the regulations. Selection of type of instrumentation and development of the instrument, selection of the sample, data collection procedures, and the statistical analysis plan are first described. The chapter concludes with an explanation of the addition of a second step in the data collection process, the rationale for it, and the subsequent addition of a third step, revalidation of the researcher's definition of parent counseling and the data.

Instrumentation

Survey research was selected as the most appropriate

method of gathering the data sought in this study following review of data collection methods (Kerlinger, 1973). Two survey instruments were designed, one for school division superintendents, or their designees, and one for parents of handicapped students. Each instrument contained items which sought 1) descriptive, 2) perception, 3) opinion, and 4) satisfaction responses concerning counseling of parents of handicapped students during school year 1982-83 (Appendices B and C).

Questionnaire items were developed and designed after a content analysis of the literature. Each item of both questionnaires was thoroughly reviewed by educators who are knowledgeable about survey design, administration of counseling services, the handicapped, their parents, special education and counseling. After item analysis, the questionnaire and study were discussed with public and private sector professionals who work with handicapped students and with parents of handicapped children, not included in the sample, to determine if the information sought would answer the questions:

1. How is parent counseling defined by local school divisions and parents?
2. Do local school divisions and parents perceive a difference between parent counseling and parent conferences?

3. To whom is parent counseling provided? (Is it influenced by age and/or handicapping condition of the child?)
4. How is counseling provided to parents of handicapped students in Virginia school divisions?

The items which were identical on both superintendents' and parents' questionnaires concerned: classroom placement of students, the purpose of parent counseling in the school division, who counseled the parents, whether parent counseling was identified on the student's I.E.P., how the parents learned of the availability of parent counseling, who initiated parent counseling, where and when parent counseling was provided, whether counseling was individual or group in format, and whether counseling for parents could best be described as informational, training or adjustment. Identical opinion questions were posed on each questionnaire and included: whether respondents viewed counseling and conference differently, what they felt counseling of parents should include, satisfaction with existing counseling, and if they agreed with the concept of parent counseling as defined in the regulations of P.L. 94-142.

The purpose was to obtain baseline data about parent counseling through survey instruments designed for selected school division superintendents and parents of handicapped

students in those school divisions. Results were to be reported descriptively. The statistical analysis plan was to use frequencies and percentages and to report descriptively the resulting data including identifying factors which might influence the provision of parent counseling. Because the return of the survey instruments appeared low, an additional level of research and later revalidations were added to this study.

Survey Research Sample

The study was limited to the Commonwealth of Virginia. The 135 school divisions in Virginia were ranked by size of special education population on December 1, 1982, in the "Report of Handicapped Children Counted in Local Education Agencies" (Commonwealth of Virginia, Department of Education, Division of Special Education, Administration and Finance, 1982). For this research, the population was local school divisions, represented by school division superintendents, and parents of handicapped children receiving special education services from those school divisions.

Systematic random sampling procedures were used to select 30 school divisions from the 135 which had been ranked by size of special education population from

smallest to largest. Each of the 30 school division superintendents received one questionnaire. The number of parent questionnaires distributed to each of those 30 school divisions related to the size of the special education populations. The smallest 12 school divisions (1-12) receive eight parent survey instruments; seven school divisions in the middle size range (13-19) were sent 12 parent questionnaires, and the 11 largest school divisions (20-30) were given 16 parent survey instruments.

Due to confidentiality, parents of handicapped students could not be contacted directly. Half of the parents of handicapped students selected to receive parent questionnaires were chosen by the superintendents; the other half were chosen by the chairpersons of the local Special Education Advisory Committee (S.E.A.C.) in the same 30 school divisions. Distribution of the parent questionnaires through these systems-in-place was selected as the most bias-free method. The total number of parents in the same was 356.

Survey Data Collection Procedures

In July, 1983, the questionnaires were sent in 60 packets to 30 school divisions. Thirty (30) were addressed to division superintendents, 30 to the chairperson of the

S.E.A.C. in care of the superintendent or administrator, supervisor, of the special education program in each school division. The superintendents' packets contained a cover letter describing the purpose and importance of the research and assurance of confidentiality, one questionnaire for the superintendent and four, six, or eight parent questionnaires. The packet for the chairperson of the S.E.A.C. contained a cover letter attached to each of four, six, or eight parent questionnaires. The cover letter described the purpose and importance of the research and assurance of confidentiality.

A self-addressed, stamped envelope was attached to each questionnaire to facilitate response to the researcher. All 60 packets were sent by certified mail with receipt requested for documentation.

In August, 1983, identical status reports were sent (Appendix D) to each of the 30 school division superintendents and 30 local S.E.A.C. chairpersons. The list of chairpersons of the S.E.A.C.s, as appointed by the local school boards, had been published, so each chairperson this time was addressed directly by name and address.

Two weeks after the status report was sent, the offices of all non-responding superintendents and S.E.A.C. chairpersons were telephoned and letters were subsequently sent to all who had not yet responded to the questionnaire

(Appendix E). They were informed again of the purpose of the study and the questionnaire, were asked about the likelihood of a forthcoming response, and were offered a second set of questionnaires if needed. Two school divisions declined to participate in the research, and two new school divisions, adjacent in rank of size of special education population were selected to replace them.

Statistical Analysis

This baseline study of the counseling of parents of handicapped students receiving special education services in Virginia's public schools used a sample of 30 of the school divisions. The statistical approach selected was frequency tabulation. Responding school divisions, ranked by size of special education population, were identified as small or large, and the data then were analyzed. From these frequencies, baseline data would be obtained which would answer the research questions.

Descriptive Interview Procedures

Descriptive interviews were added to the original survey research project after the return of the questionnaires because of the importance of obtaining additional

baseline data. School divisions, which had indicated parent counseling was provided as an integral part of the regular school program for handicapped students receiving special education services, were selected for the interviews.

Procedures were developed for obtaining interview data about how these school divisions offer counseling to parents of handicapped students. The office of the school division superintendent of each of the identified school divisions was telephoned, thanked for participating in the research, and requested to continue participating in the research by offering the researcher the opportunity to go to the school division to interview the people most involved with the parent counseling: the administrator, the parent counselor(s), and parents who had been counseled.

Five interviews were scheduled and were held in 1984 and 1985. Data obtained from the interviews are reported descriptively, in narrative form, in Chapter V.

Revalidation Procedures

Procedures were designed for the purpose of updating and revalidating the data from both the surveys and interviews, and revalidating the definition of parent counseling used in this research. Two options were proposed. In

order of preference, they were:

- a) a follow-up by the Virginia Department of Education; and,
- b) an expert panel reaction from the U.S. Department of Education, Office of Special Education and Rehabilitative Services.

Chapter V discusses implementation of the second option.

Summary

The study of implementation of counseling for parents of handicapped students in selected school divisions in Virginia initially involved survey research. The combination of the low return of questionnaires, and the importance of obtaining baseline information about parent counseling, resulted in descriptive interviews, and subsequently, revalidation was added to the data collection procedures. Table 1 displays the data collection and activities timeframe.

Chapter IV discusses results of the survey research. Chapter V discusses results of the interviews and of the revalidation by the Federal government panel of experts.

TABLE 1

Data Collection Timeframe and Activities

<u>Activities</u>	1983		1984			1985			
	<u>Season</u>								
	<u>Su</u>	<u>F</u>	<u>W</u>	<u>Sp</u>	<u>F</u>	<u>W</u>	<u>Sp</u>	<u>Su</u>	<u>F</u>
<u>Survey</u>	x								
<u>Status report</u>	x								
<u>Calls/letters</u>		x							
<u>Colleague calls</u>		x	x						
<u>Interview planning</u>				x					
<u>Interviews</u>					x	x			x
<u>Consultations</u>									
<u>VA Dept. of Ed.</u>									x
<u>U.S. Dept. of Ed.</u>								x	x
<u>Revalidation</u>									
<u>U.S. Dept. of Ed.</u>									x

NOTE: Summer (Su), Fall (F), Winter (W), Spring (Sp).

CHAPTER IV

SURVEY RESULTS

This chapter consists of a summary of the results of research which sought baseline data about the counseling of parents of handicapped students in selected school divisions in Virginia. The two survey instruments, one designed for local school division superintendents and the other designed for parents of handicapped students, were described in Chapter III and may be found in Appendices B and C.

Summary of Questionnaire Returns

Thirty (30) local school divisions were selected by systematic random sample from the 135 Virginia school divisions which had been ranked by size of special education population. Each of the 30 school division superintendents received a packet containing one superintendent questionnaire and four, six, or eight parent questionnaires. The number of parent questionnaires was dependent upon the size of the special education population in each of the identified school divisions. The packet for the chairperson of the local S.E.A.C. was sent by certified

mail and was received by the chairperson through the superintendent or the supervisor of the special education program in that school division. The packets for the S.E.A.C. chairpersons also contained four, six, or eight parent questionnaires.

The sample of superintendents was 30. The sample of parents of handicapped students in special education in those same 30 school divisions was 356 (178 to be selected by superintendents, or their designees, and 178 to be selected by the chairperson of the local S.E.A.C.). Immediate response resulted in the return of one-third of the superintendents' questionnaires within three weeks. From the first, the percentage of returns of superintendents' questionnaires was higher than the percentage of parent questionnaires returned.

The follow-up status report (Appendix D) and request for return of the questionnaires outstanding (Appendix E) resulted in telephone calls from three school divisions whose S.E.A.C. chairpersons indicated they had not received the original packet of parent questionnaires and one who reported the superintendent had distributed both the superintendent's and S.E.A.C. chairperson's parent questionnaires. Two superintendents' offices called to request replacement packets, and one superintendent's office called to ask if they could assist the S.E.A.C. chairperson in

selecting parents since the S.E.A.C. chairperson, reportedly, knew no parents of handicapped students.

Thirteen (13) of the 30 superintendents (43%) responded to the questionnaires. Despite the efforts described in Chapter III, the remaining 17 superintendents did not respond. All of the returned superintendent questionnaires were usable, at least in part.

The percentage of responses from parents of handicapped students was smaller than the percentage of superintendent responses. Forty (40) of the 178 (22%) parent questionnaires intended for superintendent distribution were returned. Forty-five (45) of the 178 (25%) parent questionnaires for S.E.A.C. chairperson distribution were completed and returned. An additional 17 parent questionnaires were not usable. Four of the respondents indicated they were not parents of handicapped students who received special education services, did not complete any additional items, and returned the questionnaire as requested. In addition, all of the questionnaires from one school division were invalid due to the school division and S.E.A.C. chairperson photocopying and jointly distributing both sets of parent questionnaires. One questionnaire was returned blank.

Table 2 displays the count of questionnaires from those school divisions whose superintendent's questionnaire

was completed and returned and the count of parent questionnaires returned from those same school divisions. The school division numbers in the table correspond with the ranking by size of special education population of the 30 in the sample. Responses in Table 2 are reported by frequencies.

TABLE 2

Count of Questionnaires Returned by Superintendents and
Questionnaires Returned by Parents in the Same School
Divisions

School Division Number	Special Education Population	Count of Parent Responses Selected by	
		Superintendent	SEAC Chairperson
1	66	1 of possible 4	each 0
2	66	1	3
8	178	2	2
10	204	2	4
12	239	3	3
13	271	3 of possible 6	each 1
22	681	3 of possible 8	each 0
23	734	3	3
24	835	7	8
25	1,013	6	4
26	1,035	6	6
28	1,581	0	3
<u>29</u>	<u>3,493</u>	<u>3</u>	<u>8</u>
<u>13</u>		<u>40</u>	<u>45</u>

NOTE: School division number is assigned to the 30 school divisions in the study according to size of special education population.

Superintendent Responses

Thirteen (43%) of the superintendent questionnaires were returned: six from small and seven from large school divisions. Small is defined as those school divisions in which 500 or fewer handicapped students receive special education services, and large is defined as school divisions in which 501 or more students are identified as handicapped and received special education services.

Responses to each of the items of the superintendent's questionnaire were tabulated (Appendix B). The purpose of the survey instrument was to obtain baseline data about the implementation of counseling for parents of handicapped students by selected school divisions in Virginia. Questions were designed to elicit responses which would provide the desired information. All questions concerned school year 1982-83 and the respondent's local school division. Appendix F reports responses by frequencies and percentages.

Summary of Superintendent Responses

The 13 school divisions which responded to the superintendent questionnaire represented an almost equal number of small (6) and large (7) school divisions. There were

not 13 responses to each item; some responses were invalid, while others were not answered. The superintendent's questionnaire had three parts: 1) information about the school division, 2) information about parent counseling in the school division, 3) opinions.

Part I: Information about the school division.

One school division reported 500 or fewer identified handicapped students while it had more than 6500 according to its report to the state (Commonwealth of Virginia, Department of Education, Division of Special Education, Administration and Finance, 1982). Seven of the 13 local school divisions (54%) reported parent counseling was an integral part of the regular school program for handicapped children. Size did not affect the response.

Parents of fewer than 150 students participated in parent counseling in 83% of the school divisions. Eighty (80%) percent of the small (S) school divisions reported asking parents of preschool and elementary school handicapped students to participate in parent counseling, and 60% reported asking parents of intermediate, high school and homebound/hospitalized handicapped students. One hundred (100%) percent of the large (L) school divisions reported asking parents of preschool students and 86% reported asking parents of elementary, intermediate and high school students to participate in counseling.

A higher percentage of the smaller school divisions than large reported counseling parents of self-contained, resource room/learning center, and homebound/hospitalized students. The parent counselor in all reporting school divisions had other responsibilities.

Part II: Information about parent counseling in the school division.

Most (83% S - 100% L) of the school divisions reporting parent counseling in their school division sought: to provide information about the educational progress of their handicapped child, to assist parents in understanding the special needs of their handicapped child, and to provide information about child development. The school psychologist had primary responsibility for parent counseling according to 75% of the superintendents from small school divisions who responded to the question. Only two large school divisions responded to this item: the school psychologist in one and the school counselor in the other were reported to have primary responsibility for parent counseling.

Parent counseling was not systematically identified on I.E.P.s in 67% of the small and 71% of the large school divisions, superintendents reported. Parents were reported to have been notified of the availability of parent counseling (in descending order of incidence) by face-to-face

invitations, telephone, and written notice. According to 100% of the responding superintendents from small school divisions, the school system initiated the parent counseling. Half of the large school division superintendents reported the school system initiated parent counseling and the other half responded that both parents and school division initiated it.

Most superintendents (67% S, 71% L) reported no regular schedule of parent counseling. The open-ended question regarding the average number of times per month a parent was counseled resulted in a different response from each superintendent with most (75% S, 86% L) reporting an average of one or more times per month.

Individual counseling was reported by most superintendents (60% S, 60% L). A majority of superintendents (80% S, 67% L) reported staff and parents chose parent counseling topics. According to 50% S and 71% L, no written materials were used in the counseling of parents. Written materials were reported to be a part of parent counseling in half of the small school divisions. Most superintendents (67% S, 71% L) described the counseling in their school division as information, training, and adjustment.

Part III: Opinions.

For the most part, superintendents (67% S, 57% L) believed there is a difference between a parent conference

and parent counseling. Superintendents from small school divisions were evenly divided between information, training, and adjustment as the primary content of parent counseling. Of the large school divisions, half of the superintendents believed parent counseling should consist primarily of training, and 33% felt adjustment counseling should be primary.

Dissatisfaction with the parent counseling in their school divisions was expressed by 83% of the superintendents from large school divisions. Satisfaction was reported by 60% of the superintendents from small school divisions. Most superintendents (60% S, 67% L) reported that parent counseling helped some of the parents.

On a multiple response item concerning the selection of content of parent counseling, superintendents in the great majority of school divisions (100% S, 71% L) reported that school staff chose the content of parent counseling. Parents chose the content of parent counseling according to 100% of the superintendents from large school divisions. Most superintendents (67% S, 71% L) reported both staff and parents chose the content of parent counseling. Most superintendents (83% S, 86% L) believed in the concept of parent counseling as it is defined in the regulations of P.L. 94-142 and of the Commonwealth of Virginia.

Parent Responses

Though the return of parent surveys appeared small, the information obtained was important in establishing baseline data about the counseling of parents of handicapped students. Results were tabulated (Appendix C) and reported in frequencies and percentages by small and large school divisions (Appendices G and H).

Summary of Superintendent-selected Parent Responses

(Su-par)

The questionnaire for parents also had three parts: 1) information about the handicapped child and the child's placement in school, 2) information from the parent about parent counseling in the school divisions, 3) opinions.

Part I: Information about handicapped child and child's placement in school.

There were 39 responses, 12 from parents in small (S) school divisions and 27 from parents in large (L) school divisions. All but one had a handicapped child in public school. The parents represented children with nine handicapping conditions, the greatest number of whom were learning disabled, or multi-handicapped, and in elementary school. Half of the students in small school divisions

were in resource rooms; 40% of those from large school divisions were in self-contained classes.

Part II: Parent counseling in school division, information from parents.

Parents in small school divisions were equally divided in their responses indicating that parent counseling sought to provide information about the child's educational progress (24%) and an understanding of the child's special needs (24%). Thirty-eight (38%) percent of the parents in large school divisions reported parent counseling sought to provide information about the child's educational progress; 29% reported parent counseling sought to provide information about child development. Forty-two (42%) percent of the parents in small school divisions responded 'other' or that they did not know what parent counseling sought to do.

When asked who had primary responsibility for counseling parents of handicapped children, 44% of the parents from small school divisions did not know; 22% reported that the social worker had primary responsibility. Half of the parents from large school divisions reported that the teacher had primary responsibility; 23% did not know who did.

When asked if parent counseling was on their child's I.E.P., 44% S and 26% L did not know. It was not the I.E.P. according to 33% S and 41% L. Others (25% S, 33% L)

reported parent counseling was on their child's I.E.P.

Most parents from large school divisions (55% L) and 46% of the parents from small school divisions responded that they had not learned of the availability of parent counseling. Comments from parents in large school divisions indicated parents had: learned about parent counseling by going to school and asking for help, had learned from a neighbor, or had been informed by their child's teacher after the program for parents was in progress.

Both school and parents initiated parent counseling, according to 38% S and 48% L. Half of the parents from small school divisions indicated parent counseling was held in public buildings; 30% did not know. Most of the parents from large school divisions (57%) did not know where parent counseling was held; 33% reported it was held in public buildings.

Parents in small school divisions were equally divided on the question of the average number of times per month a parent would be counseled: not applicable, one or more, or less than one time per month. Forty-four (44%) percent of the parents in large school divisions responded that the question was not applicable; 39% reported parent counseling was held on an average of one or more times per month.

When asked how parent counseling was offered, 40% S and 48% L did not know. Of those who did know, 30% S, 44%

L reported individual counseling.

Ninety (90%) percent of the parents from small school divisions and 82% from large did not participate in choosing topics of parent counseling. Counseling received was reported to consist of training by 46% S and 50% L. Others reported the question was not applicable (46% S, 37% L). More parents were counseled by teachers (50% S, 37% L) than by other professionals while some parents did not know who counseled parents (17% S, 32% L). Additional responses included those from: a parent from a small school division who commented that no services were rendered, one parent from a large school division who reported being counseled by the supervisor of special education, and another who reported not knowing that counseling was available.

Parents who did not participate in counseling gave their reasons: not available or did not know it was available (100% S, 75% L). One parent from a large school division commented that the teacher was the only counselor.

Part III: Opinions.

Most parents (55% S, 71% L) perceived a difference between a parent conference and parent counseling and many elaborated on the difference. Parents from small school divisions commented that a parent conference is to advise a parent of child's progress while counseling is a help session for parents to help the child and the parents to

adjust. Comments from parents from large school divisions including statements that a conference is child and school related and counseling should be family related, that parent counseling deals with parent and child feelings and emotions, coping and understanding, helping parents better understand and deal with the child's and parent's problems, learning how to communicate with and understand the child, and letting parents know resources available to their child.

Parents in small school divisions were evenly divided (38% each) between training and adjustment as the preferred counseling. The majority of parents (52%) from large school divisions reported parent counseling should consist primarily of information.

Of those who received parent counseling, more reported satisfaction with counseling (40% S, 36% L) than dissatisfaction (30% S, 28% L). Parents from small school divisions commented that no counseling was offered or that there was not enough counseling. Parents from large school divisions commented that there was a conference but no counseling, that they would like to see group counseling and parent support groups formed, that there were too many people present and that counseling needed to be more thorough.

Most parents (78% S, 58% L) had not been asked what

parent counseling would be helpful to them. Half of the parents from small school divisions and 44% from large did not know of any parent counseling program. Others (34% S, 38% L) found the parent counseling they received to range from "quite" to "very" helpful. A majority of respondents from small school divisions (55%) and (44%) from large did not know if they believed in the concept of parent counseling as it is defined in P.L. 94-142. Forty-six (46%) percent of the parents from small school divisions and most parents from large school divisions (52%) believed in the concept.

Summary of S.E.A.C. Chairperson-selected Parent Responses

(S.E.A.C.-par)

Part I: Information about handicapped child and child's placement in school.

Forty-five (45) parents responded to the survey, six more than were returned by superintendent-chosen parents. However, not all were parents of handicapped children: 94% from small school divisions and 89% from large reported having handicapped children who received special education services. All from small school divisions reported having students in public schools and 96% respondents from large school divisions had students in public school. The

remaining 4% received public and private school services.

Seven handicapping conditions were represented by the responding parents. Most (64% S, 57% L) had children with learning disabilities who were in elementary school (63% S, 65% L) and who were in self-contained classes (69% S, 57% L).

Part II: Parent counseling in school division, information from parents.

When asked a multiple choice question about what parent counseling sought to do in their school division, 30% S and 43% L responded it sought to provide information about the child's educational progress. According to 30% S and 20% L, it sought to provide an understanding of the child's special needs. Parents from small school divisions commented that there was no counseling, that teachers were all. Parents in large school divisions commented that books and pamphlets were sent home, that there was no parent counseling, and that the child's teacher provided information.

Most parents (57% S, 67% L) reported that the teacher had primary responsibility for counseling parents of handicapped students. Some parents (29% S, 28% L) reported that parent counseling was not on their child's I.E.P. while others did not know (33% S, 32% L).

A majority of parents (64% S, 67% L) did not learn of

the availability of parent counseling. When asked who initiated the parent counseling, some parents responded that the question was not applicable (39% S, 58% L). Parent and school initiated it, according to 23% of the parents from small school divisions. Parent counseling was held in schools primarily according to most parents (60%) from small school divisions, but 40% of the parents from small school divisions and most (60%) of those from large ones did not know where it was offered.

Most parents (62% S, 55% L) reported there was not a regular schedule of parent counseling. Half of the parents from large school divisions reported a parent could be counseled an average of less than one time a month; 33% did not know. Forty-three (43%) percent of the parents from small school divisions responded that the question was not applicable. Most parents from large school divisions (55%) did not know how parent counseling was offered; neither did 42% of the parents from small school divisions. Another 42% from small school divisions reported individual counseling.

A great majority of parents did not participate in choosing topics of parent counseling (86% S, 78% L). Most parents who were counseled reported no written materials were part of the counseling (55% S, 60% L). Forty-six (46%) from small school divisions reported written

materials were presented along with face-to-face counseling.

When asked to describe the counseling they received, a majority of parents responded that the question was not applicable (53% S, 76% L) or reported being counseled by a teacher (57% S, 50% L). Most parents in large school divisions (64%) did not participate in parent counseling because they did not know it was available; 43% of the parents from small school divisions agreed. Some parents checked "other" (43% S, 29% L) and many elaborated. Parents in small school divisions commented that they never had any parent counseling in their school divisions. Parents in large school divisions commented that there was no counseling in the school division.

Part III: Opinions.

Parents were asked if, in their opinion, there is a difference between a parent conference and parent counseling. Half of the parents from small school divisions believed there was a difference while a majority (75%) of the parents from small school divisions agreed. Many commented. Parents from small school divisions commented that they did not know because they had never been in a parent counseling session, that a conference deals with your child while counseling is to help parents get understanding and help, that counseling would help parents with

their children. Parents from large school divisions commented that a conference is geared to the child's academic progress while counseling deals with relationships and problems, and that a parent conference deals more with the teacher getting along with the child while parent counseling deals more with the parent's problems with the child. They noted that in counseling a family is helped to deal with situations while a conference discusses the child's needs and that a conference tells what the school has done while counseling tells the parents what they can do to help. Comments also noted that counseling should involve the parent as a tool in the child's development; that a conference concerns progress in school while counseling concerns the child's relationships with parents, peers, attitudes about self; that teacher conferences are no different in regular education; and that there should be a difference between a conference and counseling but that currently there is no difference.

Most parents in small school divisions (54%) felt parent counseling should consist primarily of information. Most parents in large school divisions felt it should consist primarily of training (57%).

Asked if they were satisfied with the parent counseling they received, 45% S and 48% L responded they did not participate in parent counseling. Some did participate

in parent counseling and were satisfied (33% S, 26% L). An equal number from large school divisions (26%) were dissatisfied. Parents in small school divisions commented that they did not know the school division was supposed to have parent counseling and that they never heard of parent counseling in their school division. Parents from large school divisions commented that parent counseling needed to be on a regularly scheduled basis but that it did not exist in their school division.

The majority of parents were not asked what counseling would be helpful to them (88% S, 83% L). Parents were asked to rate the helpfulness of parent counseling to them. Most parents did not know of any parent counseling (53% S, 59% L). Some parents found parent counseling quite helpful (20% S, 14% L). A parent from a large school division commented that parent counseling needed to be scheduled, organized and used to help the child through his parents. Most parents from small school divisions (63%) and (46%) from large believed in the concept of parent counseling as defined in P.L. 94-142; 46% from large school divisions did not know.

Summary of Selected Paired Responses
by Small and Large School Divisions

While more parents in large school divisions believed parent counseling sought to provide information about the child's educational progress, superintendents and parents responded equally that parent counseling sought to provide an understanding of the child's special needs and information about child development (Appendix I).

Asked who had primary responsibility for parent counseling, most (75%) of the superintendents from small school divisions responded it was the school psychologist; the remaining 25% reported it was the teacher. Parents chosen by the superintendents in small school divisions did not agree: 44% did not know who had primary responsibility for parent counseling and 22% thought that the social worker had the responsibility. Most S.E.A.C. chairperson-selected parents (57%) in small school divisions reported it was the teacher while 29% did not know.

There was disagreement in large school divisions where half of the superintendents reported that the school counselor had primary responsibility for parent counseling and half reported the school psychologist had the responsibility. Most parents chosen by superintendents (57%) responded the teacher and 23% did not know. A majority of

the S.E.A.C. chairperson-selected parents (67%) in large school divisions reported the teacher had primary responsibility for parent counseling and 28% did not know. There was agreement in the response of most superintendents and parents that parent counseling was not on the child's I.E.P. Sixty-seven (67%) percent of the superintendents from small school divisions reported it was not; 42% of the parents they had selected did not know; 33% reported it was not. Forty (40%) percent of the S.E.A.C. parents in small school divisions reported parent counseling was not on their child's I.E.P. and 33% did not know. Seventy-one (71%) percent of the superintendents from large school divisions reported parent counseling was not on the I.E.P.; 41% of the superintendent-selected parents and 52% of the S.E.A.C. parents agreed. Others did not know (26% Su-pars, 32% S.E.A.C. pars).

Superintendents in small school divisions reported parents were notified of the availability of parent counseling by telephone (36%), written invitations (29%) and face-to-face notices to parents of the availability of parent counseling. However, most (55%) of their selected parents did not learn of any parent counseling. A majority of S.E.A.C. parents (67%) had not learned of any parent counseling.

All superintendents in the small school divisions

reported that the school division initiated parent counseling. Thirty-eight (38%) percent of the superintendent-selected parents reported that school and parents initiated the counseling and 25% responded that the question was not applicable. Of the S.E.A.C. parents, 39% responded the question was not applicable and 23% reported school and parents initiated the parent counseling.

Half of the superintendents in large school divisions reported that the school division initiated the counseling and the other half reported that school and parents did. Almost half (48%) of their chosen parents agreed that school and parents initiated while 28% responded that the question was not applicable. Most S.E.A.C. parents (58%) responded the question was not applicable.

In most school divisions, there was agreement that there was no regular schedule of parent counseling. A majority of superintendents (75% S, 86% L) reported a parent of a handicapped student would receive parent counseling an average of one or more times a month. Eighty-three (83%) percent of the S.E.A.C. parents in large school divisions disagreed; 50% reported parent counseling an average of less than one time per month and 33% did not know. Superintendents' parents in small school divisions responded equally to: one or more times a month (33%), less than one time a month (33%), and not applicable (33%).

Other parents responded that the question was not applicable (39% Su-par L, 43% S.E.A.C.-par S).

Most superintendents (60% S, 60% L) reported individual counseling. Many parents they had selected did not know how parent counseling was offered (40% Su-par S, 42% Su-par L). Most S.E.A.C. parents from large school divisions (53%) and (48%) from small school divisions did not know how parent counseling was offered. Parents who did know how parent counseling was offered agreed with the superintendents (30% Su-par S, 44% Su-par L, 42% S.E.A.C.-par S, 29% S.E.A.C.-par L).

There was disagreement about who chose the topics of parent counseling. Most superintendents (80% S, 67% L) reported both school staff and parents chose parent counseling topics. Most parents responded they did not participate in choosing topics (90% Su-par S, 82% Su-par L, 86% S.E.A.C.-par S, 78% S.E.A.C.-par L).

More superintendents from small school divisions (39%) described parent counseling as information than in any other way. More from large school divisions described it as training (37%) and adjustment (37%). Parent counseling was described as training by some superintendent parents from small school divisions (46%) and an equal number (46%) responded the question was not applicable. Half of the superintendent parents from large school divisions

described parent counseling as training. Most S.E.A.C. parents (54% S, 76% L) responded the question was not applicable. Very few parents described the parent counseling as adjustment.

Superintendents and parents were agreed in perceiving a difference between a parent conference and a parent counseling session. Superintendents from small school divisions were equally divided between a preference for information, training, or adjustment parent counseling. Parents in their small school divisions disagreed with each other and with the superintendents. Thirty-eight (38%) percent of the superintendent parents preferred training and an equal number (38%) preferred adjustment; most S.E.A.C. parents (54%) preferred information.

Half of the superintendents in large school divisions preferred training. Most S.E.A.C. parents in large school divisions (53%) agreed and preferred training, but most of the superintendent parents in large school divisions (54%) preferred information.

Most superintendents from small school divisions (60%) were satisfied with the parent counseling they provided. Superintendent parents in small school divisions were more satisfied (40%) than dissatisfied (30%), but 30% reported they did not participate in parent counseling. Forty-seven (47%) percent of the S.E.A.C. parents in small school

divisions did not participate in parent counseling; 33% of those who did participate were satisfied. A majority of superintendents from large school divisions (83%) were dissatisfied, but 36% of the parents they chose disagreed and were satisfied; an equal number (36%) did not participate in parent counseling; 28% were dissatisfied. Of the S.E.A.C. parents, 48% did not participate in parent counseling; 26% were satisfied; 26% were dissatisfied.

Employees of the school division chose the content of parent counseling, according to half of the superintendents in small school divisions and most parents (77% Su-par S, 88% S.E.A.C.-par S) reported they were not asked what parent counseling would be helpful. Most superintendents (54%) from large school divisions reported parents chose the content of parent counseling. Parents disagreed. A majority (68% Su-par L, 83% S.E.A.C.-par L) reported they were not asked what parent counseling would be helpful.

Most superintendents from small school divisions (60%) reported that the parent counseling they provided helped some of the parents. The rest responded less positively that it helped a small number of parents. Half of the superintendent parents in small school divisions knew of no parent counseling program. Some of the parents selected by superintendents responded more positively than the superintendents; some reported it was moderately helpful (17%

Su-par S), some that it was quite helpful (17% Su-par S, 20% S.E.A.C.-par S).

Most superintendents in large school divisions ((67%) believed their parent counseling helped some parents. Most S.E.A.C. parents in the large school divisions (59%) and 44% of the superintendent parents there did not know of any parent counseling program. Parent counseling was described by some parents as quite helpful (20% S, 86% L).

A majority of superintendents (83% S, 86% L) believed in the concept of parent counseling as defined in P.L. 94-142. Most superintendent parents in small school divisions (55%) did not know. Most S.E.A.C. parents in small school divisions (63%) agreed with the concept as did most superintendent parents in large school divisions (52%). S.E.A.C.. parents in large school divisions were equally divided between agreeing with the concept (46%) and not knowing (46%).

The conclusion is that, based on this survey research, there is no difference between responses of parents chosen by superintendents and parents chosen by chairpersons of the Special Education Advisory Committees.

Summary of Selected Paired Responses
of Superintendents and Parents

Superintendents reported that parent counseling sought to provide information about child development (85%), to assist parents in understanding the special needs of their child (92%), and to provide information about the child's educational progress (100%). Parents were not so certain. While 36% responded parent counseling sought to provide information about the child's educational progress, 23% did not know what it sought to do or commented there was no parent counseling; 21% responded parent counseling sought to provide information about child development and to assist parents in understanding their child's special needs (Appendix J).

Most superintendents (67%) reported that the school psychologist had primary responsibility for counseling parents of handicapped students. Most parents (51%) responded that the teacher had primary responsibility; 29% did not know who did; only 10% responded that the school psychologist had primary responsibility for parent counseling.

Parent counseling was not systematically on the I.E.P.s according to 69% of the superintendents and 42% of the parents. Thirty-two (32%) percent of the parents did

not know.

Superintendents reported notifying parents of parent counseling by written notices (62%), telephone (69%), and face-to-face invitations (85%). Most parents (59%) did not learn of the availability of parent counseling.

Counseling for parents of handicapped students was initiated by the local school division according to 70% of the superintendents. Most parents (52%) responded that the question was not applicable or that they did not know.

Most superintendents (69%) and parents (51%) responded that there was no regular schedule of parent counseling. A majority of superintendents (82%) indicated one or more times per month was the average a parent of a handicapped child would receive counseling, while forty (40%) percent of the parents responded that the question was not applicable or that they did not know; 32% of the parents agreed with the superintendents.

Most superintendents (60%) reported individual counseling was offered to parents of handicapped students. Forty-seven (47%) percent of the parents did not know how it was offered.

Both parents and staff selected parent counseling topics according to 73% of the superintendents. Most parents (83%) reported they did not participate in choosing topics of counseling for parents of handicapped children.

Superintendents described parent counseling as it was provided as information (83%), training (92%), and adjustment (92%). Most parents (53%) indicated the question was not applicable; 32% described the parent counseling as training.

A majority of the superintendents (62%) and parents (66%) perceived a difference between a parent conference and a parent counseling session. Half of the superintendents had a preference for training as the primary content of parent counseling and 33% preferred adjustment counseling. Some parents (43%) felt parent counseling should consist primarily of information.

Most superintendents (64%) were not satisfied with the parent counseling as it was provided. Though 41% of the responding parents did not participate in parent counseling, 33% of the parents were satisfied with the parent counseling.

A majority of the superintendents (85%) reported the content of parent counseling was chosen by employees of the schools and parents of handicapped students. A majority of the parents (78%) indicated they were not asked what counseling would be helpful to them as parents of handicapped students.

While most superintendents (64%) felt their parent counseling program could be described as helping some

parents, most parents (51%) did not know of any parent counseling program. Some parents reported finding parent counseling helpful; 18% most helpful, 8% very helpful, and 4% extremely helpful. No superintendents had given their program such high marks.

Did superintendents and parents believe in the concept of parent counseling as it is defined in P.L. 94-142? A majority of superintendents (85%) and most parents (51%) did. Many parents (45%) did not know.

Chapter V discusses the next step of the research, the descriptive interviews with selected school divisions.

CHAPTER V

DESCRIPTIVE INTERVIEWS IN SELECTED SCHOOL DIVISIONS AND REVALIDATION: PROCEDURES AND RESULTS

Interview Procedures

The low return of the survey instruments and the importance of obtaining baseline data about the counseling of parents of handicapped students necessitated an additional step in the research. The initial plan was to interview three or four of the seven school divisions whose superintendents had responded that parent counseling was an integral part of the regular school program of handicapped students. Later, the decision was made that every effort should be made to interview all seven school divisions. These school divisions represented a size range of the 30 school divisions in the sample: numbers 8, 10, 12, 22, 23, 26, and 29.

Each of the seven school divisions was contacted by telephone, reminded of the purpose of the research, thanked for their participation in the survey, and reminded of their response that parent counseling was an integral part of the regular school program for handicapped students. The superintendent's office was telephoned in each case,

and conversations were held with the supintendnent or his assistant. Each school division was requested to continue to participate in the research by providing additional information regarding their counseling for parents of handicapped students. Confidentiality was assured, as it had been throughout the research project. An appointment was requested to visit the school division and to interview the school staff most involved in the counseling of parents of handicapped students and, if possible, parents who had received counseling. A registered letter was sent which covered the same subject and included a copy of the questionnaire which had been returned by the school division (Appendix K).

Five of the seven school divisions were interviewed. The interviews from all seven school divisions which were held in 1984 and 1985 are discussed. The descriptive interviews follow in narrative format beginning with the school division which had the smallest number of students in special education. A list of items was developed which would be covered in the interviews (Appendices L and M).

School Division Number 8

This school division is in western Virginia. The population is less than 10,000. Results of the Spring 1984

administration of the Science Research Associates (S.R.A.) testing, showed student scores generally below those of the State as a whole. More than half of the high school graduates in this division continued their education in 1983. Fewer applies to numbers with black students representing fewer than 25% of this student population.

The superintendent, when contacted by telephone during school year 1984-85, indicated willingness to aid the research by providing additional information about their parent counseling program. The director of pupil personnel services described the program of counseling parents of handicapped children as consisting in part of counseling by a psychologist with whom the school division contracts for services and in part through referrals to the mental health center. A schedule of telephone interviews was then arranged.

The director of pupil personnel services described the special education population as approximately 16% of the total population. Parent counseling had been available for at least six years. There was no regular schedule for parent counseling and the largest group counseled was a single family unit. The individual parent counseling was usually initiated by the parent, the school division, or through an eligibility committee. The rationale for the counseling, according to the director of pupil personnel

services, was often the lack of structure in the home, an unstable home situation, domestic problems or child neglect.

A multi-disciplinary team consisted of the school division, the mental health center, the health center, the courts and rehabilitation services to identify the individual needs and to prevent duplication of services. Within the school division, parent counseling was provided by the school psychologist, school counselors, the director of pupil personnel services, and the mental health center by referral. Fees at the mental health center are charged on a sliding scale basis. If the parent cannot pay and insurance is not available, the school division may pay the fees. The cost of parent counseling is found under health services in the school budget.

Parent counseling was provided on a needs basis and often defined by the eligibility committee. Parent counseling might be found on the written recommendations of the eligibility committee and would appear on the I.E.P. only if the student were in middle or high school where a school counselor could act as parent counselor.

The director of pupil personnel services perceived a distinction between a parent conference and parent counseling. With parent conference dealing with school and academics, and parent counseling on a more personal basis.

The director was satisfied with parent counseling as it was implemented in school year 1984-85 and foresaw no future changes unless needs increase. The school psychologist was under contract one week each month during which time he observed and tested students and participated in eligibility meetings. By utilizing the psychologist, the school counselors, the mental health center, and himself, the director of pupil personnel services believed current parent counseling needs are being met.

A parent of a twenty year old learning disabled student was introduced on the telephone by the director of pupil personnel services. She indicated she had received counseling from the school counselor and from the mental health center regarding the hyperactivity of her son. She felt the recommended reduction of sugar intake had helped to diminish the hyperactivity. Parent counseling she had received during school year 1984-85 centered around the school system's plan to work intensively with her son on his mathematics so that he might earn a high school diploma. In response to the question about any needs the parent now had with which the school division could help, she said there were none and she was satisfied with the counseling she had received.

School Division Number 10

This school division is in the eastern portion of Virginia. The school division had a population of fewer than 10,000. White students represented fewer than 50% of the student population with almost half of the 1983 graduates continuing their education.

The superintendent, during school year 1984-85, indicated a willingness to participate further in the research, welcomed a visit, and referred the researcher to the associate superintendent for instruction. The associate superintendent volunteered that the program of parent counseling was not as comprehensive as it had been the previous year, due to the serious illness of the school division's visiting teacher (school social worker) who had been counseling some of the parents. The associate superintendent recommended a meeting with the school division's psychologist whose program of parent counseling was on a continuing basis.

The psychologist was willing to meet and to schedule appointments with some of the parents who had received counseling, and a date was set for the site visit. The psychologist described the parent counseling program which was an outgrowth of a need he had perceived some years before to involve parents, to get them into the school to

observe, and to work in the classroom with their child.

Initially two-way mirrors were installed in the preschool handicapped classroom which allowed parents to observe their child without the child's being aware of the parents' presence. Parents were also invited into the classroom to work on specific learning or behavior tasks.

The psychologist applied for a minigrant for a parent training program for those parents he had identified as having the greatest needs. The \$600 grant was awarded in school year 1981-82 and was implemented the following year. With the minigrant, he was able to contract with a consultant to develop a training program for parents of preschool handicapped and elementary school aged autistic children. Both classes are held in the school division's elementary school. The major effort the first year was research in the area of parent training, purchase of some materials for a parent training program, and development, distribution and analysis of a needs assessment instrument completed by parents of pre-school and autistic children.

Meetings were held with parents and teachers and the needs assessment form asked parents to note by specific times throughout the day simultaneous parent and child activities. Parents were asked to note the amount of assistance the child required during the time of those activities on a scale from independent to total dependence.

The parent noted on the form if the time when the child needed help was a convenient time for the child and the parent to work on that need.

The consultant and psychologist used the concept of levels of parental involvement and needs. The needs assessment (Turnbull and Turnbull, 1982) sought information about the need for assistance in specific areas.

The return of the needs assessment indicated parents needed assistance with some of the behaviors exhibited at him by their children. Using the Mirror Model of Parental Involvement (Kroth, Ottoni and Parks, 1982), the consultant and the psychologist identified the needs of these parents at that time as Level III (few parents) - the need for skill training in management and interaction with the system and child rearing. The Mirror Model suggests such needs can be met by parent education groups, bibliotherapy and parent support groups.

Guidelines were developed for group parent training to work on specific behavior problems of children whose parents the psychologist hoped to involve in the parent program. Emphasis was placed on behaviors which appeared at home and at school.

In 1983-84, a second minigrant was applied for and \$560 was received. Because the funding was not sufficient to employ additional staff, the psychologist used it to

work with a consultant. The psychologist obtained a model of a behavior management program from a specialist in severe and profound handicaps, respite care materials, and a film entitled "How Adults Teach Children to Misbehave".

Some parents were unable to attend daytime meetings because of work. Since others could not attend evening meetings because of their handicapped children, the consultant trained members of a high school service organization in a half-day session and they provided child care at the elementary school where the evening parent training meetings were held.

Parents were invited by mail to the first meeting, the purpose of which was to organize an independent parent group, establish the parents' needs and goals and present the choice to the parents of one or two training models. Two weeks after the initial meeting, the first of nine meetings was held with parents who had completed the needs assessment. The format of each session consisted of a review, instruction, and participation followed by a refreshment time which allowed for informal interaction. When parents expressed needs, such as respite care, which could not be met by the local school division, the psychologist advised other community boards and organizations. Parents were helped to identify the least intrusive times for intervention to work with their child's behaviors and

skills. Focus was upon behaviors where quick results could be observed. Throughout the nine weeks, the curriculum allowed for flexibility so that the program could address parent needs as they arose. Four or five families attended each of the nine sessions.

The curriculum of parent training had three components: behavior modification, communication skills and teaching techniques. The ABCs concept - antecedent, behavior, consequences - was presented to the parents and plans to change behavior were introduced and practiced through skits. The method of 'time out' was discussed as one way of changing behavior. A guest speaker presented the Systematic Training for Effective Parenting (S.T.E.P.) plan at one session.

Communication skills were a part of the curriculum with various communication systems and ways to elicit a response from a child. Teaching techniques for parents to use with their children included least prompting, guidance, time delay, task analysis, chaining and generalizing.

Interview appointments were held with three of the parents who participated in the parent training program. Two parents, had sons in the class for autistic children. One was the mother of an eight year old boy who had lived for many years in a state residential facility. The school division had suggested he return home to attend the

elementary school class for autistic children when it was established. She felt the focus of the parent training program on behaviors met her needs and she saw her son's tantrums diminish noticeably when she implemented training she had received. The child care offered by the high school service organization members during the parents meetings had also been very helpful. She did not know if parent counseling were on her son's I.E.P. She felt parents may have initiated the counseling by asking about the availability of summer programs. Her son's residential program had been year-round. Asked if she perceived any distinction between a parent conference and parent counseling, she said a parent conference was like an I.E.P. meeting to discuss primarily school-related goals. Parent counseling, she believe, focused on parent and child issues. One of her concerns was that her child was not able to continue sign language training which was a part of the residential school curriculum.

The second parent was the father of an eleven year old boy who had always lived at home. He felt the group parent training meetings in the evening were helpful and the child care during the meetings was essential. He wished that sometime a parent counselor could come to his home and focus on the needs of one child at a time, and the other parent agreed. The behavior and communication and teaching

components of the parent training program had been very helpful to this second parent also. He said there had been an improvement in his son's behavior and that he and his wife had learned they could teach their son while out in the car by pointing to trees, animals, cars and other things to increase comprehension and to diminish isolation. The second parent believed the psychologist had initiated the parent counseling.

Both parents felt the parent training program ended too soon and were looking forward to the next sessions for refresher training and new learning. Neither parent thought parent counseling was on their child's I.E.P.

The parents were very much concerned about what the future held for their sons as they would always need someone to care for them, and both said they would appreciate parent counseling which would address specific immediate needs and long range issues. One parent was interested in research findings, such as the state of the art, with autistic people. It seemed to him if research can put a man on the moon, it can also learn more about his child's handicap and help him. He would like a progress report on the state of the art regarding autism.

A separate interview was held with the third parent, the mother of a child in the preschool handicapped class who attended regular kindergarten during mathematics time.

She felt the parent counseling in her school division assisted parents to help their child directly. She reported that parent counseling was not on her child's I.E.P., and that the psychologist initiated the parent counseling. She stated that parent counseling and a parent conference were similar but different in that parent counseling gives parents a few more ideas how to work with and help the child at home. She did not believe it would be helpful for a parent counselor to come to the home. All three parents felt essential characteristics of a parent counselor should include knowledge of the parents' child and needs, and that it would be helpful if the parent counselor was also the parent of a handicapped child.

The parents were looking forward to the parent counseling sessions in school year 1984-85, and hoped sessions in the future would deal more in depth with non-verbal children such as those represented by parents at meetings. All three parents indicated they had participated in choosing topics of the sessions.

The psychologist planned four-sessions of parent training for which there was no extra funding available and costs would have to come from the regular budget. The psychologist had purchased new materials to use as part of the curriculum for the same parents included in the previous year.

The school division's only psychologist met all parents and students by request on a one-to-one basis. There were school guidance counselors for grades 8-12 and an interagency agreement with the Department of Rehabilitative Services.

The psychologist defined parent counseling as a related service which expands according to parent needs. He believed parent involvement and needs are met by I.E.P. meetings for some parents while other parents need more assistance. The psychologist would like to maintain the original parent training group by having the parents organize it themselves and meet using school facilities and requesting training and workshops. If the psychologist were to maintain the original group and develop new groups to help parents of other handicapped children, there would be a need for a grant or another permanent position in the school division. The psychologist volunteered that he wished for interest in and support for parent programs at the state and Federal level.

School Division Number 12

This school division is in southern Virginia. The superintendent indicated, in school year 1984-85, a willingness to have the researcher visit. The superintendent

referred the researcher to the person responsible for special education.

The local administrators were very willing to meet and to discuss the parent counseling program, but they did not believe any parents who had received counseling could be identified because the school division had been without a school psychologist for two years and the last parent counseling program of which they were aware was in school year 1978-79. A community action program nearby worked with parents on advocacy issues, they are reported.

During school year 1984-85, an intern from a nearby state university was working in the school division in the role of school psychologist, but the administrators did not believe the intern would get involved in any parent counseling. The school division staff reported they work with parents and parent needs on an individual basis as needed. No visit was made to this school division as administrators had been interviewed by telephone and had indicated there was no longer any parent counseling program.

School Division Number 22

School division Number 22 was one of the seven whose superintendents had indicated on the survey instrument that parent counseling was provided as an integral part of the

school program of handicapped students. The superintendent's office referred the researcher to the person responsible for the special education program. There was no response after three requests.

Later, another attempt was made to interview. In school year 1985-86, a registered letter was sent to the school division superintendent and a receipt indicated it had been received by the superintendent (Appendix N). Despite the letter and repeated telephone calls, attempts to schedule an appointment were unsuccessful.

School Division Number 23

This school division is the third largest of the seven school divisions which had reported on the survey instrument that parent counseling was an integral part of the school program of handicapped students. It is located in central Virginia, has a population of fewer than 50,000. Fewer than 50% of the students in the school division are black and almost half of the 1983 high school graduates continued their education.

The director of pupil personnel services scheduled the requested meeting during school year 1984-85 which was also attended by the parent program/in-service facilitator. The school division initiated a regional preschool program with

four surrounding school divisions in 1975 or 1976 when Virginia's education for all handicapped children law was implemented. They received demonstration money at that time for the preschool program. The director of pupil personnel services estimated that 25 preschool aged handicapped children would be found in the planning district. Once class for ten children and visiting teacher services for homes of the remaining estimated 15 children were established.

There was heavy emphasis on parent training. Community leaders from family services, mental health and mental retardation services boards and the University of Virginia addressed parents at evening meetings. School staff organized the first few meetings, then parents were asked what would be helpful to them in the future.

In the region, services were offered to handicapped children ages 2-21, who are usually preschool age or low-incidence cases. There were at the time staff for eight classes, six other staff, a full-time director of the regional programs which operates under a regional board of control comprised of the five superintendents and one school board member from each of the five school divisions. As costs increased for each school division, some withdrew and provided their own program. Attention began to focus now not only on the preschool but also on severely

handicapped and severely emotionally disturbed which are low-incidence disabilities and could be served regionally with the possibility of 60% state funding.

Parent counseling emerged from the parent training program. A parent of a child in the preschool program who had Down's Syndrome saw the need for parent counseling, received permission and expense money in 1979 to begin to link parents, and developed a parent counseling program. Already trained as a counselor with a master's degree, she focused on parents of multi-handicapped children, autistic-like children with communicative disorders, and severely and profoundly retarded.

The parent counselor/trainer was now employed half time by the regional program. The parent counselor provided grief counseling, active listening training, parenting and assertiveness training, stress management and anti-burnout counseling, individual home visits, day and evening group meetings, and Saturday family sessions at the counselor's farm. Parents were notified of the parent counseling program in several ways: parents of children in the regional program were told of the availability of parent counseling, some parents of newborns were told there was parent counseling, agencies advised parents as well, and teachers in the school division advised parents of the parent counseling programs as they felt it was appropriate.

The parent counseling program format consisted of individual support, counseling and training, group sessions on topics such as "Parents Are People, Too" and issues of importance to parents in the group. Family anti-burnout meetings were held at the farm on Saturdays. Topics were developed for all parent counseling based on needs assessment instrument returns each Fall. In one of the five jurisdictions, group meetings were held once a week for one and one-half hours during the day and twice a month in the evenings. In one jurisdiction, an evening one and one-half hour meeting was held each week and in the three remaining jurisdictions monthly one and one-half hour meetings were held.

Inservice for teachers and outreach for Special Education Advisory Committees and other agencies were conducted by the parent counselor during the day as well as evenings and weekends. Handicapped and gifted children and their teachers had participated in challenging outdoor activities. In some cases, their parents came to one or more of the family get-togethers on Saturdays.

Parent meetings during the Fall of school year 1984-85 included 18 families. The parent counselor worked with a total of 50 families that Fall in the five school divisions.

A site visit was made with the parent counselor to the

offices of the regional program and then to the farm. A second site visit for the purpose of attending one of the evening parent group meetings was uneventful. No parents attended that meeting apparently because of the duplication of services that month in one of the school divisions which was considering withdrawing from regional participation. A meeting was held, instead, with the parent counselor and a social worker that evening.

School Division Number 26

School division Number 26 is in the center of Virginia and has a population of approximately 50,000. Initial attempts to interview this school division were unsuccessful in school year 1985-86. When the decision was made to interview more than four of the seven school divisions, this school division was contacted once again. A registered letter was sent to the superintendent in school year 1985-86 (Appendix K) and a response was received with two questions answered and the names of people with whom an appointment could be scheduled. The appointment was scheduled with the supervisor of special education and with one of the school psychologists.

Fewer than 10% of the students were black. Almost half of the high school graduates in 1983 continued their

education.

An interview was held with one of the five school psychologists. The school psychologist meets with every parent of children referred to special education to encourage their participation in the eligibility meeting. The psychologists and visiting teachers educate parents about the process so parents can make informed decisions. He stated that there are only 2-3 because of the concerted effort to keep in touch with parents along the way and stressed that involvement with parents is good and is life centered. For instance, psychologists and other staff notify parents of the availability of summer Federal youth employment. However, he noted that psychologists are ten month employees and cannot follow up in the summer on working students.

The psychologist stated that every mentally retarded student who is in the 11th grade, or is 16-17 years old, attends a rehabilitation center during their school days and that sometimes the Department of Rehabilitative Services begins to work with them at that point. A regional Federal transitional program has offices in the school board offices and they do some parent counseling as well as go into the homes. The school psychologist said virtually every graduate has a post-school placement, thereby keeping the parents' anxiety level low.

In the mid-seventies they received a grant for a residential program. Initially it operated for four years intensively with students and parents, but it was then moved and became both a residential and day, then a day only program. It is now located in two schools in the school division. During the interview, it was learned that the response to the survey was made when there was a school social worker and a licensed clinical psychologist working directly with parents before the elimination of the program.

The school psychologist works with individual parents of handicapped students and makes referrals to outside agencies when appropriate. The school division pays for up to four sessions with a therapist which can include diagnosis and some treatment. They would like to be able to do more counseling within the school division since the psychologist indicated he believes parents feel safer with the schools. Since parents influence the child and his behavior, the school psychologist would like to try to intervene with more parents. He said parents are the best therapists with their children and cited support for this position in the literature. The psychologists have not yet attempted inservice with other school staff, including teachers, concerning counseling parents of the handicapped.

The school psychologist indicated he had no working

definition of parent counseling. He indicated, too, that he did not have time to commit to parent counseling on a regular basis but did notify parents of the availability and encouraged them to participate. He would like to do more parent counseling, especially with parents of students in the learning disabilities program. There are counselors in elementary and secondary schools, but he did not know if they worked with parents.

An interview was then held with the curriculum supervisor for special education who indicated most parent counseling was for parents of emotionally disturbed students. There is a regional program of seven school divisions in 1985-86 where consultation services, including parent counseling, are available, and there is a licensed clinical psychologist who works with parents of emotionally disturbed students of all ages. There is money budgeted in the amount of about \$1000 for outside counseling, but it is not identified as parent counseling.

Visiting teachers have done some work with parent groups in the past, according to the curriculum supervisor, but now it is on an ad hoc basis with follow up. He defined counseling as consultation and training, with the goal of helping parents to help students do well in school. He volunteered that state Department of Education interest in parent counseling would be welcome.

School Division Number 29

This Northern Virginia school division has the largest special education population of the seven whose superintendents had indicated parent counseling was an integral part of the school program of handicapped students.

Initial attempts to interview in the school division were unsuccessful. However, when the school division was approached again, an appointment was scheduled in school year 1984-85 with several administrators.

The achievement scores are generally above the state as a whole in all tested areas. Fewer than 10% of the students are black. More than half of the graduates in 1983 continued their education.

An interview was held with the supervisor of special education who indicated there was no formal program of parent counseling. There was parent counseling in a pre-school and in an alternative high school program. Individual school staff occasionally volunteered to train parents and often chose a published guided curriculum which directed parents to identify issues. Such parent training had been jointly parent and school initiated. Teachers/counselors who were dually endorsed, and others who had been trained to use the program, provided the counseling primarily on their own time. Sometimes parents, or parent

organizations, paid for the service. The school division initiated a second published program which focused on development of positive parental attitudes and used a group dynamics approach to help parents cope.

Parent counseling was not included in the I.E.P.s but the supervisor of special education reported that counselors talked with parents about courses, careers and services. Parents learned about parent counseling, he indicated, in monthly school newsletters and school notices. He perceived a difference between counseling and a parent conference: conference concerning achievement and counseling was a series of meetings. He felt parent counseling to be vital and that a conference could turn into a counseling session. He believed parents need to learn coping skills from a friendly staff member but he did not know how far the school system should go with parent counseling.

An interview was then held with the coordinator of special education services who said all preschool teachers made home visits, counsel, and train. There was also great demand for implementation of a published parent training program which was run by pupil personnel services with school funding. She noted that the resources for parents included ongoing counseling regarding special education procedures, handicapping conditions and criteria for

placement. Referrals were made to the local Association for Children and Adults with Learning Disabilities and parent support groups such as Friedrichs Ataxia and Tourette Syndrome. Parents were alerted to studies at the National Institutes of Health, and occasionally parents were accompanied by a school staff member to doctors with their children.

The coordinator of special education services stated that two teachers of learning disabled self-contained classes had meetings for parents of their students as well as for parents of other students. There were parent groups at the school division's special education facilities and counseling included topics such as suicide, drugs, alcohol abuse, and depression. Other resources were: an adolescent ward established in a hospital with the school system cooperating with them regarding special education populations and their parents, articles placed by the school system in the local A.C.L.D newsletter, and mobility/orientation for visually impaired students and their families. In the future, there would be vocational counseling at the high school level regarding standards of I.E.P. diplomas.

The coordinator of special education services agreed with the supervisor of special education that parent counseling was not on the I.E.P. She, too, perceived a

distinction between a parent conference and parent counseling and reported that school counselors as well as principals work with parents. Parents of learning disabled students were advised regarding the rights of potential college students. Parents were counseled regarding wheel chairs, crutches, standing boards, fluctuating hearing loss, and so forth. When necessary, referrals were made to outside professionals.

An interview was held with the fiscal program coordinator who is also the parent of a elementary school aged handicapped student. He said the Federal money could be used for parent counseling but the school division chose not to use it for that purpose. One published curriculum purchased by the school division was funded with local and state money under the Mental Health and Mental Retardation Services Board. He reported the Parent Infant Education program would be supported by the school division by 1990.

The fiscal program coordinator/parent perceived a great need for counseling for parents of handicapped children regarding child abuse, death and dying, guilt imposed by professionals, and teachers who "don't know what they're saying". Counselor characteristics were described as: a parent or someone who is with children 24 hours a day, someone who understands how hard it is to get sitters, someone who has realistic goals for parents, and someone

who might come to the home at the convenience of the parents in order to help break down barriers between parents and professionals. He said parent counseling was needed when a child is in the hospital.

Summary of Interviews

Seven school divisions had indicated on the survey instruments that parent counseling was an integral part of the regular school programs for handicapped students. Interviews were held with five of these school divisions. Parent counseling was found not to be an integral part of the regular school program for handicapped students at the time of the surveys or the interviews in any of the five school divisions which were interviewed.

The superintendents' offices in each school division selected the staff persons for the interviews about parent counseling in that school division. Two of the five school divisions indicated parent counseling services had diminished since the survey was completed. All school divisions interviewed reported that parent counseling had never been a formal part of the regular educational program for handicapped students.

Revalidation Procedures

Procedures were designed for the purpose of updating and revalidating the data in the survey and interviews due to time laps. Two possible approaches were:

- a) a follow-up by the Virginia Department of Education; and
- b) an expert panel reaction from the U.S. Department of Education, Office of Special Education and Rehabilitative Services.

In June, 1985, the researcher met in Richmond, Virginia, with the director of special education of the Office of Special and Compensatory Education, Department of Education, Commonwealth of Virginia, to propose and discuss the possibility of a follow-up survey to all school division superintendents to obtain additional baseline data about the counseling of parents of handicapped students in the school divisions. The background for the survey, the data and research questions, and the proposal were presented to him. It was understood that the proposed follow-up questionnaire would have to be designed in collaboration with the Department of Education so that the questions and answers would meet the joint needs of the Commonwealth and the study. No response materialized and this option had to be discarded (Appendix N).

The alternative way to revalidate the data was through the convening of an expert Federal panel. The U.S. Department of Education, Office of Special Education and Rehabilitative Services, responded to the request, named the three experts to serve on the panel, and scheduled the meeting for November, 1985. Data were submitted to the panel of experts prior to the meeting. It was the conclusion of the panel that the definition and description of parent counseling used in the research is consistent with Federal law and that the data are both topical and useful (Appendix O).

Summary

The study of implementation of counseling for parents of handicapped students in selected school divisions in Virginia originally involved only survey research. Due to the combination of the low return of the questionnaires and the need for data about parent counseling, descriptive interviews and, subsequently, revalidation of both the definition of parent counseling and the data were added.

Survey data had been obtained in 1983. Interviews were held in 1984 and 1985.

The interviews confirmed the data obtained from the survey: that no school division provided parent counseling

as an integral part of the regular educational program for handicapped students. In fact, in two of the five school divisions interviewed, parent counseling services had diminished during the period of the study.

No consistent definition of parent counseling was found in, or between, school divisions interviewed. Most parents and school division staff perceived a difference between parent counseling and parent conferencing. Parent counseling where it existed, was influenced by age and/or handicapping condition of the child. Parent counseling was provided ad hoc, as needed, in individual cases in each of the school divisions.

Chapter VI discusses conclusions, recommendations based on the findings of this research, and a summary of the study.

CHAPTER VI

CONCLUSIONS, DISCUSSION, IMPLICATIONS AND RECOMMENDATIONS

Summary of Purpose and Procedures

More than a decade ago, The Education for All Handicapped Children Act of 1975 (P.L. 94-142) established the right of each handicapped child, ages three through twenty-one, to a free appropriate public education. This landmark law also established rights of parents of handicapped children to involvement in virtually every aspect of their child's education. One area of parental involvement which appears repeatedly in the regulations of P.L. 94-142 is parent counseling, i.e., counseling for parents of handicapped children.

Much research has been published concerning the history of P.L. 94-142, the law itself, selected entitlements of the law, their implementation and impact. There still is a paucity of studies, however, about implementation of some areas of the law -- one of which is parent counseling.

The purpose of this research was to do a baseline study of parent counseling. Both Federal and Virginia regulations define parent counseling as "parent counseling and training", "counseling and guidance", "assisting

parents in understanding the special needs of their child and providing parents with information about child development", "planning and managing a program of psychological services including psychological counseling for children and parents", group and individual counseling" (Department of Health, Education, and Welfare, 1977, pp. 42479, 42480) (Commonwealth of Virginia, Department of Education, 1984, pp. 112, 124, 126-128, 131). For this study, parent counseling was defined as it is in the regulations.

Extensive review of the literature revealed unanimous opinion that parent counseling is at the least beneficial, if not essential (Burggraf, 1979; Cable, 1977; Kameen and McIntosh, 1979; Olshansky, 1970; Roberds-Baxter, 1984). Counseling parents to help them understand their child's disability can improve the working relationship of parents and educators (Christopher, 1983). If the handicapped and their parents are not helped by more and better counseling, the failure to do so will cause everyone additional pain (Buscaglia, 1975). Need for ongoing counseling relationships is evident in the literature. Buscaglia (1975) described developmental stages through which parents progress and which they must sometimes re-experience and cope with again. The single most important need throughout their handicapped child's developmental years is "constructive professional counseling" (Norton, 1976, p. 202).

The regulations of P.L. 94-142 and the Commonwealth of Virginia identify as parent counselors: social workers, psychologists, guidance counselors, audiologists, speech pathologists, and "other qualified personnel" (Department of Health, Education, and Welfare, 1977, pp. 42479, 42480) (Commonwealth of Virginia, Department of Education, 1984, p. 114). As noted earlier, the Commonwealth of Virginia does not include a reference to speech pathologists. No single profession is assigned primary responsibility for parent counseling.

A comprehensive review of the literature revealed no clear picture of the provision of parent counseling services in local school divisions, no study of the involvement of parents of handicapped children in parent counseling throughout school divisions, no study of the perceptions of school divisions, and no study of the perceptions of parents of handicapped children concerning parent counseling and their satisfaction with it. The most basic questions about parent counseling were not answered in the literature:

1. How is parent counseling defined by local school divisions and parents?
2. Do local school divisions and parents perceive a difference between parent counseling and parent conferences?

3. To whom is parent counseling provided? (Is it influenced by age and/or handicapping condition of the child?)
4. How is counseling provided to parents of handicapped students in Virginia school divisions?

The U.S. Department of Education, Office of Special Educational Services, in response to a query, indicated, "We have very little data even with regard to what is being provided and no data with regard to quality of services" (Appendix A). Because of the lack of data concerning the implementation of parent counseling, this research was designed as a baseline study with the Commonwealth of Virginia selected as the area from which the sample would be selected.

Issues related to parent counseling were selected for investigation following a thorough study of P.L. 94-142, its regulations, the regulations of the Commonwealth of Virginia, and review of the literature. No hypotheses were set forth in this study because the purpose of the research was to obtain baseline data.

The initial plan was to obtain survey data from superintendents and parents of handicapped children in 30 of the 135 school divisions in Virginia, ranked by size and selected by systematic random sampling procedures. Half of the parents received their questionnaires from the

superintendents and half from the chairperson of the local Special Education Advisory Committee (S.E.A.C.). One additional step in the research was added: Interviews with those school divisions which indicated on the survey that they provided parent counseling as an integral part of the regular education of their handicapped students. Subsequently, a revalidation procedure was implemented: to validate both the definition of parent counseling used in the research and the data from the survey and interviews.

Conclusions

The four research questions can be answered as follows:

1. How is parent counseling defined by local school divisions and parents?

Parent counseling is defined in various ways among parents, within school divisions, between parents and school divisions, and from school division to school division.

2. Do local school divisions and parents perceive a difference between parent counseling and parent conferences?

Yes. Most parents and superintendents perceive a difference between a parent conference and parent

counseling.

3. To who is parent counseling provided? Is it influenced by age and/or handicapping condition of the child?

When parent counseling is provided, it appears to be influenced by age and/or handicapping condition of the child.

4. How is parent counseling provided to parents of handicapped students in Virginia school divisions?

Parent counseling was provided ad hoc.

In addition, major findings were:

- parent counseling was not implemented systemwide in any of the participating school divisions;
- most parents did not learn of the availability of parent counseling in their school division;
- implementation of parent counseling varies from school division to school division with no expansion and some diminishing over the period of this research;
- the extent of the involvement of parents in the counseling process appears to influence the parents' interpretation of, and satisfaction with, parent counseling;
- parents and superintendents held different opinions among and between themselves of what

parent counseling primarily consisted, and of what it should consist;

-- parents and superintendents disagreed, also, about:

-- who had primary responsibility for parent counseling;

-- whether parent counseling was available;

-- how often parent counseling was available to each parent on the average;

-- who selected topics of parent counseling; and

-- how parent counseling could be described.

Conclusions of the Panel of Experts,

Office of Special Education and Rehabilitative Services

U.S. Department of Education

The Office of Special Education and Rehabilitative Services (O.S.E.R.S.), U.S. Department of Education, was requested to convene a panel of experts for the two-fold purpose of determining if the definition of parent counseling used in this research is consistent with Federal law and if its data is useful. Prior to meeting, the panel studied the research including the need for the study, its purpose, the review of the literature, methodology and results.

The panel concluded that the definition is consistent with Federal law and that the data are useful (Appendix O). Some of the comments made by panel members during their meeting are summarized as follows:

- There is no information about parent counseling in the state plans, and no one in the Federal government is monitoring parent counseling. Any data the government receives from such research are more than it has. The government has nothing like this sample of superintendents. While the study was restricted to Virginia, the panel believed it is quite representative. This is a first step, and the Department of Education will now gather additional data.
- Information may be the first step to implementation of counseling. Once the Department of Education discovers there is a problem, they must address it. These data will result in creation of a demand. They advised the researcher, "You have started a little snowball which is o.k. with us." Any time O.S.E.R.S. receives data which indicates they should be doing more, they perceive that as supportive.
- Prior to receiving the data, panel members suspected there was a great deal of ignorance about

parent counseling on the part of both parents and schools as to what they were entitled. Panel members had also suspected parent counseling was not being done in any systematic way and that there was a great deal of variation from school division to school division.

-- The panel felt the most important finding of the research was that most parents did not realize they were entitled to parent counseling and did not know of the availability of any parent counseling in their school divisions.

-- Important findings, also, were that there is a wide variation in interpretation of what parent counseling may be, and that no school division is providing parent counseling systemwide.

-- The panel discussed the size of the survey response and felt the researcher would have been fortunate to get 25-30% response instead of the more than 40% response from superintendents and more than 20% response from parents, because:

- 1) There was no authority behind the researcher and any response was voluntary.
- 2) They received nothing for participating; superintendents are busy and tend to resent such survey requests in school divisions.

3) There was an implicit threat to the superintendents, because they were asked if they were doing what they were supposed to be doing, and to answer 'no' meant they were really damning themselves.

4) The parent response was high considering the indirect, not person-to-person, contact. Eighty (80) was a decent sample size since it was clear the survey reached both extremes of parents -- satisfied to dissatisfied. The negative reinforced the positive: parents who received any counseling at all reported satisfaction, which meant, to the panel, that any counseling at all is of some value to parents.

-- The survey data was judged to be sufficient and useful in itself. The interview data was useful to update the original data and showed the fragility of the provision of parent counseling and, again, provided the government with data it did not have.

-- The panel felt the research had value in implications for further research:

1) The data answered some questions and asked more.

- 2) The wide range of data stimulates additional research.
- 3) No school division in this study provided parent counseling systemwide: regulations of P.L. 94-142 assign no one primary responsibility for parent counseling.
- 4) If parent counseling is helpful to parents, is it, in turn, helpful to their handicapped children, and, in turn, helpful to their non-handicapped siblings?
- 5) A random selection of parents for future study would be useful if parents could be contacted directly.
- 6) A study of other school divisions to determine the dimensions of parent counseling would be another useful study.

This baseline study of the implementation of parent counseling was original research which provided the Office of Special Education and Rehabilitative Services (O.S.E.R.S.), U.S. Department of Education, with the only known data about the implementation of parent counseling. This data will be valuable to them as they now begin to monitor parent counseling.

The O.S.E.R.S. panel believe implications of this research are that:

- A problem has been identified which will result in creation of a demand, in training of more parent counselors, and in increased parent counseling.
- Additional research will be generated based upon these data.

The major conclusions based on this study are that:

- Most parents did not know of the availability of parent counseling in their school divisions.
- Most parents had not received parent counseling.
- Parent counseling was defined in different ways.
- Parent counseling was not implemented systemwide in any school division which participated in this research.
- The data obtained in this research constitute the only known data about the implementation of parent counseling by school divisions.

Recommendations

The literature indicates that individual needs of parents should be taken into consideration in parent counseling. Results of this research support the literature and indicate most parents were not asked what type of parent counseling would be helpful to them. Most parents did not know of the availability of parent counseling.

Therefore, it is recommended that, in order to provide the most appropriate parent counseling for each individual parent, the individual needs of the parent be assessed prior to provision of parent counseling.

Though the regulations of P.L. 94-142 and of the Commonwealth of Virginia provide for parent counseling, no professional is assigned in the regulations primary responsibility for parent counseling. Parent counseling was found not to be provided systemwide in any school division which participated in this research. The Federal government and the states have not yet monitored the provision of parent counseling. This research was determined by the U.S. Department of Education to provide the only known data about parent counseling in school divisions. Personnel in two of the five school divisions interviewed volunteered that they would welcome monitoring by state and Federal governments and would consider that supportive of their efforts to provide parent counseling. Therefore, it is recommended that data be gathered about the training of parent counselors and the provision of parent counseling by local school divisions, and that parent counseling be monitored by Federal and state departments of education.

The literature indicates that parent counseling is at least beneficial, if not essential. Regulations of P.L. 94-142 and Virginia identify parent counseling as a related

service and define parent counseling in several ways. Therefore, it is recommended that studies be conducted to determine if there is evidence that parent counseling made a difference to parents, to the handicapped students, to their non-handicapped siblings, and to the school divisions.

Parent counseling, as implemented by school divisions which participated in this research, appears to have been influenced by the age and/or handicapping condition of the student. This research was a baseline study without hypotheses. Therefore, it is recommended that studies be conducted which have hypotheses about possible influences upon the provision of parent counseling.

This research studied the implementation of parent counseling in selected school divisions in but one state. Therefore, it is recommended that further research be conducted of implementation of parent counseling in all school divisions in Virginia and in the remaining states.

Primary responsibility for provision of parent counseling is not assigned by the regulations of P.L. 94-142. Parent counseling is not implemented systemwide in any of the school divisions which participated in this research. Most parents were not aware of any parent counseling in their school divisions. Therefore, it is recommended that:

- 1) the Federal government indicate primary

- responsibility at the Federal level for implementation of parent counseling;
- 2) states assign primary responsibility for implementation of parent counseling;
 - 3) local school divisions assign primary responsibility for implementation of parent counseling;
 - 4) studies be conducted to determine the effect of the assignment of primary responsibility for the implementation of parent counseling at Federal, state and local levels.

The literature documents the importance of ongoing parent counseling. Therefore, it is recommended that longitudinal studies be conducted of the implementation of parent counseling.

Researcher's Comments

The literature stresses the need for individualized parent counseling. Public Law 94-142, its regulations, and those of Virginia, establish the right of parents to be involved in virtually every aspect of their handicapped child's education. It would not have been out of character for the regulations to have specified that there be parental involvement in the development of parent counseling programs. The regulations are silent on the

subject. Therefore, it is recommended that:

- 1) parents be involved in the development, goals, implementation, and evaluation of parent counseling;
- 2) further research be conducted of various models of parent counseling and their effectiveness;
- 3) studies be conducted to determine if parent counseling is found to be satisfactory by the parents and if it improves parental satisfaction with their child's educational program;
- 4) further research be conducted on the relationship between parent counseling and the child's progress.

Summary

Parent counseling appears in the regulations of P.L. 94-142 as a related service. In testimony, commenting upon proposed changes in the regulations of P.L. 94-142, the American Personnel and Guidance Association (now the American Association for Counseling and Development) stated that parent counseling had not yet been emphasized enough or fully implemented during the first five years of the law and that without parent counseling in the definition, where parent counseling is now implemented, it might cease to

exist altogether (American Personnel and Guidance Association, 1982).

The results of this research indicate that, more than a decade after passage of P.L. 94-142, in the school divisions studied, parent counseling is not emphasized or fully implemented. Further, it was learned that parent counseling is not in the state plans and that the U.S. Department of Education, Office of Special Education and Rehabilitative Services, has not monitored parent counseling.

Therefore, these data constitute the only known data available concerning the implementation of parent counseling. This research is valuable as baseline data on which future data can be collected, and may be a catalyst for the monitoring and possible expansion of parent counseling services nationwide.

There is no doubt that counseling for parents of handicapped children is beneficial, important, and quite possibly essential. The framers of P.L. 94-142 and its regulations included parent counseling in the regulations as a related service, and then included parent counseling in the job activities of several categories of professionals. A decade has passed without parent counseling appearing in state plans, being monitored, or being implemented fully.

Carlson (1981) asserted that parental and legislative expectations of the potential of P.L. 94-142 were unrealistic and excessively optimistic since the reality is distant from expectations. The results of this research indicate that the reality of parent counseling is, indeed, distant from the potential of parent counseling. It is possible to conclude, however, that parent counseling would have a greater chance of approaching its potential if, henceforth, it appears in state plans, is monitored at all levels, and involves both parents and professionals in the development, goals, implementation and evaluation of parent counseling.

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Appendices

Appendix A



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF THE ASSISTANT SECRETARY
FOR SPECIAL EDUCATION AND REHABILITATIVE SERVICES

May 31, 1985

Ms. Bernice Munsey

Washington, D.C. 20016

Dear Bernice:

Thank you for participating on the review panel last week. As always, you got very high marks from the panel members. I wish you would consider working here full time.

I have not forgotten your question about the need for base-line data on counseling for parents of handicapped children. In fact, I have checked with several colleagues, who should know, and we have very little data even with regard to what is being provided, and no data with regard to quality of services. Obviously, we would be very interested in any data you could provide, and might well make parent counseling a priority in the Related Services competition. In addition, your question has made me realize that we are probably interpreting the training allowed under Parent Organization projects too narrowly, as simply that which provides parents with objective knowledge of facts, when we should also be giving parents counseling and psychological support.

If you could send me your data within the next month to six weeks, I would share it with Max Mueller, and arrange a time for you to come in to discuss our response to your findings.

It was really good to see you again. I hope to hear from you soon.

Best regards,

Branch Chief
Related Personnel Branch
Division of Personnel Preparation

Appendix B



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

July 29, 1983

Dr. [Name]
 Division Superintendent
 [Name] Public School
 [Address]

Dear Dr. [Name]:

We sense, from our review of the literature, that there is an urgent need for research on the subject of counseling of parents of public school handicapped students. Literature is available about counseling, about the handicapped, about parents of the handicapped and their involvement in the education of their children, about special educational services, etc., but there is virtually no data available about implementation by local education agencies of counseling for parents of handicapped students.

To meet the need for current research, we are conducting a survey in Virginia entitled "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia". Thirty Virginia school divisions were selected by systematic random sample; yours is one identified by this process.

Two questionnaires have been designed: one for school division superintendents and one for parents of handicapped students in the school divisions identified. You, or your designee, are requested to complete and return your questionnaire and to provide parent questionnaires to (number) parents of handicapped students in your school division. The parent questionnaires should be equally divided between elementary and secondary students preferably representing several handicapping conditions. Self-addressed, stamped envelopes are provided to facilitate return of all questionnaires. Under separate cover, the 1982-83 Chairman of the Special Education Advisory Committee of (school division) is being requested to provide questionnaires to an additional (number) parents of handicapped students. You may be assured that confidentiality will be maintained throughout. Return of all questionnaires is requested by August 20.

Your participation in this research is most important and will be much appreciated. The results of the survey will be made available to all participants in the research project and will become part of a doctoral dissertation.

Sincerely,

Charles W. Humes
Associate Professor

Bernice W. Munsey
Graduate Student

"COUNSELING FOR PARENTS OF HANDICAPPED CHILDREN DURING SCHOOL YEAR 1982-83,

A SURVEY OF PARENTS OF HANDICAPPED CHILDREN

AND SCHOOL DIVISION SUPERINTENDENTS"

Questionnaire for School Division Superintendents

DIRECTIONS: Please respond to each question as appropriate for school year 1982-83. Disregard numbers in parentheses; they are for statistical analysis only. Your responses will be kept confidential.

PART I.

1. How many identified handicapped students were there in your school division during school year 1982-83? (Using December 1, 1982 figures, check one)
 - 3 150 or less
 - 2 151-250
 - 2 251-500
 - 3 501-1000
 - 3 over 1000
2. Was parent counseling an integral part of the regular school program for handicapped children during school year 1982-83? (check one)
 - 7 yes
 - 4 no
3. The parents of how many handicapped students participated in parent counseling during school year 1982-83? (check one)
 - 8 150 or less
 - 2 151-250
 - 2 251-500
 - 1 501-1000
 - over 1000
4. Parents of handicapped children in which of the following categories were asked to participate in parent counseling during school year 1982-83? (check all that are appropriate)
 - 11 preschool
 - 10 elementary school
 - 9 junior high school/middle school/intermediate school
 - 9 high school
 - 3 special education center
 - 5 homebound/hospital
 - other (please specify) _____

3. Was parent counseling systematically identified on handicapped students' IEPs during school year 1982-83 in your local school division? (check one)
- 4 yes
9 no
4. How did parents of handicapped students learn about the availability of parent counseling during school year 1982-83 in your local school division? (check all that are appropriate)
- 2 newspaper/radio/TV notices
8 written notices from school division mailed or sent home with handicapped students
9 telephone call from school division staff person
11 face-to-face invitation from staff person
1 from another parent of a handicapped child
 other (please specify _____)
5. During school year 1982-83, who initiated counseling for parents of handicapped students in your local school division? (check one)
- parent initiated/requested counseling
7 local school division initiated parent counseling
3 both did, during the course of the year
6. Where was parent counseling primarily held during school year 1982-83 in your local school division? (check one)
- 9 public building
 private home
 on the telephone
7. Was there a regular schedule for parent counseling? (check one)
- 4 yes
9 no
8. What was the average number of times per month a parent of a handicapped student was scheduled for parent counseling? _____
9. How was parent counseling offered during school year 1982-83 in your local school division? (check one)
- 6 individual counseling
 group counseling
4 both

5. Parents of handicapped children whose special education services were provided in which of the following settings during school year 1982-83 were asked to participate in parent counseling? (check all that are appropriate)

5 regular classroom
8 resource room/learning center
10 self-contained classroom in regular school
3 special education center
5 homebound/hospital
 _____ other (please specify _____)

6. What other responsibilities did the person have during school year 1982-83 who had the primary responsibility for counseling parents of handicapped children? (check all that are appropriate in each category)

7 student counseling
9 testing
4 teaching
6 administration
 _____ other (please specify _____)

PART II.

1. What did counseling of parents of handicapped children in your school division during school year 1982-83 seek to do? (check all that are appropriate)

12 assist parents in understanding the special needs of their handicapped child
11 provide parents with information about child development
13 provide parents with information about their handicapped child's educational progress
 _____ other (please specify _____)

2. Who had primary responsibility for counseling parents of handicapped students during school year 1982-83 in your local school division? (check one)

1 school counselor
4 school psychologist
1 school social worker/visiting teacher
 _____ speech-language clinician
 _____ teacher
 _____ principal
 _____ other (please specify _____)

10. How were parent counseling topics chosen for parents of handicapped students in your local school division during school year 1982-83? (check one)

2 by school staff
1 by parents
8 by parents and by school staff

11. Did counseling for parents of handicapped students during school year 1982-83 in your local school division consist of written materials mailed or sent home with the handicapped student? (check one)

 yes, exclusively
5 yes, in combination with face-to-face counseling
8 no

12. Which of the following describes counseling as it was provided for parents of handicapped students in your local school division during school year 1982-83? (check all that are appropriate)

10 information (example: community resources, course offerings, rights)
11 training (example: methods and techniques to develop strengths of students)
11 adjustment (example: parent-child relationships, feelings, concerns, family dynamics)

PART III. DIRECTIONS: The following questions seek your opinion. All responses will be kept confidential.

1. In your opinion, is there a difference between a parent conference and a parent counseling session? (check one)

5 no
8 yes (please specify the difference _____)

2. In your opinion, of what should parent counseling primarily consist? (check one)

2 information
4 training
3 adjustment

3. Are you satisfied with parent counseling as it was provided by your local school division during school year 1982-83? (check one)

4 yes
7 no (please explain _____)

4. How was the content chosen of counseling for parents of handicapped students in your local school division during school year 1982-83? (check all that are appropriate)
- 3 needs assessment
 11 employee of school system
 11 parent of handicapped student(s)
5. Please mark the category below which best describes your program for counseling parents of handicapped students in your local school division during school year 1982-83? (check one)
- did not exist
 offered but not implemented
 3 helped a small number of parents
 7 helped some of the parents
 helped about half of the parents
 1 helped most of the parents
 was successful
 exemplary -- should be disseminated
6. Do you believe in the concept of parent counseling as it is defined in federal and state regulations for the education of all handicapped children? (check one)
- 11 yes
 2 no (Comment, if you wish _____)
-

Thank you very much for completing this questionnaire.
 Please return it in the envelope provided by August 20, 1984,
 to: Bernice W. Munsey, 3623 N. 37th Street, Arlington, VA
 22207.

Appendix C



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

July 29, 1983

Chairman, 1982-83 Special Education
 Advisory Committee
 [Name] Public Schools
 c/o [Name], Special Education
 [Address]

Dear Chairman:

We sense, from our review of the literature, that there is an urgent need for research on the subject of counseling of parents of public school handicapped students. Literature is available about counseling, about the handicapped, about parents of the handicapped and their involvement in the education of their children, about special educational services, etc., but there is virtually no data available about implementation by local education agencies of counseling for parents of handicapped students.

To meet the need for current research, we are conducting a survey in Virginia entitled "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia". Thirty Virginia school divisions were selected by systematic random sample; yours is one identified by this process.

Two questionnaires have been designed: one for school division superintendents and one for parents of handicapped students in the school divisions identified. Half of the parents will be selected by your school division superintendent and half by you as Chairman of the 1982-83 Special Education Advisory Committee of [Name]. Please provide the [Number] enclosed questionnaires to parents of handicapped students in your school division. The parent questionnaires should be equally divided between elementary and secondary students preferably representing several handicapping conditions. Self-addressed, stamped envelopes are provided to facilitate return of all questionnaires. You may be assured that confidentiality will be maintained throughout. Return of all questionnaires is requested by August 20.

Your participation in this research is most important and will be much appreciated. The results of the survey will be made available to all participants in the research project and will become part of a doctoral dissertation.

Sincerely,

Charles W. Humes
Associate Professor
Counselor Education

Bernice W. Munsey
Graduate Student
Counselor Education



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

July 29, 1983

TO: Parents of Handicapped Children in Virginia

FROM: Charles W. Humes, Associate Professor
Bernice W. Munsey, Graduate Student

You have been selected by your local school division Superintendent or by the Chairman of the local Special Education Advisory Committee to participate in a research project entitled "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia". Thirty local school divisions in Virginia were selected by systematic random sample. Your school division is one of those identified by this process.

We sense, from our review of the literature, that there is an urgent need for research on the subject of the counseling of parents of handicapped students who attend public school. Literature is available about counseling, about the handicapped, about special educational services, about parents of the handicapped, and the involvement of parents in the education of their handicapped children, etc., but there is virtually no data available regarding the implementation by local education agencies of counseling for parents of handicapped students.

Two questionnaires have been designed: one for local school division superintendents and one for parents of handicapped students in the identified school divisions. Your participation in the research is most important and will be much appreciated. Please complete and return the attached questionnaire in the self-addressed, stamped envelope by August 20. You may be assured that confidentiality will be maintained throughout the research project. Results of the survey will be made available to all participating school divisions through the superintendents and chairmen of the Special Education Advisory Committees. The survey results will become part of a doctoral dissertation.

Thank you very much for participating in this much needed research. Should you wish a summary of the results sent directly to you, send a postcard (separate from the questionnaire) to: Bernice W. Munsey,

Once again, please return the questionnaire by August 20, 1983.

"COUNSELING FOR PARENTS OF HANDICAPPED CHILDREN DURING SCHOOL YEAR 1982-83,
A SURVEY OF PARENTS OF HANDICAPPED CHILDREN
AND SCHOOL DIVISION SUPERINTENDENTS IN VIRGINIA"

Questionnaire for Parents

DIRECTIONS: Please respond to each question as appropriate for the school year 1982-83. Disregard numbers in parentheses; they are for statistical analysis only. Your responses will be kept confidential.

PART I.

1. Did your handicapped child receive special education services during the school year 1982-83? (check one)
 - 39/41* yes
 - _____ no (if 'no' -- return questionnaire in envelope provided. Do not respond to any further questions.)

2. Which of the following best describes the provider of educational services to your handicapped child? (check one)
 - 37/40 public school
 - 1/ private school
 - /1 public school and private school

3. What is your child's handicap as identified on the 1982-83 IEP?
 - 4/4 mentally retarded
 - 1/ hard of hearing
 - 1/2 deaf
 - 1/ speech impaired
 - 1/ visually handicapped
 - 3/1 emotionally disturbed
 - 2/1 orthopedically impaired
 - other health impaired
 - /1 deaf-blind
 - 8/4 multihandicapped
 - 9/22 learning disabled
 - 3/1 do not know

4. What was the school placement of your handicapped child in the school year 1982-83? (check one)
 - 4/3 preschool
 - 18/25 elementary school; grade (if any) _____
 - 4/7 junior high/middle school/intermediate school; grade _____
 - 4/2 high school; grade _____
 - 5/2 special education center; grade _____
 - 1/ homebound/hospital; grade _____
 - 2/ other (please specify _____; grade _____)

*First number is frequency of response by parents selected by superintendent. Second number is frequency of response by parents selected by chairperson of Special Education Advisory Committee.

5. Where were special education services provided for your handicapped child during school year 1982-83? (check one)

7/1 regular classroom
9/9 resource room/learning center
14/21 self-contained classroom in regular school
4/3 special education center
1/ homebound/hospital
2/ other

PART II.

1. What did parent counseling in your local school division seek to do during school year 1982-83? (check all appropriate)

12/13 assist parents in understanding the special needs of their handicapped child
15/9 provide parents with information about child development
21/21 provide parents with information about their handicapped child's educational progress
6/4 other (please specify _____)
8/8 do not know

2. Who had primary responsibility for counseling parents of handicapped students during the school year 1982-83 in your local school division? (check one)

1/ school counselor
3/3 school psychologist
2/ school social worker/visiting teacher
4/ speech-language clinician
12/20 teacher
--- principal
9/9 other (please specify do not know)

3. Is parent counseling identified on your handicapped child's 1982-83 IEP? (check one)

12/8 yes
15/19 no
12/13 do not know

4. How did you learn about the availability of counseling for parents of handicapped students in your local school division? (check one)
- newspaper/radio/TV notices
- 5/4 written notices from school division mailed or sent home with handicapped student
- 1/1 telephone call from school division staff person
- 5/3 face-to-face invitation from staff person
- /2 from another parent of a handicapped child
- 4/1 other (please specify _____)
- 16/21 did not learn about the availability of parent counseling
5. If you participated in parent counseling as the parent of a handicapped student during the school year 1982-83, who initiated the counseling? (check one)
- 1/2 parent initiated/requested the counseling
- 3/3 local school division initiated parent counseling
- 14/4 both did, during the course of the school year
- 8/12 not applicable; did not participate in parent counseling
- 5/4 do not know
6. Where was counseling for parents of handicapped students held primarily during school year 1982-83? (check one)
- 12/9 public building
- 3/2 private home
- 1/2 on the telephone
- 15/11 do not know
7. Was there a regular schedule of counseling for parents of handicapped students during school year 1982-83? (check one)
- 10/6 yes
- 17/20 no
- 10/9 do not know
8. What was the average number of times per month a parent was scheduled for counseling? _____
9. How was parent counseling offered during school year 1982-83 for parents of handicapped students? (check all appropriate)
- 15/10 individual counseling
- 1/1 group counseling
- 4/4 both
- 17/14 do not know

10. Did you participate in choosing topics of counseling for parents of handicapped children during school year 1982-83? (check one)
- 6/10 yes
31/26 no
11. Did the counseling you received during school year 1982-83 consist of written materials mailed or sent home with your handicapped student? (check one)
- 1/3 yes, exclusively
13/10 yes, in combination with face-to-face counseling
21/18 no
12. Which of the following best describes the counseling you received during school year 1982-83 in your local school division? (check one)
- 2/4 information (example: community resources, course offerings, rights)
19/5 training (example: methods and techniques to develop strengths of students)
4/3 adjustment (example: parent-child relationships, feelings, concerns, family dynamics)
16/24 not applicable, did not receive parent counseling
13. If you participated in parent counseling as the parent of a handicapped student during school year 1982-83, who was the parent counselor? (check one)
- school counselor
1/ school psychologist
2/ school social worker/visiting teacher
2/ speech-language clinician
10/11 teacher
--- principal
3/4 other (please specify _____)
7/6 do not know
14. If you did not participate in parent counseling as the parent of a handicapped student during school year 1982-83, which of the following best describes your reason? (check one)
- 11/12 did not know it was available
/2 did not need it at the time
1/ could not at the time offered
--- could not attend at the place offered
--- topics were not of interest to me at the time
5/7 other (please specify _____)

PART III. The following questions seek your opinions. Confidentiality is assured.

1. In your opinion, is there a difference between a parent conference and a parent counseling session? (check one)
 - 12/13 no
 - 24/25 yes (please specify the difference _____)
2. In your opinion, of what should parent counseling primarily consist? (check one)
 - 13/12 information
 - 10/11 training
 - 5/3 adjustment
 - 3/1 do not know
3. Are you satisfied with parent counseling as it was offered by your local school division during school year 1982-83? (check one)
 - 13/11 yes
 - 10/9 no (please explain _____)
 - 12/18 did not participate in parent counseling
4. Were you asked what counseling would be helpful to you as the parent of a handicapped student in your local school division during school year 1982-83? (check one)
 - 11/6 yes
 - 26/34 no
5. Please mark the category below that best describes the helpfulness to you as the parent of a handicapped student of the counseling program for parents of handicapped students in your local school division. (check one)
 - 17/21 do not know of any parent counseling program
 - 2/2 parent counseling program exists in name only
 - 2/2 minimally helpful, not enough
 - /1 barely helpful
 - 4/1 moderately helpful
 - 7/6 quite helpful
 - 4/2 very helpful
 - 1/2 just what I needed, extremely helpful
6. Do you believe in the concept of parent counseling as it is defined in the regulations of Public Law 94-142 (Education for All Handicapped Children Act) (check one)
 - 19/11 yes
 - 1/9 no
 - 18/18 do not know

Appendix D



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

August 29, 1983

TO: School Division Superintendents
Special Education Advisory Committee Chairmen

FROM: Bernice W. Munsey, Graduate Student, V.P.I. & S.U.

SUBJECT: Status of research "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia"

The deadline for return of the questionnaires has been extended to September 30, 1983.

Almost 50% of the School Division Superintendents have returned their completed questionnaires. And, there continues to be a steady return of the parent questionnaires from almost 50% of the school divisions. The deadline has been extended to allow more time after summer vacations for distribution and completion of the questionnaires.

Each of the thirty school divisions, which had been selected by systematic random sample, received two packets containing the questionnaires. One packet, addressed to the School Division Superintendent, contained the Superintendent's Questionnaire and 4, 6, or 8 questionnaires to be completed by Superintendent-selected parents of handicapped students. The second packet, addressed to the 1982-83 Special Education Advisory Committee Chairman, in care of the school division, contained 4, 6, or 8 questionnaires to be completed by the SEAC Chairman-selected parents of handicapped students.

Full participation in the research is most important, since the more extensive the data the more valuable the results will be. There has been 99% return from some school divisions' Superintendents, parents they have selected, and parents chosen by the SEAC Chairmen. There has been good response from several school divisions, and no response from some school divisions.

Response, to date, has been good, but return of the remaining Superintendents' questionnaires would be much

appreciated, and the distribution of the remaining parent questionnaires by Superintendents and SEAC Chairmen would be very helpful.

If there are any questions, please contact:

Bernice W. Munsey

Phones: (home)

(office)

Appendix E



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

October 3, 1983

Dr. [Name]
Superintendent
[Name] Public Schools
[Address]

Dear Dr. [Name]:

Twelve of the thirty Superintendents of school divisions selected by systematic random sample to participate in the research study of "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia", have returned their completed questionnaires. Since [Name] is one of the school divisions which has not, as of this date, responded by completing and returning their questionnaires, I enclose a second set.

I hope you will take the time to complete your questionnaire and to provide parents of handicapped students in your school division with the parent questionnaires. Little research has been done in this most important area and your participation in this research project will be very much appreciated. Self-addressed, stamped envelopes are enclosed for each questionnaire.

With kind regards.

Sincerely,

Bernice W. Munsey, M.A., C.A.G.S.



VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

COLLEGE OF EDUCATION — NORTHERN VIRGINIA GRADUATE CENTER

October 3, 1983

Mr. (Mrs.) [Name]
Chairman
1982-83 Special Education Advisory Committee
[Name] Public Schools
[Address]

Dear [Name]:

Enclosed please find a second set of the questionnaires for parents of handicapped students in the [Name] Public Schools. The cover sheet of the questionnaire explains the research project which is entitled "Counseling for Parents of Handicapped Children During School Year 1982-83, a Survey of Parents of Handicapped Children and School Division Superintendents in Virginia".

You, as SEAC Chairman of 1982-83, are requested to give one questionnaire each to parents of handicapped students in your school division. If you are a parent yourself of a handicapped student, you may, of course, complete one of the questionnaires yourself. In order to make the research data more complete, it would be helpful if you would select parents of students of both elementary and secondary age and of several handicapping conditions.

Your participation in the research will be much appreciated. Self-addressed, stamped envelopes are enclosed for each questionnaire.

With kind regards.

Sincerely,

Bernice W. Munsey, M.A., C.A.G.S.

Appendix F

Counseling Parents of Handicapped Children by Selected School
Divisions in Virginia: a Summary of Superintendent Responses
for School Year 1982-83

(Condensed questions and response categories. Special education population 500 or less = small (S); 501 or more = large (L). Number of responses in parentheses.)

<u>SMALL</u>			<u>LARGE</u>	
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>
PART I.				
1. <u>How many identified handicapped students</u>				
<u>in school division? (13)</u>				
6	100%	500 or less	1	14%
		501 or more	6	86%
2. <u>Parent counseling an integral part of re-</u>				
<u>gular school program for handicapped? (11)</u>				
3	60%	yes	4	67%
2	40%	no	2	33%
3. <u>Parents of how many handicapped students</u>				
<u>participated in parent counseling? (13)</u>				
6	100%	500 or less	6	86%
		501 or more	1	14%
4. <u>Parents of handicapped children in which</u>				
<u>categories were asked to participate in</u>				
<u>parent counseling? (12 - multiple response)</u>				
4	80%	preschool	7	100%
4	80%	elementary	6	86%
3	60%	intermediate	6	86%
3	60%	high school	6	86%
3	60%	homebound/hospital	2	29%

<u>SMALL</u>			<u>LARGE</u>	
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>
5. <u>Parents of handicapped children in which settings were asked to participate in, parent counseling? (12)</u>				
3	60%	regular classroom	2	29%
4	80%	resource room	4	57%
5	100%	self-contained	5	71%
3	60%	homebound/hospital	2	29%
6. <u>Other responsibilities of person with primary responsibility for counseling parents of handicapped children? (11)</u>				
2	50%	student counseling	5	71%
4	100%	testing	5	71%
1	25%	teaching	3	43%
3	75%	administration	3	43%

PART II.

1. <u>Counseling of parents of handicapped children sought to...? (13 - mult. res.)</u>				
5	83%	help understand child's special needs	7	100%
5	83%	provide info. about child development	6	86%
6	100%	provide info. about child's progress	7	100%
2. <u>Who had primary responsibility for counseling parents of handicapped? (6)</u>				
		school counselor	1	50%
3	75%	school psychologist	1	50%
1	25%	teacher		
3. <u>Parent counseling systematically identified on students' IEP? (13)</u>				
2	33%	yes	2	29%
4	67%	no	5	71%

SMALLLARGENo. %SNo. %L4. How parents learned of availability of parent counseling. (13 - mult. res.)

1	17%	newspaper/radio/tv	1	14%
4	67%	written notices sent	4	57%
5	83%	telephone	4	57%
4	67%	face-to-face invitation	7	100%
		from another parent	1	14%

5. Who initiated counseling for parents of handicapped students? (10)

4	100%	school division	3	50%
		school and parents	3	50%

6. Parent counseling primarily held in? (9)

4	100%	public building	5	100%
---	------	-----------------	---	------

7. Regular schedule for parent counseling? (13)

2	33%	yes	2	29%
4	67%	no	5	71%

8. Average number of times per month parent of handicapped student scheduled for counseling? (11)

1	25%	less than 1	1	14%
3	75%	more than 1	6	86%

9. How was parent counseling offered? (10)

3	60%	individual	3	60%
2	40%	individual and group	2	40%

10. How were parent counseling topics chosen?

(11)

1	20%	staff	1	17%
		parents	1	17%
4	80%	both	4	67%

SMALLNo. %SLARGENo. %L

11. Did counseling for parents consist of written materials mailed or sent home, with students? (13)

3	50%	combination written and counseling	2	29%
3	50%	no	5	71%

12. Describe counseling provided for parents of handicapped students. (12 - mult. res.)

5	100%	information	5	71%
4	67%	training	7	100%
4	67%	adjustment	7	100%

PART III.

1. In your opinion, is there a difference between parent conference and parent counseling? (13)

2	33%	no	3	43%
4	67%	yes	4	57%

2. In your opinion, of what should parent counseling primarily consist? (9)

1	33%	information	1	17%
1	33%	training	3	50%
1	33%	adjustment	2	33%

3. Are you satisfied with parent counseling as provided? (11)

1	67%	yes	1	17%
2	33%	no	5	83%

4. How content was chosen for parent counseling. (13 - mult. res.)

2	33%	needs assessment	1	14%
6	100%	employee	5	71%
4	67%	parent	7	100%
4	67%	parents and employees	5	71%

SMALLLARGENo. %SNo. %L

5. Best describe your program for counseling
parents of handicapped students? (11)

2	40%	helps small number	1	17%
3	60%	helps some parents	4	67%
		helps most parents	1	17%

6. Do you believe in concept of parent counsel-
ing as defined in federal and state regula-
tions for education of all handicapped
children? (13)

5	83%	yes	6	86%
1	17%	no	1	14%

Appendix G

Counseling Parents of Handicapped Children by Selected School
Divisions in Virginia: a Summary of Responses, for School Year
1982-83, of Parents Selected by Superintendents

(Condensed questions and response categories. Special education population 500 or less = small (S); 501 or more = large (L). Number of responses in parentheses.)

<u>SMALL</u>			<u>LARGE</u>	
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>
PART I.				
1. <u>Did your handicapped child receive special education services?</u> (39)				
12	100%	yes	27	100%
2. <u>Best describe provider of educational services to your handicapped child.</u> (38)				
11	92%	public	26	100%
1	8%	private		
3. <u>Your child's handicap on I.E.P.?</u> (33)				
2	17%	mentally retarded	2	10%
1	8%	hard of hearing		
1	8%	deaf		
		speech impaired	1	5%
		visually handicapped	1	5%
1	8%	emotionally disturbed	2	10%
		orthopedically handicapped	1	5%
3	25%	multiply handicapped	5	24%
3	25%	learning disabled	6	29%
1	8%	do not know	2	10%

SMALLNo. %SLARGENo. %L4. What was school placement of your handi-
capped child? (38)

		preschool	4	15%
6	50%	elementary school	12	46%
		intermediate school	4	15%
3	25%	high school	1	4%
2	17%	special education center	3	12%
1	8	homebound/hospital		
		other	2	8%

5. Where were special education services pro-
vided for your handicapped child? (37)

		regular classroom	7	28%
6	50%	resource room	3	12%
4	33%	self-contained	10	40%
1	8%	special education center	3	12%
1	8%	homebound/hospital		
		other	2	8%

PART II.

1. What parent counseling sought to do?

(69 - mult. res.)

4	24%	understand child's special needs	8	18%
2	12%	information about child development	13	29%
4	24%	information about child's progress	17	38%
4	24%	other	2	4%
3	18%	do not know	5	11%

2. Who had primary responsibility for coun-
seling parents of handicapped? (31)

		school counselor	1	5%
1	11%	school psychologist	2	9%
2	22%	social worker		
1	11%	speech/language clinician	3	14%
1	11%	teacher	11	50%
4	44%	do not know	5	23%

<u>SMALL</u>			<u>LARGE</u>		
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>	
3. <u>Parent counseling on your child's I.E.P.?</u>					
(39)					
3	25%	yes	9	33%	
4	33%	no	11	41%	
5	44%	do not know	7	26%	
4. <u>How you learned about availability of counseling for parents of handicapped?</u> (31)					
3	27%	written notices	2	10%	
		telephone	1	5%	
3	27%	face-to-face invitation	2	10%	
		other	4	20%	
5	46%	did not learn	11	55%	
5. <u>If you participated in parent counseling as parent of handicapped student, who initiated counseling?</u> (31)					
		parent	1	4%	
2	25%	school	1	4%	
3	38%	both did	11	48%	
2	25%	not applicable	6	26%	
1	13%	do not know	4	17%	
6. <u>Where parent counseling held primarily?</u> (31)					
5	50%	public building	7	33%	
1	10%	private home	2	10%	
1	10%	telephone			
3	30%	do not know	12	57%	
7. <u>Regular schedule of parent counseling?</u> (37)					
1	9%	yes	9	35%	
7	63%	no	10	39%	
3	27%	do not know	7	27%	

<u>SMALL</u>			<u>LARGE</u>		
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>	
8. <u>Average number of times per month parent scheduled for counseling. (24)</u>					
2	33%	not applicable	8	44%	
2	33%	less than 1	3	39%	
2	33%	1 or more	7	17%	
9. <u>How parent counseling offered? (37)</u>					
3	30%	individual	12	44%	
1	10%	group			
2	20%	both	2	7%	
4	40%	do not know	13	48%	
10. <u>Did you participate in choosing topics of parent counseling? (37)</u>					
1	10%	yes	5	19%	
9	90%	no	22	82%	
11. <u>Did counseling you received consist of written materials mailed or sent home with your handicapped child? (35)</u>					
		yes	1	4%	
3	30%	yes, in combination with counseling	10	40%	
7	70%	no	14	56%	
12. <u>Best describe counseling you received. (39)</u>					
1	9%	information	1	4%	
5	46%	training	14	50%	
		adjustment	2	7%	
5	46%	not applicable	11	39%	
13. <u>If you participated in parent counseling as parent of handicapped student, who was parent counselor? (25)</u>					
		school psychologist	1	5%	
1	17%	social worker	1	5%	
		speech/language clinician	2	11%	
3	50%	teacher	7	37%	
1	17%	other	2	11%	
1	17%	do not know	6	32%	

SMALLNo. %SLARGENo. %L

14. If you did not participate in parent counseling as parent of handicapped student, best describe your reason. (17)

2	40%	did not know available	9	75%
		could not attend at time	1	8%
3	60%	other	2	17%

PART III.

1. In your opinion, is there a difference between parent conference and parent counseling? (35)

5	46%	no	7	29%
6	55%	yes	17	71%

2. In your opinion, of what should parent counseling primarily consist? (31)

1	13%	information	12	52%
3	38%	training	7	30%
3	38%	adjustment	2	9%
1	13%	do not know	2	9%

3. Are you satisfied with parent counseling as offered? (35)

4	40%	yes	9	36%
3	30%	no	7	28%
3	30%	did not participate	9	36%

4. Were you asked what counseling would be helpful to you as parent of handicapped student? (37)

2	22%	yes	9	32%
7	78%	no	19	68%

SMALLNo. %SLARGENo. %L

		5. <u>Best describe helpfulness to you as parent of handicapped student, of counseling program for parents of handicapped students. (37)</u>		
6	50%	did not know of program	11	44%
1	8%	exists in name only	1	4%
		minimally helpful	2	8%
2	17%	moderately helpful	2	12%
2	17%	quite helpful	5	20%
1	8%	very helpful	3	8%
		extremely helpful	1	4%
		6. <u>Do you believe in concept of parent counseling as defined in regulations of P.L. 94-142? (38)</u>		
5	46%	yes	14	52%
		no	1	4%
6	55%	do not know	12	44%

Appendix H

Counseling Parents of Handicapped Children by Selected School Divisions in Virginia: a Summary of Responses, for School Year 1982-83, of Parents Selected by Chairpersons of Special Education Advisory Committee

(Condensed questions and response categories. Special education population 500 or less = small (S); 501 or more = large (L). Number of responses in parentheses.)

SMALLNo. %SLARGENo. %L

PART I.

1. Did your handicapped child receive special education services? (45)

16	94%	yes	25	89%
1	6%	no	3	11%

2. Best describe provider of educational services to your handicapped child. (41)

16	100%	public	24	96%
		public and private	1	4%

3. Your child's handicap on I.E.P.? (37)

2	14	mentally retarded	3	13%
1	7	deaf	1	4%
		emotionally disturbed	1	4%
		orthopedically impaired	1	4%
		deaf-blind	1	4%
2	14%	multiply handicapped	2	9%
9	64%	learning disabled	13	57%
		do not know	1	4%

SMALLNo. %SLARGENo. %L4. What was school placement of your handi-
capped child? (39)

		preschool	3	13%
10	63%	elementary school	15	65%
5	31%	intermediate school	2	9%
1	6%	high school	1	4%
		special education center	2	9%

5. Where were special education services pro-
vided for your handicapped child? (34)

1	8%	regular classroom		
2	15%	resource room	7	33%
9	69%	self-contained	12	57%
1	8%	special education center	2	10%

PART II.

1. What parent counseling sought to do?

(55 - multiple response)

6	30%	understand child's special needs	7	20%
4	20%	information about child development	5	14%
6	30%	information about child's progress	15	43%
2	10%	other	2	6%
2	10%	do not know	6	17%

2. Who had primary responsibility for coun-
seling parents of handicapped? (32)

2	14%	school psychologist	1	6%
8	57%	teacher	12	67%
4	29%	do not know	5	28%

3. Parent counseling on your child's I.E.P.?

(39)

4	27%	yes	4	16%
6	40%	no	13	52%
5	33%	do not know	8	32%

SMALLNo. %SLARGENo. %L4. How you learned about availability of counseling for parents of handicapped? (32)

1	9%	written notices	3	14%
		telephone	1	5%
1	9%	face-to-face invitations	2	10%
1	9%	from another parent	1	5%
1	9%	other		
7	64%	did not learn	14	67%

5. If you participated in parent counseling as parent of handicapped student, who initiated counseling? (25)

1	8%	parent	1	8%
2	15%	school	1	8%
3	23%	both did	1	8%
5	39%	not applicable	7	58%
2	15%	do not know	2	17%

6. Where parent counseling held primarily? (31)

6	60%	public building	3	21%
		private home	2	14%
		telephone	2	14%
4	40%	do not know	7	50%

7. Regular schedule of parent counseling? (35)

3	23%	yes	3	14%
8	62%	no	12	55%
2	15%	do not know	7	32%

8. Average number of times per month parent scheduled for counseling? (13)

3	43%	not applicable		
2	29%	less than 1	3	50%
2	29%	1 or more	1	17%
		do not know	2	33%

<u>SMALL</u>			<u>LARGE</u>	
<u>No.</u>	<u>%S</u>		<u>No.</u>	<u>%L</u>
9. <u>How parent counseling offered? (29)</u>				
5	42%	individual	5	29%
1	8%	group		
1	8%	both	3	18%
5	42%	do not know	9	53%
10. <u>Did you participate in choosing topics of parent counseling? (37)</u>				
2	14%	yes	4	22%
12	86%	no	14	78%
11. <u>Did counseling you received consist of written materials mailed or sent home with your handicapped child? (31)</u>				
		yes	3	15%
5	46%	yes, in combination with counseling	5	25%
6	55%	no	12	60%
12. <u>Best describe counseling you received. (36)</u>				
3	20%	information	1	5%
2	13%	training	3	14%
2	13%	adjustment	1	5%
8	53%	not applicable	16	76%
13. <u>If you participated in parent counseling as parent of handicapped student, who was parent counselor? (21)</u>				
4	57%	teacher	7	50%
1	14%	other	3	21%
2	29%	do not know	4	29%
14. <u>If you did not participate in parent counseling as parent of handicapped student, best describe your reason. (21)</u>				
3	43%	did not know available	9	64%
1	14%	did not need it at time	1	7%
3	43%	other	4	29%

SMALLNo. %SLARGENo. %L

PART III.

1. In your opinion, is there a difference between parent conference and parent counseling? (38)

7	50%	no	6	25%
7	50%	yes	18	75%

2. In your opinion, of what should parent counseling primarily consist? (27)

7	54%	information	5	36%
3	23%	training	8	57%
2	15%	adjustment	1	7%
1	8%	do not know		

3. Are you satisfied with parent counseling as offered? (38)

5	33%	yes	6	26%
3	20%	no	6	26%
7	47%	did not participate	11	48%

4. Were you asked what counseling would be helpful to you as parent of handicapped student? (40)

2	13%	yes	4	17%
14	88%	no	20	83%

SMALLNo. %SLARGENo. %L

5. Best describe helpfulness to you as parent of handicapped student, of counseling program for parents of handicapped students. (37)

8	53%	do not know of program	13	59%
1	7%	exists in name only	1	5%
1	7%	minimally helpful	1	5%
		barely helpful	1	5%
1	7%	moderately helpful		
3	20%	quite helpful	3	14%
1	7%	very helpful	1	5%
		extremely helpful	2	9%

6. Do you believe in concept of parent counseling as defined in regulations of P.L.

94-142? (40)

10	63%	yes	11	46%
2	13%	no	2	8%
4	25%	do not know	11	46%

Appendix I

Counseling Parents of Handicapped Children by Selected School
Divisions in Virginia, School Year 1982-83: Selected Paired
Responses of Superintendents, Parents Selected by Superin-
tendents, and Parents Selected by Chairpersons of Special
Education Advisory Committees

(Condensed questions and response categories. Special educa-
tion population 500 or less = small (S); 501 or more = large
(L).

<u>Super</u>			<u>Super-par</u>		<u>SEAC-par</u>	
<u>%S</u>	<u>%L</u>		<u>%S</u>	<u>%L</u>	<u>%S</u>	<u>%L</u>
<u>1. What parent counseling sought</u>						
<u>to do? (Multiple response)</u>						
31	35	understand special needs	24	18	30	20
31	30	info. about child develop.	12	29	20	14
38	35	info. about child's progress	24	38	30	43
		other	24	4	10	6
		do not know	18	11	10	17
<u>2. Who had primary responsibility</u>						
<u>for counseling parents of han-</u>						
<u>dicapped students?</u>						
	50	school counselor		5		
75	50	school psychologist	11	9	14	6
		social worker	22			
		speech/language	11	14		
25		teacher	11	50	57	67
		do not know	44	23	29	28
<u>3. Is parent counseling on I.E.P.?</u>						
33	29	yes	25	33	27	16
67	71	no	33	41	40	52
		do not know	42	26	33	32

<u>Super</u>			<u>Super-par</u>		<u>SEAC-par</u>	
<u>%S</u>	<u>%L</u>		<u>%S</u>	<u>%L</u>	<u>%S</u>	<u>%L</u>
		4. <u>How parents learned of availability of counseling for parents of handicapped?</u>				
7	6	newspaper/radio/tv				
29	24	written notices	27	10	9	14
36	24	telephone		5		
29	41	face-to-face invitations	27	10	9	10
	6	from another parent			9	5
		other		20	9	5
		did not learn	46	55	64	67
		5. <u>Who initiated counseling for parents of handicapped?</u>				
		parent		4	8	8
100	50	school division	25	4	15	8
	50	school and parents	38	48	23	8
		not applicable	25	26	39	58
		do not know	13	17	15	17
		6. <u>Regular schedule of parent counseling?</u>				
33	29	yes	9	35	23	14
67	71	no	64	39	62	55
		do not know	27	27	15	32
		7. <u>Average number of times per month parent of handicapped student scheduled for counseling?</u>				
25	14	less than 1	33	44	29	50
75	86	1 or more	33	17	29	17
		not applicable	33	39	43	
		do not know				33

<u>Super</u>			<u>Super-par</u>		<u>SEAC-par</u>	
<u>%S</u>	<u>%L</u>		<u>%S</u>	<u>%L</u>	<u>%S</u>	<u>%L</u>
		8. <u>How was counseling offered?</u>				
60	60	individual	30	44	42	.29
		group	10		8	
40	40	individual and group	20	7	8	18
		do not know	40	48	42	53
		9. (Supers) <u>How were counseling topics chosen for parents of handicaped students?</u>				
20	17	school staff				
	17	parents				
80	67	both				
		(Parents) <u>Did you participate in choosing topics of counseling for parents of handicapped children?</u>				
		yes	10	19	14	22
		no	90	82	86	78
		10. <u>Best describe parent counseling as provided/received.</u>				
		(Multiple response)				
39	26	information	9	4	20	5
31	37	training	46	50	13	14
31	37	adjustment		7	13	5
		not applicable	46	39	53	76
		11. <u>In your opinion, is there a difference between parent conference and parent counseling?</u>				
33	43	no	46	29	50	25
67	57	yes	55	71	50	75

<u>Super</u>			<u>Super-par</u>		<u>SEAC-par</u>	
<u>%S</u>	<u>%L</u>		<u>%S</u>	<u>%L</u>	<u>%S</u>	<u>%L</u>
		12. <u>In your opinion, of what</u>				
		<u>should parent counseling pri-</u>				
		<u>marily consist?</u>				
33	17	information	13	52	54	33
33	50	training	38	30	23	53
33	33	adjustment	38	9	15	7
		do not know	13	9	8	7
		13. <u>Are you satisfied with parent</u>				
		<u>counseling as provided?</u>				
60	17	yes	40	36	33	26
40	83	no	30	28	20	26
		did not participate	30	36	47	48
		14. (Supers) <u>How was content of</u>				
		<u>parent counseling chosen?</u>				
		(multiple response)				
17	8	needs assessment				
50	39	employee of schools				
33	54	parent of handicapped				
		(Parents) <u>Were you asked what</u>				
		<u>counseling would be helpful</u>				
		<u>to you as parent of handi-</u>				
		<u>capped student?</u>				
		yes	22	32	13	17
		no	77	68	88	83

<u>Super</u>			<u>Super-par</u>		<u>SEAC-par</u>	
<u>%S</u>	<u>%L</u>		<u>%S</u>	<u>%L</u>	<u>%S</u>	<u>%L</u>
		15. <u>Best describe helpfulness of</u>				
		<u>parent counseling program.</u>				
		did not exist/do not know				
		of any	50	44	53	59
		offered not implemented/				
		exists in name only	8	4	7	5
40	17	helps small number/mini-				
		mally helpful		8	7	5
		helps some parents/barely				
60	67	helpful				5
		helped about half/mode-				
		rately helpful	17	8	7	
	17	helps most/quite helpful	17	20	20	14
		successful/very helpful	8	12	7	5
		exemplary/extremely helpful		4		9
		16. <u>Do you believe in concept of</u>				
		<u>parent counseling as defined</u>				
		<u>in P.L. 94-142?</u>				
83	86	yes	46	52	63	46
17	14	no		4	13	8
		do not know	55	44	25	46

Appendix J

Counseling Parents of Handicapped Children by Selected School
Divisions in Virginia, School Year 1982-83: Selected Paired
Responses by Superintendents and Parents

(Condensed questions and responses categories. Number of responses is in parentheses.)

<u>Superintendents</u>		<u>Parents</u>
(13)	1. <u>What parent counseling sought to do?</u>	(117)
92%	understand special needs of child	21%
85%	information about child develop.	21%
100%	information about child's progress	36%
	other	9%
	do not know	14%
(6)	2. <u>Who had primary responsibility for counseling parents of handicapped?</u>	(63)
17%	school counselor	2%
67%	school psychologist	10%
	school social worker	3%
	speech/language	6%
	teacher	51%
	do not know	29%
(13)	3. <u>Is parent counseling on I.E.P.?</u>	(78)
31%	yes	26%
69%	no	42%
	do not know	32%
(13)	4. <u>How parents learned about availability of counseling for parents of handicapped students?</u>	(63)
15%	newspaper/radio/tv	
62%	written notices	14%
69%	telephone	3%
85%	face-to-face invitation	13%
8%	from another parent	3%
	other	8%
	did not learn	59%

<u>Superintendents</u>		<u>Parents</u>
(10)	5. <u>Who initiated counseling for parents of handicapped students?</u>	(56)
	parent	5%
70%	school division	11%
30%	school and parents	32%
	not applicable	36%
	do not know	16%
(13)	6. <u>Regular schedule of parent counseling?</u>	(72)
	yes	22%
31%	no	51%
69%	do not know	26%
(11)	7. <u>Average number of times per month parent of handicapped student scheduled for counseling?</u>	(37)
	less than 1	27%
18%	1 or more	32%
82%	not applicable	35%
	do not know	5%
(10)	8. <u>How was parent counseling offered?</u>	(66)
	individual	38%
60%	group	3%
40%	individual and group	12%
	do not know	47%
(11)	9. (Supers) <u>How were topics chosen for counseling parents of handicapped?</u>	
	staff	
18%	parents	
9%	both	
73%		
	(Parents) <u>Did you participate in choosing topics of counseling for</u>	(69)
	yes	17%
	no	83%

<u>Superintendents</u>		<u>Parents</u>
(11)	10. <u>Best describe parent counseling as provided/received.</u>	(75)
83%	information	8%
92%	training	32%
92%	adjustment	6%
	not applicable	53%
(13)	11. <u>In your opinion, is there a difference between parent conference and parent counseling?</u>	
39%	no	34%
62%	yes	66%
(9)	12. <u>In your opinion, of what should parent counseling primarily consist?</u>	(58)
22%	information	43%
44%	training	36%
33%	adjustment	14%
	do not know	9%
(11)	13. <u>Are you satisfied with parent counseling as provided/received?</u>	
36%	yes	33%
64%	no	26%
	did not participate	41%
(13)	14. (Supers) <u>How was content of parent counseling chosen? (Mult. resp.)</u>	
23%	needs assessment	
85%	employee of schools	
85%	parent of handicapped	
	(Parents) <u>Were you asked what counseling would be helpful to you as parent of handicapped student?</u>	(77)
	yes	22%
	no	78%

SuperintendentsParents

(11)

15. Best describe helpfulness of
parent counseling proram.

(74)

	did not exist/know of none offered not implemented/ exists in name only	51%
27%	helps small number/minimally helpful	5%
64%	helps some/barely helpful helps about half/moderately helpful	1% 7%
9%	helps most/quite helpful successful/very helpful exemplary/extremely helpful	18% 8% 4%

(13)

16. Do you believe in concept of parent
counseling as defined in P.L. 94-142?

(78)

85%	yes	51%
15%	no	6%
	do not know	45%

Appendix K

Bernice Wilson Munsey
EDUCATIONAL CONSULTANT

WASHINGTON, D.C. 20016

[Name]
Superintendent
[Address]

Dear Dr. [Name]:

Enclosed is a copy of a questionnaire completed by the [Name] Public Schools. Your participation in the research I conducted as part of the work toward my doctorate at Virginia is much appreciated.

My committee has requested that I follow up on the earlier research. I would appreciate very much your responding to the following two questions:

1. Is your response to item I.2. currently accurate? The item reads: "Was parent counseling an integral part of the regular school program for handicapped children during school year 1982-83?" Your response was 'yes'.

_____ Yes, the response is currently accurate.

_____ No

2. If your response to question #1 is 'yes', may I make an appointment to meet with the persons in the [Name] Public Schools who are most involved in the counseling of parents of handicapped students? (administrator, counselor of parents, parents)

_____ Yes Suggested dates: _____

_____ No

All responses will, of course, be confidential. A self-addressed stamped envelope is enclosed for return.

With kind regards.

Sincerely,

Bernice W. Munsey, M.A., C.A.G.S.

Appendix L

COUNSELING PARENTS OF HANDICAPPED STUDENTS - ISSUES
DISCUSSED DURING INTERVIEWS WITH SCHOOL PERSONNEL

- How many identified students are in special education?
What percentage is that of the total school population?
When did the parent counseling program begin?
What was the initial rationale for parent counseling?
Who initiated the parent counselingg program?
How were parent counseling topics chosen?
How were parents selected for counseling?
Who counseled the parents?
Who has primary responsibility for parent counseling?
What other duties does the parent counselor have?
Where is the cost of parent counseling in budget?
How is parent counseling defined by school division?
What does parent counseling seek to do?
Is parent counseling on I.E.P. of all students?
How are parents advised of availability of counseling?
Is there a regular schedule of parent counseling?
Is counseling individual or group?
How are topics chosen? What are topics?
Is there difference between conference and counseling?
Are you satisfied with current parent counseling?
What are plans for parent counseling in the future?

Appendix M

COUNSELING PARENTS OF HANDICAPPED STUDENTS - ISSUES
DISCUSSED DURING INTERVIEWS WITH PARENTS

What is age of handicapped child?

What is handicapping condition as identified on I.E.P.?

What is school placement of handicapped child?

What special education services are provided for child?

How is parent counseling defined by school division?

What does parent counseling seek to do?

What counsels parent?

Is parent counseling identified on child's I.E.P.?

How did parent learn of availability of counseling?

Who initiated parent counseling?

Was there a regular schedule of parent counseling?

Was counseling individual or group?

Did parent participate in choosing counseling topics?

What have parent counseling topics been?

Is there difference between conference and counseling?

Is parent satisfied with parent counseling received?

If parent could plan program, what would the parent
counseling program involve?

Appendix N

Bernice Wilson Munsey
EDUCATIONAL CONSULTANT

WASHINGTON, D.C. 20016

June 24, 1985

Commonwealth of Virginia
Department of Education
Office of Special Education
P.O. Box 60
Richmond, VA 23216

Dear [Name]:

I appreciate your taking the time to meet with me June 17th to discuss my study of the counseling of parents of handicapped children in Virginia. I look forward to hearing from you regarding the possibility of a follow-up survey of school divisions which would provide data useful to the Department of Education and to my study regarding the definition and provision of parent counseling.

It would also be helpful to my study to know how the Department of Education defines 'parent counseling' and what is its commonly accepted usage of the term 'parent counseling'. I enclose the "Glossary" sections of the Regulations Governing Special Education Programs for Handicapped Children and Youth in Virginia (effective January 1, 1985) which make reference to parent counseling.

It was so nice to see you again.

With best wishes.

Sincerely,

Bernice W. Munsey

Bernice Wilson Munsey
EDUCATIONAL CONSULTANT

WASHINGTON, D.C. 20016

July 15, 1985

Commonwealth of Virginia
Department of Education
Office of Special Education
P.O. Box 60
Richmond, VA 23216

Dear [Name]:

Thank you once again for meeting with me to discuss my research concerning the counseling of parents of handicapped students in Virginia.

I know these things take time to get approved, or disapproved, but I would appreciate a response as soon as possible. My doctoral committee hopes to meet this month. If the survey cannot be "sponsored" by the Virginia Department of Education, the committee has a second choice of action which they want me to pursue. Would it be possible for you to give me a response from the Department one way or the other at this time or a progress report?

With best wishes.

Sincerely,

Bernice W. Munsey

Appendix 0



UNITED STATES DEPARTMENT OF EDUCATION
WASHINGTON, D.C. 20202

Charles W. Humes, Ed.D.
College of Education
Virginia Polytechnic Institute
and State University

Dear Dr. Humes:

Drs. Liebergott, Tringo, and I met with Mrs. Munsey on Thursday, November 21, 1985, to discuss her dissertation survey. It was our understanding that the committee was concerned that her definition of parent counseling might not be consistent with Federal law, and her data were not current, and that we were being asked primarily to address those two questions. I think both questions can be answered in the affirmative; her definition is consistent and her data are useful.

Although the survey was started several years ago, we feel that it is still valid for baseline purposes, and that it is unlikely that the major findings have changed, e.g., 75% of the parents were not aware of their right to counseling. This is even more significant, since it is likely that the parent selection procedure would tend to favor parents who were active or knowledgeable about the law. Similarly, the finding that there were changes in the provision of counseling services during the course of the study was very interesting. Rather than indicating that the findings are out of date, these changes suggest that the provision of counseling services is not institutionalized, and is dependent on the interests and availability of a particular person in a critical position.

If you have any specific questions you would like to discuss further, please feel free to call me.

Sincerely,

Director
Division of Personnel Preparation

cc: Bernice Munsey

Vita

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