## NEEDS OF MILITARY FAMILIES: FAMILY AND EDUCATOR PERSPECTIVES

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By

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#### **Abstract**

This qualitative research study explores the problems military families, educators, and school districts have in building positive and effective partnerships. It is anticipated that a better understanding of the unique challenges encountered by military families and their children with developmental delays or exceptionalities will lead to more effective interventions. By understanding military families' needs and improving communication, more satisfying partnerships can be established, which in turn is anticipated to positively impact the well-being of the children with exceptionalities of military families. Little research exists to guide educators in finding effective strategies for supporting military families and their children with exceptionalities, particularly for young children (birth to eight years of age). Investigating programs and interventions which are effective for this age group is of particular importance, given that slightly more than 500,000 children of military families are under five years of age. Gaining a greater understanding of how to support these families is timely. We know from our work with families of young children with special needs that families are more satisfied and achieve a greater sense of empowerment when they are included as meaningful partners and respected for their knowledge. This family-centered approach, builds a "partnership of equals," collaborating to address challenges and build resources with families. For the military family, each new challenge taps new strengths and generates unique ideas for overcoming obstacles. This study suggests partnerships between the school leadership and military command could assist families with the challenges of relocation and deployment when they also have children with exceptionalities. Thus, implementing a family-centered approach in our work with military families should support the family as they work to enhance their family and child outcomes, build resilience, and achieve their long term goals with a sense of fulfillment.

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#### **Chapter 1: Introduction**

Military families face many of the everyday challenges that civilian families experience. Hectic career demands conflict with parenting, family time, rest, recreation, and community involvement. However, military families face several unique challenges that civilian families may not understand. Relocations, deployment, parental separation, and recovery from post-traumatic stress disorder are only a few unique stressors that compound everyday family life in the military.

Families have reported the various effects of frequent and unpredictable military relocations. In a recent Specialized Training of Military Parents report (2003), it was reported that some families may experience relocations every eighteen months. These frequent moves have the potential to foster tensions within the family units (i.e., children and spouses) and across multiple extended family members. Specifically, children may respond to family moves in the following ways: they may angrily protest the move (Bradshaw, Sudhinaraset, Mmari, & Blum, 2010), struggle to reestablish friendships, and experience difficulty adjusting to their new academic environment (Orthner, 1990). These challenges are common, as relocations often trigger a stressful adjustment period for families; starting before a move and continuing for a time after the move (Cornille, 1993). Adjustment issues spouses may experience during relocations may be related to job opportunities. Often these frequent moves cause disruptions in the development of the spouse's career (Eby, DeMatteo, & Russell, 1997). In addition, spouses report difficulty finding employers willing to invest in training an individual they know will likely move again (Drummet, Coleman, & Cable, 2003). Although families have reported these challenges, each move the family experiences is unique due to the place the family may be going

(e.g. back home to extended family or to the next military base), resources available, ease of access to resources, and social supports available to the family.

When families relocate to a military base, stress levels can be mediated by a community of people that are experiencing the same challenges. In the military culture, service members and families are trained and encouraged to take care of each other. Therefore, it is common for new families to be mentored by more experienced military families when they move to a military base (Siegel & Davis, 2013). When the family has a supportive community that assists the family in accessing needed resources all family members benefit.

Bradshaw and colleagues (2010) found that children who learn to cope with relocations and adapt to new environments exhibit a better ability to manage other stressors positively, such as deployment. In addition, stressors may be mediated by resources and supports families are able to access when they relocate to an army base or back "home" to extended family. Although unpredictable moves may be a source of stress for families, managing small relocation challenges can bolster the families' resilience during deployments.

The stress of deployment and parental separation can take a toll on family members and children. Often the non-military population does not fully comprehend what deployment means for the military family. Deployment for the purpose of this study was defined as the *time a military member is moved into action for the purpose of a mission for a time period lasting three to eighteen months*. It is important to understand that the length of deployment varies in each branch of military service. Many military service members may be deployed for months at a time overseas or within the United States (Allen & Staley, 2007). Additionally, it is important to understand that during modern deployments military service members do not have clear front lines of combat and no one is exempt from the effects of war (Halvorson, 2010). Therefore,

service members and their families have the potential to deal with more unique challenges associated with combat stress. For example, today up to two million U.S. children have been exposed to wartime deployment (Siegel & Davis, 2013). Not surprisingly, the number of challenges children faced were strongly related to the total number of months a parent was deployed over three years (Chandra et al., 2010). Although all military families may experience a few challenges, some military families may require additional supports to help them access resources and manage the separation deployments create.

Many community members, educators, and families are beginning to speculate how they can minimize the negative effects of deployment and parental separation on our youngest children. First, we know that younger parents, lower ranking enlisted service members, and those married a shorter period of time, are at higher risk for exhibiting problems during a deployment (Siegel & Davis, 2013). Second, Siegel and Davis (2013) found that during these deployment periods, child maltreatment was three times higher, neglect was four times higher, and physical abuse was two times higher for all military parents. Third, for children, parental separation is a loss that can create fear, and manifest anxiety, which has been associated with behavioral problems (Hillenbrand, 1976; Jensen, 1999; Jensen, Grogan, Xenakis, & Bain, 1989; Jensen, Martin, & Watanabe, 1996), and may disrupt brain development in children (National Scientific Council on the Developing Child, 2010). Therefore, urgency exists for communities and educators to provide supports for families and children experiencing the unique challenges of lengthy and multiple deployments (Park, 2011).

In addition, the family member being deployed may sustain physical injuries or a post-traumatic stress disorder which carries additional burdens that can cause the family to be more cohesive or pulled apart. Recovering from physical injuries or post-traumatic stress disorder

(PTSD) compounds the unique challenges families are already facing with relocations and deployments. The stress that a family experiences when a family member is recovering from an injury or PTSD may have a significant impact on the functioning of the family. We know there is a sharp rise of PTSD incidences as the number of deployments or number of months a service member is deployed rises (Gooddale, Abb, & Moyer, 2010). For the service member, PTSD is exhibited by persistent sleep disturbance, nightmares, irritability, hyper-vigilance, and sensitivity to noise and stimuli. For families, PTSD may cause: changes in family traditions, less consistency in family routines, adverse effects on the unity between parents, decreased expressiveness in personal relationships, greater conflict with family members, and reduced problem solving ability (Davidson & Mellor, 2001; Solomon & Mikulincer, 1992). While all these unique military challenges may bolster children's resilience and ability to readily adjust to change, both the parents and their children are likely to need access to support and resources in order to ensure positive outcomes.

Having access to social support and access to resources becomes especially important when children of military families face learning challenges. If typical military families experience the previously mentioned stressors, then picture the additional stress a military family may encounter when the children in the family have special needs. Consider fitting multiple hospital trips into already packed days. A 2003 report, produced by the Specialized Training of Military Parents (STOMP) project, provides families with children who have exceptionalities pointers for successfully navigating a military relocation. Families are encouraged to plan ahead, make network connections early, and use their checklist in order to make a smoother transition. They are warned within this report that it may take the family six to twelve months for their child to receive all of their usual services. Moving schools means learning how to navigate special

education services in yet another state in which the rules may change. Each move may mean additional evaluations, changes in the specifics of types of services provided, and funding of those services. Considering that a family may move every eighteen months and the time it takes a family to reestablish special services a child may only receive consistency of service for six months before they move to yet another new academic system.

In addition to establishing special education services, some military families contend with the fear of losing rank or a promotion due to registering with the Exceptional Family Member Program (EFMP), making requests for frequent leaves, and needing to take time off to address family concerns (Gooddale, Abb, & Moyer, 2010). The EFMP program ensures the family member's (i.e., spouse, child) medical and educational needs are documented; the service member's next duty station has access to services or supports required by the exceptional family member with exceptionalities (www.militaryonesource.mil/efmp/overview).

More research is needed to inform our practice and support of military families and their children with exceptionalities. However, to understand what would constitute higher quality supports it may be beneficial to move beyond identifying the challenges that military families face to explore the strengths they exhibit and how those strengths can be used in our family-centered practices. Currently the literature tends to take a military family syndrome prospective and focus exclusively on the negative impacts indicating children of military families have a higher than normal incidence of behavioral or mental problems (LaGrone, 1978). This military family syndrome approach also indicates that children's increase in behavioral or mental concerns is related to the military authoritarian style of parenting, family conflicts, and frequent relocations (Ryan-Wenger, 2001). While there is evidence that children of parents who were deployed to Iraq and Afghanistan experienced more behavioral anxiety issues than was reported

in other studies conducted during other war times (Esqueda, Astor, & De Pedro, 2012), we do not have evidence to support the position that military families and their children experience a higher rate of mental and behavioral challenges than their civilian peers (Jensen, Lewis, & Xenakis, 1986). It is important to remember that individual family attributes, needs, characteristics, histories, and coping capacities are unique and evolving rather than static (Jensen, Lewis, & Xenakis, 1986). Aspects of life change in every family and families respond to military stressors a variety of ways. Currently we do not fully understand which family characteristics or factors might predict which families will experience difficulties in managing military challenges.

Literature published during the last several decades in the area of families and children with special needs demonstrates a clear shift to a new way of thinking both in terms of how research is conducted and how to best frame supports and interventions for families and their children with special abilities. A significant body of literature on vulnerable families now advocates using strength-based, family-centered practices (Turnbull, et al., 2007). This same shift to strength-based, family-centered practice is proposed here for military families. Figure 1 provides a visual of the conceptual framework for the application of a strength-based, family-centered practice. Specifically, in this model both strengths the military family brings and strengths present in the military culture and community would be capitalized upon. Furthermore some literature is beginning to focus on understanding the range and types of challenges encountered by families as a part of each phase of deployment; including identifying typical age appropriate responses young children might experience during each phase of deployment (e.g., Bradshaw, Sudhinaraset, Mmari, & Blum, 2010; Fitzsimons & Krause-Parello, 2009; Harrison & Vannest, 2008; Park, 2011).

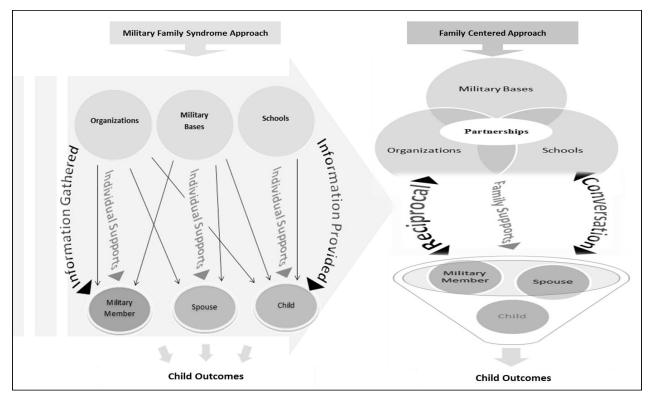


Figure 1. Conceptual framework: Shifting our support approach from a military family syndrome to a strength based, family-centered approach

As a field of early childhood special education, the National Association for the Education of Young Children's (NAEYC, 2009), clearly guides professionals to recognize that young military children, like ALL children, are best supported in the context of their military family, culture, and community. Additionally, early educators are strongly encouraged to respect the uniqueness of each military family and establish an unconditional trusting relationship with the family. Use of these guidelines for establishing a positive family professional partnership have the potential to change the supports provided to military families; thus leading to improved outcomes for the family and child. Moving towards developing a partnership of equals, collaborating to address challenges and building resources with families, should result in greater satisfaction for both the educators and families (Turnbull et al., 2007). More significantly, a

satisfying collaborative partnership should lead to better long-term outcomes for military families and their young children with exceptionalities.

#### **Statement of the Problem**

Little research exists to guide educators in finding effective strategies for supporting military families and their children with exceptionalities, particularly for young children (birth to eight years of age). Investigating programs and interventions, which are effective for this age group is of particular importance, given that slightly more than 500,000 children of military families are under five years of age (Park, 2011). Furthermore, we know that approximately six percent of children between birth to five years of age have a disability or receive special services in the United States (Brault, 2008). At that same incidence rate there may be approximately 35,000 military children under the age of five years identified with a disability or receiving special services, but only 650 of these children with exceptionalities attend Department of Defense schools. Thus, a majority of the 35,000 children under the age of five receiving special services attend civilian schools. Therefore, it is very likely that educators working in school districts near military bases could benefit from additional knowledge about how to best support the social-emotional and academic needs of children from military families. This indicates the need to close the educational research gap regarding military children in this impressionable early childhood age living within our communities. In 2004, the National Military Family Association reported an increased need for high quality hourly child care services for all children including an increase child care need for children with exceptionalities. Not to mention, an increase in requests for respite child care when a parent simply needs a break. We must begin to understand how early educators can support military families and their children by including

military families in our conversations and communications about developing family-centered practices.

# Significance of this Research Study

The traditional military syndrome approach to working with military families originated from LaGrone's research (1978), reporting that children in a military family experience a higher rate of mental health and behavioral concerns than other children. This approach to fixing the military family provides supports to address the effects of deployment on the individual members of the family experiencing a problem. Specifically, individuals within the military family may receive counseling services to address aggression, depression, or behavioral problems. These individual focused supports may produce immediate and short-term outcomes for the individuals. However, more research is required to determine the effective characteristics of programs that support military families (Chandra et al., 2011). Furthermore, additional research concerning the needs of military families is required in order to provide and maintain supports for young children with exceptionalities and their families.

Moving toward a more family-centered approach should involve all systems partnering together in reciprocal conversations and collaborative efforts to provide families support. This proactive and preventative approach has the potential to include the schools and educators in conversations with families about developing supports that meet family needs. We know from our work with families of young children with exceptionalities that families are more satisfied and achieve a greater sense of empowerment when they are included as meaningful partners and respected for their knowledge (Turnbull et al., 2007). This approach of using family strengths to develop family-centered practices moves away from a deficit view of the family who needs our help toward creating meaningful collaborative partnerships. This type of family-professional

partnership addresses challenges families face and involves their perspective in building resources that families may be more likely to access. For the military family, each new challenge taps new strengths and generates unique ideas for overcoming those obstacles. Imagine implementing a strength-based approach in our work with military families and their children; which may build resilience, enhance family and child outcomes, and provide them with a sense of fulfillment (Bennett, Deluca, & Bruns, 1997; Bennett, Lee, & Lueke, 1998; Trivette, Dunst, Boyd, & Hamby, 1996; Soodak & Erwin, 2000). By engaging in conversations and reciprocal partnerships, families and professionals should achieve a greater satisfaction and children should achieve better long-term outcomes. As one military general stated, "This is a matter of national security. Soldiers should not have to worry about the education and mental health of their children while serving on the battlefield (LTG W. Caldwell, personal communication, April 5, 2013)."

## **Research Goals and Questions**

By understanding military families' needs and improving communication more satisfying partnerships can be established, which in turn, could positively impact the well-being of military children with exceptionalities. Therefore, three research questions guide this study and their relationship to the overall goal of the study is depicted in Figure 2 as the logic model. First, do educators working on or near a military base routinely receive any professional development regarding working with military families? If so, what is the content and how is it delivered or accessed? Second, what are the professional development needs of educators working with military families? Third, how do military families want educators to support them?

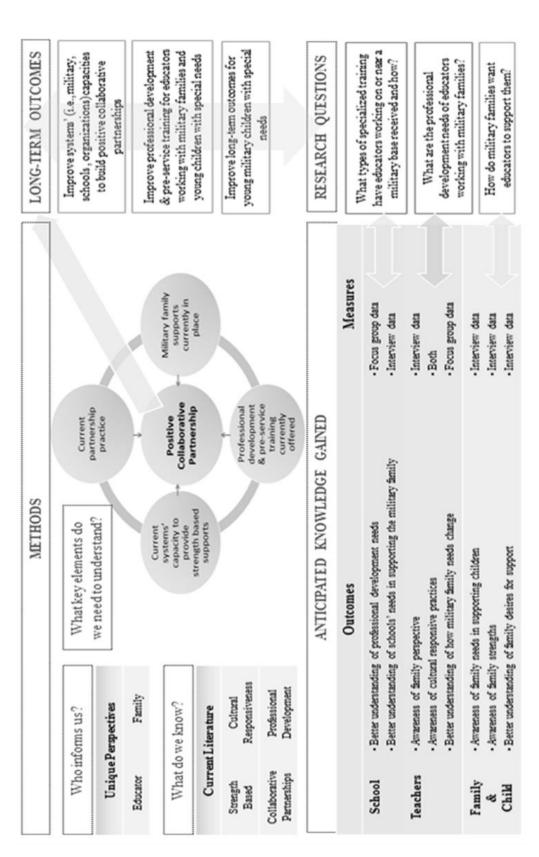


Figure 2. Logic model illustrates the relationship between the guiding research questions and this study's overarching goal.

# **Chapter 2: Literature Review**

LaGrone (1978) first defined "military family syndrome" as military families exhibiting above average mental health issues and challenges. However, other researchers have argued against this view of military families requiring more mental and behavioral therapy than civilian families (Jensen et al., 1986). For children with exceptionalities and their military families, the family-centered practices approach with a foundation in resilience rather than deficit is at the center of recommendations being made by researchers and organizations (Allen & Petr, 1996; Sandall et al., 2005; NAEYC, 2009; NMFA, 2004; Dunst & Trivette, 2007; Turnbull et al., 2007). The family-centered practices approach has a variety of definitions but is generally viewed as educators collaborating with families to provide resources and supports formally and/or informally with the purpose of empowering families in their role as decision maker (Dunst & Trivette, 2007; Turnbull et al., 2007). This chapter will review relevant literature on the topics of:

- The value of understanding families' culture,
- Understanding military culture from an ecological perspective,
- Partnerships with families in early childhood special education,
- Historical views about the impact of military life on children and their families, and
- Current recommendations for supporting military families.

These topics will provide an understanding of current literature on supporting children with exceptionalities and their military families using a family-centered approach.

## The Value of Understanding Families' Culture

Early educators must be aware of the culture of families they serve. More and more early educators are working with culturally and linguistically diverse families that may not speak

English as their primary language in the home. Due to the growing culturally and linguistically diverse population of young children in our schools it is increasingly important to improve culturally responsive practices (Klingner et al., 2005; U.S. Department of Commerce, 2000). Optimal learning opportunities are created when professionals face the challenge of meeting the diverse developmental, linguistic, cultural, and educational needs of the young children they serve (Sandall et al., 2005; NAEYC, 2009). Partnerships with families are created when there are culturally responsive educational systems that support all young children to excel in academic endeavors by valuing and using children's culture, language, heritage, and experiences to facilitate their learning and development (Gay, 2000; Nieto, 2000; Valenzuela, 1999). Young children's lives are enriched by exposure to a variety of experiences that broaden their perspectives and validate each person's uniqueness and sense of belonging to their community (Nichols, Rupley, Webb-Johnson, & Tlusty, 2000). When educators attempt to develop the individual self-worth of each child, all children and their families benefit.

It is important for educators to understand the benefits of building upon children's prior knowledge, including cultural information, while making connections to new knowledge and experiences within the school setting (Banks, 2006). Culturally responsive educators build bridges between the family's culture and the culture of early education classrooms in a manner that maintains children and their families' identity (Barrera, Corso, & Macpherson, 2003). Furthermore, children's social emotional development may be improved by providing culturally responsive instructional practices that support a connection between the home and the early childhood program (Richards, Brown, & Forde, 2007). Moreover, children with exceptionalities and their families are empowered to meet the goals they have determined to be important when the educator uses elements of the family's culture while supporting each individual's needs

(Allen & Petr, 1996; Turnbull et al., 2007). In much the same way, military families require early educators to understand the unique qualities of the military culture when designing family-centered practices.

# **Understanding Military Culture from an Ecological Systems Perspective**

Ecological systems models consider the connections and multiple levels of influence between people and their environments. By organizing military culture within this theoretical model educators may develop a better understanding of the complexity of interactions between the military families, their children with exceptionalities, and the community in which they live and work. Brofenbrenner's ecological systems theory (1979) which will be used to organize the unique characteristics of military culture consists of five levels: a) Chronosytem: Cumulative experiences and events; b) Macrosystem: Belief systems and ideology; c) Exosystem: Distal events that directly impact the child; d) Mesosystem: Interactions between microsystems; and e) Microsystem: Proximal environments that directly impact the child.

Developing an awareness of the unique characteristics of the military culture requires us to explore the dominant values and complexities of each system within the military culture. The information presented in this chapter is influenced by respect, curiosity, and humility. As each system is described certain common characteristics are described that may not communicate all cultural attributes of military families. Understanding that each family will have their own unique culture, this chapter is intended to share general information that is known about the military culture in order to help others understand, appreciate, and value the complexities of families serving in the military.

**Chronosystem: Cumulative experiences and events.** Military families and their children with exceptionalities experience multiple relocations and deployments that may have

significant effects on the family (Halvorson, 2010). For example, multiple relocations can build resilience in young children and positively augment their ability to cope with parent separation during deployments (Bradshaw et al., 2010). However, evidence has shown that these frequent and multiple relocations, or cumulative effects, can lead to children feeling socially disconnected, frustrated with their new academic environment, and resentful toward their parents (Bradshaw et al., 2010; Orthner et al., 1990). In addition, to these cumulative effects of relocation, there are cumulative effects of the multiple deployments active duty service members complete. For children, behavior problems, anxiety, and depression episodes increase as the number of months a service member is deployed increases (Chandra et al., 2010; Jensen, Martin, & Watanabe, 1996; Seigel & Davis, 2013). Therefore, the military, as well as other organizations have worked to provide resources within the military community to strengthen families' abilities to positively cope and successfully manage the challenges of multiple relocations and deployments. Unfortunately, research to date has indicated that only half of the participants in these programs rated them as beneficial or helpful to their family (Orthner, Jones-Sanpei, & Williamson, 2004). More information is clearly needed.

Macrosystem: Belief systems and ideology. Military families are strongly influenced by the culture, ethics, and customs of the military branch they serve and the community in which they live. For example, military service members adhere to the ethics of following orders, codes of conduct, and proper uniform attire (Halvorson, 2010). They are trained to be disciplined in their actions and words and expected to control their emotions both on and off duty even under challenging circumstances when they may be lacking sleep, physically exhausted, and generally under extreme stress. Military spouses and children are also expected to be disciplined in their actions. The military family informally carries the rank of their service member, which comes

with unwritten expectations for behavior and pressure for the family to behave and cope with the military challenges in the same manner as their service member (Drummet, Coleman, & Cable, 2003). Army service members and their families are expected to uphold the values of Loyalty, Duty, Respect, Selfless Service, Honor, Integrity, and Personal Courage (Halvorson, 2010). They are dedicated to this type of lifestyle and work together to overcome the challenges.

Patriotism means much more to the military family than just attending an annual ceremony or event. While patriotism may be exhibited during patriotic events by service members; as these events offer service members and their family opportunities to show respect to veterans, demonstrate their pride of service, and honor their country and leaders; however, for the military family it is much more. That is summarized in a quote by Adlai E. Stevenson, Jr., "Patriotism is not a short and frenzied outburst of emotion but the tranquil and steady dedication of a lifetime." (Halvorson, 2010, p. 15)

Exosystem: Distal events that directly impact the children. Although children and their families may never see where their parent has been deployed or fully understand war, the distal environment can impact the child's development. This is especially true in today's reality of war in which combat lines become blurred with the potential that every service member may experience front line combat (Halvorson, 2010). War has long-term effects on the men and women who fight and on the civilian population directly and indirectly involved with them. The incidence of post-traumatic stress disorder (PTSD) rise abruptly with increases in the number of deployments, number of months deployed, and amount of time the service member has at home between deployments (Goodale, Abb, & Moyer, 2012; Holmes, Rauch, & Cozza, 2013).

Families with young children face many challenges including increased stress on the caregiver left behind and the ability of the deployed parent to reintegrate back into a parental role after

their own trauma of deployment and extended time in a non-parental role (Chartrand, Frank, White, & Shope, 2008). Therefore, given the current nature of deployments service members and their families are in need of additional resources and supports, and potentially different types of supports during the reintegration phase of deployment (Drummet, Coleman, & Cable, 2003).

Young children of military family members have been reported to experience effects of war and military systems throughout their lifetime. Children's behavioral responses have been reported to frequently mirror the depressive response exhibited by their mothers (Chandra et al., 2010; Drummet, Coleman, & Cable, 2003; Gorman et al., 2010). In addition, girls have been reported to have more negative effects related to the deployment of a father. Symptoms that children and spouses demonstrate have been correlated with the service member's deployment to a known combat zone (Kelley et al., 2001). Understanding this aspect of military culture and potential influences the distal environment of war can have on children and the entire family as a unit should prompt additional research and development of family centered practices that can support families through these difficult challenges. The goal of such services should be to strengthen the parent-child relationships and minimize the combat stress during post-deployment in order to further strengthen the family unit (Chartrand et al., 2008).

Mesosystem: Interactions between microsystems. The military community interacts with all aspects of young children's home environment, school environment, and social environment. For families, military life offers a sense of community with clearly defined rules and expectations (Goodale, Abb, & Moyer, 2012). Service members share a strong bond with the individuals with whom they serve beside during military operations. For many, the bond of brotherhood throughout their military experience is highly valued (Halvorson, 2010). Furthermore, it is not uncommon for service members to view their fellow soldiers as extended

family members. This same bond exists in military communities among neighbors and friends of the military family. This type of community support where everyone is experiencing the same challenges can be beneficial to families and has been linked to reduced difficulties a family experiences during and after deployment (Adamson, 2009).

Microsystem: Proximal environments that directly impact the child. The schools, peers, family, and community organizations that support the young child are interconnected to all aspects of the military. As noted earlier, families are as much a part of the military as the active duty service member and are often asked to make sacrifices beyond what civilian families might be expected to do (Halvorson, 2010). It is widely believed that service members' careers can be adversely affected by the behavior of their family members (Albano, 2002). For example, an officer's leadership of his command unit may be questioned if it is perceived that he is not able to "handle" situations within his family (Drummet, Coleman, & Cable, 2003). The service member and his/her family, therefore, may be unwilling to seek out resources and supports the family needs for fear of negative consequences. Yet, as previously discussed each relocation the family is expected to start over with a new home, school, friends, neighborhood, job, and experiences and is likely to need support.

#### Partnerships with Families in Early Childhood Special Education

The most recent revisions of Individuals with Disabilities Act (IDEA) called for "strengthening the role and responsibility of parents and ensuring that families with children who have exceptionalities are provided with opportunities to meaningfully participate in the education of their children." (IDEIA, 2004). In addition to this call for increased meaningful participation, the Division for Early Childhood (DEC) of the Council for Exceptional Children (CEC) recommends that educators develop relationships with families based on mutual respect.

Furthermore, educators should actively involve families and individuals with exceptionalities in the educational decision making process.

This value requires educators to respect all children and their families, understand that family is a constant in the child's life, agree on goals and strategies for the child, and share scarce resources (Neisworth, & Bagnato, 2005). When early educators explore and review parents' expectations for their child and their child's educational services, they not only increase their understanding of expectations but begin creating a stronger relationship with families and their children (Russell, 2003). Partnering with families is especially important in early childhood special education because these first impressions of special services and school supports will impact the way families approach creating partnerships with future educators.

In early childhood special education, using family-centered practices to support children with exceptionalities and their families is the "gold standard." Family-centered practices can be defined broadly as resources and supports provided to families both formally and informally that promote children's development (Dunst, 2002; Dunst & Trivette, 2007). However, it involves collaborating with families with the purpose of empowering them in their role as decision maker (Turnbull et al., 2007). Dunst (2002) reports that families tend to value the support and assistance they receive from early educators when family- centered practices are used with them.

Allen and Petr (1998) identified some core elements of family-centered practices. The elements they discussed included: providing service to the family as a unit, respecting parent decisions, attending to the family's unique culture within the design of interventions, concentrating on the family's strengths, tuning into the family's capabilities, individualizing services for the children, facilitating the process of information sharing between services, considering collaboration as working for the family, and empowering the family in the natural

roles. For example, family-centered practices are much more than identifying strengths within the family, these practices utilize the strengths of the family as the foundation for acquiring new skills (Dunst & Trivette, 2007). Importantly, evidence supports that how supports, resources, and interventions are delivered matters as much as what is done to assist families and children (Dunst & Trivette, 1996). Being cognizant of how we provide services to military families and their children with exceptionalities can have a positive impact on children's outcomes.

Additionally, partnerships need to not only be built between families and educators, but partnerships are required between agencies, between the military organizations and civilian organizations, and between the military community and civilian community. Effective partnerships must span across all resources and programs to activate an all-encompassing and responsive effort by military, community agencies, and organizations to benefit military families (National Military Family Association, 2004). As noted earlier, fewer than half the military families reported services and agencies to be helpful (Orthner, Jones-Sanpei, & Williamson, 2004), thus more research is needed to determine how supports, resources, and interventions could be enhanced or changed to be more beneficial for families.

## Historical Views about the Impact of Military Life on Children and their Families

As mentioned previously, military family syndrome as described by LaGrone (1978) was a belief that military families displayed more mental health and behavioral challenges than civilian families because of the authoritarian father, relocations, and deployments. A military family syndrome viewpoint regarding the effects of deployment on families and children indicated children of military families have a higher than normal incidence of behavioral or mental problems (LaGrone, 1978). This military family syndrome approach also indicated that children's increase in behavioral or mental concerns is related to the military authoritarian style

of parenting, depressed mothers, family conflicts, and frequent relocations (Ryan-Wenger, 2001). There is evidence that military family syndrome or personality differences between children in military families and children in civilian families does not exist (Jensen et al., 1986; Manning et al., 1986). As Morrison (1981) suggested more research is needed in order to examine the extent of mental disorders and their causes for military families and children. Furthermore, Jensen and colleagues (1986) suggested using multiple rating sources to examine the prevalence of negative effects on children in military families by exploring military-unique stressors on the parents, the parents' own functioning levels, and socioeconomic status/rank.

Families in the military face many unique challenges and they have varied responses to these challenges depending upon their previous life experiences, access to local resources, socioeconomic status, and individual family characteristics. Kenny (1967) found officer's children to be well-adjusted, as compared to children of enlisted soldiers. In addition, the divorce rate and the lower socioeconomic status of enlisted soldiers may be an important consideration when examining the prevalence of behavior and mental disorders in children. It is possible that enlisted soldiers and their families experience more life stressors due to lower income, lack of control of assignment, and lower education levels (Jensen et al., 1986).

Stress on the military family and children may be mediated by the caregiver's response to the unique challenges of military life (Nice, 1981). Gorman, Eide, and Hisle-Gorman (2010), found mental health and behavioral disorders increased in children during deployment of a parent. However, more clinical visits occurred when father's deployed. Gorman and colleagues (2010) suggested that this difference may be due to father's understanding of baseline behavior and inability to recognize an increase in negative behaviors. While another possible explanation is that mother's may be more likely to transfer their mental health symptoms to their children or

have an increased perception of mental health issues in their children (Applewhite, 1996; Finkel, Kelley, & Ashby, 2003). This literature suggests that researchers examine military-unique stressors on the parents, the parents' own functioning levels, and socioeconomic status/rank, in order to improve the reliability of the findings. More high quality studies are needed in this area to better and more precisely identify military family resources, concerns, and priorities and then align supports based on those findings.

Currently, supports for individuals who exhibit negative effects due to military-unique challenges are delivered primarily on an individual basis rather than to the family as a whole. The military employs family life educators (FLEs) who are professionals trained to use a life course approach to "strengthen and enrich individual and family well-being" (Arcus, Schvaneveldt, & Moss, 1993, p. 5). Family supports are provided for families through the Family Team Building and Family Readiness Support groups but according to Arcus and colleagues (1993), only one third of spouses know these groups exist. Furthermore, only half the families that accessed these supports reported satisfaction with the services. The military culture may also prevent the family from accessing support for fear of negative consequences and the perception of being weak. To enhance family support, it has been suggested that military family life educators individualize their programs to align with individual family resources, concerns, and priorities (Drummet, Coleman, & Cable, 2003). In addition, military family life educators can assist children in their school settings to maintain communication with the deployed service member and communicate with other peers experiencing the same challenges. Family life educators should work with the parent at home to provide counseling, positive discipline training, and other training when identified by the parent as a need (Arcus, Schvaneveldt, & Moss, 1993). Although these supports are beneficial they may not meet the additional needs of a

military family that has children with exceptionalities or the family may have other priorities for support. Therefore, military families with children who have exceptionalities may benefit from a family-centered approach to designing meaningful supports including seminars and/or family classes.

## **Implication for Practice: Supporting Military Families**

The ecological systems theory can be used to understand the resources, concerns, and priorities of military families. Information from the literature regarding supports recommended for military families is organized using the following four ecological system levels: chronosystem, macrosystem, mesosystem, and microsystem. By discussing supports for each of these areas that impact the young child with exceptionalities in a military family, we can better understand the interactions that occur between systems of support.

Chronosystem: Cumulative experiences and events. Families may have experienced multiple deployments, but still may be unsure of what resources are available or how to access them. Support groups, organizations, and schools should not assume that families know what they need to know in regards to navigating the deployment challenges (National Military Family Association, 2003). In addition, even if families and children may have experienced a deployment before, their needs and life circumstances may have changed to the extent that they may respond differently to the current deployment (Halvorson, 2010). Making sure high quality supports that align with the families current resources, concerns, and priorities are provided for the families that have been deployed previously can minimize the increased challenges that may occur during subsequent deployments (Goodale, Abb, & Moyer, 2012; Halvorson, 2010). Specifically, Drummet and colleagues (2003) suggested mandating that parents and caregivers or first time caregivers attend an advanced preparation planning seminar that primes them with

deployment information they will need to be successful (eg., training regarding legal services, preparation for difficulties children may experience, helpful hints regarding what resources are available, training on how to access available resources). This can be a particularly helpful training for non-family caregivers who may be unaware of what military resources they can access for the children they have committed to care for while the service member is deployed.

Additionally, the National Military Family Association (NMFA) (2003) has suggested the following supports to assist families in managing multiple deployments:

- Train military support providers to adapt support service locations and hours so they
  are most accessible to the families they serve,
- Train parents, school personnel, and child care providers about how to help children cope, especially with longer deployments and repeated deployments,
- Train all service members, families, and caregivers to know rights, benefits, and entitlements throughout the process of mobilization to demobilization, and
- Expand child care services to meet the changing needs of families and to facilitate their participation in training opportunities (e.g., hourly care, respite care, care for children with special needs, evening care, weekend care).

Furthermore, it has been suggested that support groups, organizations, and the military address challenges throughout the deployment cycle. The National Military Family Association (2003) reported the need for better return, reunion, and reintegration programs for service members and families as the nature and length of deployments continue to change. In addition, the NMFA suggested there was a need for more robust, preventive counseling services for service members, families, and children. This type of preventative care should align with the military family's needs during each phase of deployment (i.e., pre-deployment is the time period

before the family deploys; deployment is the time period when the soldier is away from home serving a military mission; reunion is the time period when the soldier returns home for short period of time during deployment; reintegration is the time period after deployment when the service member is readjusting to his/her family role) because each deployment cycle presents different challenges for families. Programs are needed to address the unique challenges of these phases (i.e., return, reunion, and reintegration) assisting the family in knowing what to expect and how to handle these phases will mediate any negative effects from the increased stress level.

Macrosystem: Beliefs and ideology. Since families often represent the service member and may feel they are held to certain rules and expectations, they may be reluctant to access resources and supports. Additionally, since military family members are also trained to uphold the military values of Loyalty, Duty, Respect, Selfless Service, Honor, Integrity, and Personal Courage (Halvorson, 2010), family members may have unrealistic expectations for themselves regarding need for extra supports. It is important to assist family members in setting realistic expectations for themselves, service members, and the military unit and to inform families about the specific resources available. In this manner, families may be more likely to seek out the appropriate support without fear of negative consequences (Drummet, Coleman, & Cable, 2003; Halvorson, 2010). Importantly, Halvorson (2010) suggests using the Army values to motivate family members to take care of themselves. For example, for the military value of selfless service, family members should understand that when they accept help they are improving their ability to help their children. Others have suggested that family members should create informal groups of support for themselves (Drummet, Coleman, & Cable, 2003; Goodale, Abb, & Moyer, 2012). For example, spouses could start a child care co-op or an exercise group. When families are comfortable with creating or accessing resources, they may begin to view military unique

challenges as new opportunities filled with anticipation, excitement, and a sense of empowerment to accomplish their goals (Halvorson, 2010).

For the service member the military is not just a job. Instead, the military more deeply defines the service member and who they are (Goodale, Abb, & Moyer, 2012). The military fosters the development of the soldier's physical, emotional, and spiritual abilities while it discourages weakness and timidity. Service members get used to being told what to wear, where to go, where to live, and to be ready to do their job at any given time. They are consistently adapting to new and different situations. For example, during deployment service members have been described as moving at very high rate of speed, as they are constantly on a mission and vigilant about the dangers around them (Drummet, Coleman, & Cable, 2003). Then when soldiers return home they feel as though they have come to a complete stop and this lack of routine may hinder their reintegration into the family. Halvorson (2010) suggests that commanders be trained to recognize when the soldiers in their unit may need counseling services. Similar to the suggestions given for military families, the service member needs to understand that taking care of his or her own needs, does not go against the military values but supports the service member in being able to carry out his duties (Drummet, Coleman, & Cable, 2003; Goodale, Abb, & Moyer, 2012; Halvorson, 2010).

Mesosystem: Interactions between microsystems. As stated previously, expanding program and information outreach to family members may feel disconnected to what is going on within the unit. While many family members actively connect with the unit command and the unit's Family Readiness Group (FRG), there are still some families who remain outside the existing support structure (Halvorson, 2010). Therefore, it is important to reach out to unconnected individuals and families and make attempts to help them connect with the unit

support system. The National Military Family Association (2004) reported that families do not often seek out special support or acknowledgement for the sacrifices they make and challenges they face, but community support is vital to families' ability to cope with those challenges.

Therefore, the following suggestions were made to assist families in becoming connected to their community:

- Increase partnerships between commands, parents, and school officials to serve the changing needs of military children, with more military-to-school and school-toschool partnerships to share expertise and best practices,
- Cultivate partnerships with local community services to support child and youth needs especially during times of high deployments, and
- Expand programs between military and community religious leaders to support all service members and families during all phases of mobilizations and deployments.

The above recommendations will also provide needed support to family volunteers within the community. In addition, by using other available resources in the community, additional trained counselors can be made available through religious organizations, schools, and family support channels. These additional family counselors play a vital role in assisting the family during the important reintegration phase of deployment.

Another resource that families may access is the Military One Source website in order to gain supports and resources. However, there is a need for a better information sharing process between Military One Source and the individual installation sites (National Military Family Association, 2004). Using a linked system, military family support providers can be aware of the needs of families in a timely manner so programs and services can be adjusted to meet those needs. Likewise, information should also be shared about local programs and services between

installation sites to provide consistency of services available at each military base. In order to improve family satisfaction with programs and resources, better communication and information sharing may need to occur between military commanders, community members, organizations, schools, and military program volunteers, counselors, families, and military installations.

Microsystem: Positive environments. For military families and their children with exceptionalities maintaining positive and consistent environments during the stressful and uncertain times they face on a regular basis is of upmost importance. These families need supportive communities, schools, and teachers to prevent them from becoming isolated or feeling alone. A safe and caring learning environment is essential for children affected by deployment to help build coping skills (Allen & Staley, 2007). In an article for teachers, Allen and Staley (2007) give many important suggestions for teachers to set up an emotionally supportive environment. For example, they recommend that the teacher allow children to express their feelings through writing and drawing activities. A "buddy system", may also benefit military children by providing a close social connection in their new academic environment (Pollari & Bullock, 1988). The teacher must be able to anticipate adjustment difficulties and carefully observe children in order to design effective individualized interventions (NMFA, 2004). Similarly, the National Military Family Association (2004) reported that educators must be trained to recognize normal behavior related to the child coping with deployment-related stress, as well as how and when to pursue professional help. Even though children and families may appear to be strong and vigorously managing stress in a healthy way, we must not assume they are invulnerable to the trauma and stress of deployment (Cozza, Chun, & Polo, 2005). Children and their military families require ongoing preventative support which has proven to be more effective than support provided only after a surge of deployments occur (NMFA, 2004).

Research has demonstrated that children are most impacted by the manner in which the family member or caregiver copes with the deployment of the service member (Chandra et al., 2010; Drummet, Coleman, & Cable, 2003; Gorman et al., 2010; Osofsky & Chartrand, 2013). A teacher must also be prepared to support the family member or caregiver of a child in variety of ways. Therefore, teachers should remain in frequent communication with the parent or caregiver about changes in children's behaviors and demonstrate patience when academic or social expectations are not met (Allen & Staley, 2007). A teacher might provide their phone number to provide support and security for the parent during difficult periods of adjustment. This may be of particular importance during the reintegration phase of deployment (Chandra et al., 2010; Drummet et al., 2003; Halvorson, 2010). In addition, the school may also establish a military parent support group, provide information on local services, and create a plan for supporting families during the event a parent is injured or killed (Allen & Staley, 2007). School can play a vital role in supporting the maintenance of a positive home environment during the everyday stressful challenges a military family experiences.

#### **Implication for Research: Supporting Military Families**

Research indicates that the military unique challenges (e.g., frequent relocations and deployments) experienced by military families have been associated with emotional and behavioral challenges in school-age children (Lester et al., 2010). In addition, Chartrand and colleagues (2008) reported that children between the age of three and five whose parent deployed were likely to experience emotional and behavioral challenges when parents themselves exhibited signs of difficulty coping with deployment. Yet, children with stable and positive relationships with their caregivers are more likely to demonstrate more success coping with frequent relocations and deployment (MacDermid Wadsworth, 2005). However, very little

research addresses the youngest and largest population of children (i.e., preschool-age children) connected to the military (Clever & Segal, 2013). Research is, therefore needed in order to understand the resources, concerns, and priorities of military families who have young children and in particular those with young children with exceptionalities.

Specifically, the literature suggests the following research may further our understanding of military family needs and/or develop supports for military families and their children with exceptionalities. Research investigating:

- The unique community, family, and child specific characteristics that affect children's ability to cope and build resiliency (Cozza & Lerner, 2013),
- Interventions, programs, and resources that assist children in building resiliency and self-determination (Clever & Segal, 2013),
- The long-term effects of deployment and relocation on children with exceptionalities connected to the military through a longitudinal study (Cozza & Lerner, 2013),
- Parenting programs and support that are specific to unique military challenges and their effect on children with exceptionalities (Osofsky & Chartrand, 2013),
- Interventions and programs that assist parents in preparing children with exceptionalities for the stress of deployment and relocation (Osofsky & Chartrand, 2013), and
- Military family needs by exploring their resources, concerns, and priorities for family-centered support (Lester & Flake, 2013).

This study's primary goal of investigating the perspective of families and educators regarding military family needs is timely and required to further our knowledge to effectively support military children and their families. This research will provide additional insight into

unique challenges military families' experience, family members' unique responses, children with exceptionalities' responses, educator support for these challenges, and educator professional development needs.

Research regarding the preferred supports military families need when raising children with exceptionalities, managing frequent relocations, and coping with frequent deployments may be beneficial to civilian families experiencing similar stressors and changes in their lifestyle. It is anticipated that this study will not only provide valuable insights pertaining to military families but also render some similarities that may be further explored within civilian families.

#### **Chapter 3: Methods**

The purpose of this study is to examine the perspectives of families and educators regarding military family needs. Chapter three describes the methodology chosen for this study. This chapter is organized into the following topics: (a) research methodology, (b) settings and participants, (c) human subjects approval and recruitment, (d) data collection procedures, (e) data analysis procedures, and (f) validity.

## **Research Methodology**

This research study sought to understand the perspectives of families and educators regarding problems, needs, and training they feel promotes or hinders positive and effective partnerships between military families, educators, school districts, and community organizations. Researchers and program personnel need a better understanding of the unique challenges for military families in order create more effective interventions, specifically to support families and educators. Qualitative research methodology best addresses the research questions posed in this study. The use of a qualitative method is appropriate for understanding the meaning, phenomena, experiences, and situations participants engage in and construct as they address life tasks in this case the unique challenges and culture of the military (Merriam, 2002). Therefore, semistructured interviews and focus groups were implemented involving key participants to address the research questions. Specifically, military families who have young children who are at-risk for or with a developmental delay or disability were interviewed to provide their perspectives of how they want educators to provide support. Additionally, educators working in or near a military base participated in a focus group to provide their perspectives on professional development regarding working with military families.

**Grounded ethnography**. Grounded ethnography, like other forms of qualitative research, is useful in studying "experience from the standpoint of those that live it" (Chamaz, 2000, p. 522). Grounded ethnography requires the researcher to: a) use multiple forms of data, b), apply inductive inquiry c) view the data with a cultural lens, and d) develop substantive theory.

The primary researcher of this study utilizes a "multi-instrument" approach to generate new theories of social processes (Pelto, 1970). Specifically, the researcher used field notes, debriefing notes, data from interviews and focus groups, documents gathered from participants and the internet.

After data was collected, an inductive inquiry process was used to build theory by making connections between patterns within the data (Brott & Myers, 1999). The inductive process used within this study consisted of: reviewing of the literature, developing a conceptual framework, conducting interviews and focus groups, analyzing the results, and then referring back to the literature.

Importantly, the researcher viewed the data through a cultural lens to understand cultural values and processes by which military families access resources. Using a cultural lens to understand phenomena or experiences lived by military families and their children with exceptionalities assisted the researcher in making key category connections within the data (Merriam, 2009).

Grounded ethnography theory results in the discovery of a substantive theory; a core category that is related to as many other categories as is possible (Strauss, 1987). Thus, in this study the researcher uses family interviews and educator focus groups to provide a rich description of substantive theory (i.e., core category of military culture) for supporting children

with exceptionalities and their military families (Boeije, 2002; Glaser, 1965). The categories that occur frequently within the data during the study provide explanations about the phenomena or lived experiences of military families and their children with exceptionalities. The researcher used the categories found within the study to develop theories that can be assessed through fitness, understanding, generality, and control (Glaser & Strauss, 1967).

The grounded ethnography approach in this study provides an effective means to address the complexities of understanding military culture and develop insight into how best to provide supports to children with exceptionalities and their military families. In this study, family interviews and educator focus groups were conducted at two different sites (i.e., two distinct military communities). The strategy of utilizing multiple instruments was implemented by conducting a minimum of three clusters of family interviews and three educator focus groups (See Figure 3) at two sites. As noted in Figure 3, the data from each site's interviews and focus groups was analyzed separately until the last phase of data analysis.

**Study design**. This study used a multi-case design. A multi-case design study is a type of qualitative research design intended to examine a number of cases to "investigate a phenomenon, or general condition" (Stakes, 2005, p. 445). For example, a case can be a person, an organization, setting, or program (Creswell, 2002). This study uses setting (i.e., sites) as the unit of organization. In a multi-case study, the individual cases share a common characteristic or condition, and in the instance of this study the common bond is that each site is located near a military base. By examining the similarities and contrasts between the cases the investigator strengthens "the precision, validity, and stability of findings" (Miles & Huberman, 1994, p.29).

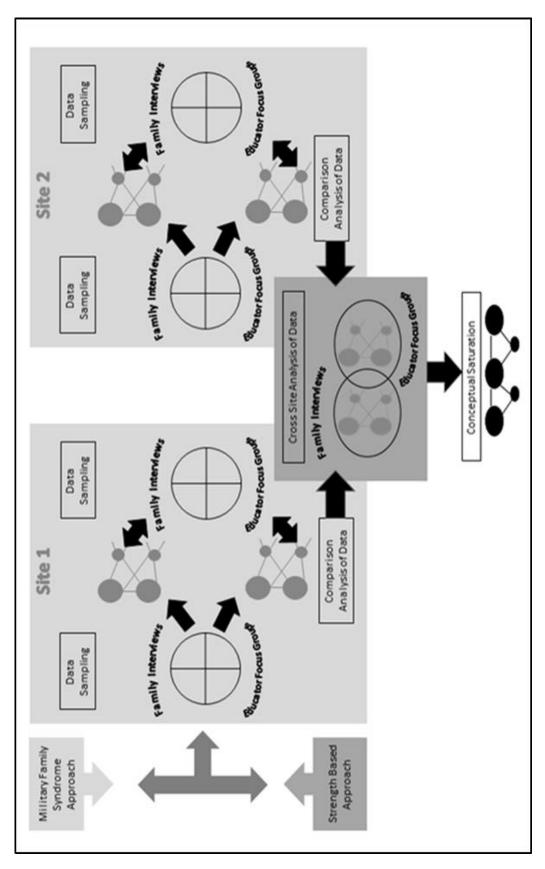


Figure 3. Picture diagram demonstrates the data analysis procedure

#### **Sampling Procedures**

A purposeful sampling procedure was used to select two different sites serving military families of different ranks and military experience. This purposeful sampling accounted for local conditions and values that are necessary for transferability (Erlandson, Harris, Skipper, & Allen, 1993). Participants that met the specific criteria of being active duty service members which live on or near a specific military base and educators that work on or near a specific military base were selected for this study.

Two school districts which are solely responsible for delivering educational supports for two different military bases which serve as launching sites for deployments were targeted for the settings of this study. Participants recruited for this study were active duty military families who; (a) had been deployed within the last five years, and (b) had a child with a disability or who were at-risk for developing a disability under the age of eight years. In addition, the researcher recruited early educators working for the school district associated with each military base. All participants that met the study's criteria and were interested in becoming participants were selected.

#### **Participant Recruitment**

The methods and procedures used within this dissertation study were submitted approved by the University of Kansas Human Studies Committee –Lawrence prior to research recruitment.

**Recruitment materials.** A website was developed to provide information about the qualitative research study for the purpose of recruiting families and educators to participate in the study. This website addressed potential recruitment barriers related to the location of the military bases and eliminated the need, for school districts or others assisting in recruitment, to send attachments in emails.

**Recruiting school districts.** Two special education directors working in two Midwestern school districts that serve military families were contacted to initiate preliminary conversations about the research study and participant criteria. In qualitative research, gatekeepers are used to assist the researcher in gaining access and developing trust with the community (Hatch, 2002). Two sites were selected in order to gain more participants and make comparisons which provides an additional validity measure for the research study (Miles & Huberman, 1994). In addition, each base primarily served either enlisted personnel (Military BaseI) or officers (Military Base II) to provide a complete sample for the study. At this initial stage of contact with district personnel, the researcher shared the purpose of the research study through the research study's website and requested a meeting to discuss the research project in depth. Each special education director contacted and shared the research information with the assistant superintendent of the school district. Then each school district scheduled a phone conference and or face-to-face meeting. At research site I, the assistant superintendent provided approval of the request to conduct research with their families and educators. At research site II, the researcher was required to present the research proposal to the school district's board of education and it was approved.

**Recruiting Educators and Families.** For recruitment of participants, the *Partnering with Military Families* website link with the researcher's contact information was provided to potential participants regarding the: purpose of the study, rationale for the study, and criteria for participation. Furthermore, through the website potential participants accessed the information statement, screening survey, and letter of consent. The website was also posted on social media websites to recruit participants. Specifically, several Facebook military family groups were able

to send a message containing the *Partnering with Military Families* website link to their followers. Some individuals posted the website link and a message on their website page.

After final research approval was given by the superintendent or board of education, a school district representative sent the *Partnering with Military Families* website link and the researcher's contact information to their educators working with military families and their young children with special needs and abilities. A school representative also sent a printed *Partnering with Military Families* flyer and survey for educators to complete. The educator screening survey contained general information about the age of children the educator worked with, the children's disability, and the educator's military experience. This survey information was used to select participants that met the inclusion criteria. After initial contact was made with the educators a time, place, and location for the focus group was scheduled. The researcher then contacted the building principal, director, or coordinator to ask for permission to conduct the focus group within the educator's work building.

At the time of the focus group or interview, educators completed the consent and demographic survey to provide age, race, ethnicity, education level, experience, and classroom information. After the focus group was completed, the educators chose a set of ten classroom books for participating in the study and also got refreshments.

Upon completing the focus group, the educator participants received information about the research project to pass along to the military families in their classrooms. In addition to the website, educators were given packets which included paper copies of the military flyer, information statement, family survey, and letter of consent. The educators were also given a self-addressed stamped envelope to return family surveys to the researcher. The family surveys were used to select family participants that met the inclusion criteria.

After receiving the family screening surveys an initial phone or email contact was made with the interested participant. On the day of the scheduled interview, family participants completed a demographic survey and signed the letter of consent before the actual interview began. The family demographic survey provided the researcher with descriptive data such as; age, education, rank, income, race, and ethnicity. During this contact an interview was scheduled, questions regarding the study were answered, and the participant was reminded the interview would recorded but their identity would kept anonymous. After the family interview, each family was given a book for each child in the family as a thank you for participating in the study.

## **Settings and Participants**

As noted above two distinct groups of participants at each of the sites were recruited; educators working with military families and military families with young children. Educators recruited currently had children with exceptionalities in their classroom or on their caseload and who served military children and their families. The early educators' disciplines include: Elementary General Education, Elementary Special Education, Speech and Language Pathology, Administration, Para-Educator, and Early Childhood Special Education. For the purposes of this research study, priority was given to families with children under eight years of age diagnosed with a disability or developmental delay. However, due to the age of some children with diagnosed exceptionalities, we included these families because their younger children were considered to be "at-risk" according to the following definitions: a) children diagnosed with a physical or mental condition which has a high probability of resulting in developmental delay; b) children at risk of experiencing a substantial developmental delay if early intervention services are not provided; and c) children who may be at risk for a developmental delay due to

environmental risk factors; such as children living in a single parent home, children who are English language learners, children living in poverty (Individuals with Disabilities Education Act, 2004).

**Settings**. This study was conducted at two sites. Each site had a school district that was associated with serving the children from the local Army military base. Therefore, the settings will be described as sites which will include information about each school district and military base.

Site I. This site was a rural school district serving a military base which trains mostly enlisted military members in a Mid-western state. Seven of the elementary schools and one middle school are located on the Army post.

School district I. The school district serves over 8,000 students across fifteen elementary schools, two middle schools, one high school, one alternative education center, and one early childhood center. It is the eighth largest school district in the state in enrollment. The following includes demographic and statistical information gathered from the school district's website and the state department of education's website related to the community the school district serves.

- Economically disadvantaged 62.01%
- Minority population 50.71%
- Graduation rate 74.30%
- Students with exceptionalities -14.85%
- Students eligible for free and reduced lunch 61.35%

Educators that participated in the study worked at the school district's only early childhood center and one elementary school, both were located near the Army post. The families that participated in the study had children that attended the early childhood center, an elementary

school on post, and the elementary school in the community where the educator focus group was conducted.

Military base I. This Army post covers 100,656 acres and has a daytime population of 25,000. This base is known for exceptional training, recreational facilities and opportunities, rich history, and remarkable relationships with surrounding communities. This Army post has placed a priority on helping families develop strength and thrive in spite of challenges they may face. The base's resiliency campus assists families in bouncing back from adversity. The resiliency center houses: a resiliency learning center, physical fitness centers, spiritual fitness center, and a new mind fitness center. It gives soldiers, families, programs, and practitioners a wide variety of options for addressing stress related to multiple deployments. The above information was gathered from websites (e.g., army.mil, usmilitary.about.com).

Site II. This site was a rural school district serving a military base near a larger metropolitan area which trains mostly military officers in a Mid-western state. The school district is located on the Army post and consists of three elementary schools and one junior high school.

School district II. The school district serves over 2,000 students across its four elementary schools, and one junior high school. The following is demographic and statistical information gathered from the school district's website and the state department of education's website related to the community the school district serves.

- Economically disadvantaged 14.03%
- Minority population 34.20%
- Graduation rate 73.02%
- Students with exceptionalities -12.97%
- Students eligible for free and reduced lunch 13.60%

Educators that participated in the study worked at two elementary schools located on the Army post. The family participants in the study had children that attended an early childhood special education classroom and a first grade classroom at two elementary schools on post.

*Military base II*. This Army post covers 5,600 acres and has a daytime population of 12,300 (i.e., 4,000 active duty soldiers; 5,800 family members; and 2,500 civilians). This base has six core functions: functional training, leader development and education, collective training, doctrine, training support, and lessons learned. This Army post has been noted for its campuslike setting, open green spaces, hometown character, and military corrections complex. The above information was gathered from websites (e.g., army.mil, usmilitary.about.com).

Participants. Military family interviews and educator focus groups were conducted at the two sites to understand family and educator perspectives of military family needs.

Demographic information was collected about the families (i.e., military service members, spouses, children) and educators. Information will be summarized in narrative form and tables below.

Families. Five families were interviewed at site I and three families participated in interviews at site II, for a total of eight families. The information within Table 1 was gathered from the demographic survey family members completed. Specifically, information pertaining to the families' marital status, income range, and number of relocations the families experienced is included in the table.

Table 1

Demographic characteristics of families represented

Variable	Frequency	Percentage	
N=8			
Marital Status			
Married	8	100%	
Single	0	0%	
Income Range			
\$20-\$39,000	2	25%	
\$40-\$59,000	1	12.5%	
\$60-\$79,000	4	50%	
+\$80,000	1	12.5%	
Relocations			
1-3 times	2	25%	
3-5 times	1	12.5%	
5-8 times	3	37.5%	
Annually for 8 years	2	25%	

Service Members. All service members were male and had an average age of thirty-two years. Interestingly, at the time of the family interview, 87.5% had received orders to deploy this summer and 57% of those with orders did not yet know where they were going to be deployed. The information in Table 2 below reports the service members' ethnicity, rank, and deployments served prior to the interview.

Table 2

Demographic characteristics of male service members represented

Variable	Frequency	Percentage
N=8		
Ethnicity		
Caucasian	7	87.5%
Mixed Race	1	12.5%
Rank		
E4:Specialist	1	12.5%
E5:Sergeant	1	12.5%
E6:Staff Sergeant	1	12.5%
E7:Sergeant First Class	3	37.5%
04:Major	2	25%
Deployment		
First time	2	25%
1-2 times	2	25%
3+ times	4	50%

*Trailing spouses*. Spouses that follow military service members from base to base because of a duty assignment are described as trailing spouses. All trailing spouses were female and had an average age of thirty-four years. The information below in Table 3 reports the trailing spouses' ethnicity, employment status, and education level of the mothers.

Table 3

Demographic characteristics of female trailing spouses represented

Variable	Frequency	Percentage	
N=8			
Ethnicity			
Caucasian	7	87.5%	
Mixed Race	1	12.5 %	
<b>Employment Status</b>			
Employed Fulltime	2	25%	
Fulltime Student	1	12.5%	
Stay At Home Parent	5	62.5%	
<b>Education Level</b>			
No Diploma	1	12.5%	
Some College	2	25%	
Bachelor's Degree	4	50%	
Graduate Coursework	1	12.5%	

Children with exceptionalities. There were a total of eight children represented in the study with an age range between three and eight years of age. The information in Table 4 below reports demographic information (i.e., ethnicity, age, gender, IEP status, diagnosis) about the children with exceptionalities in the military families interviewed.

Table 4

Demographic characteristics of children with exceptionalities represented

Variable	Frequency	Percentage	
Ethnicity			
Caucasian	7	87.5%	
Mixed Race	1	12.5%	
Gender			
Male	4	50%	
Female	4	50%	
Age (Yrs.)			
3	1	12.5%	
4	1	12.5%	
5	4	50%	
6	1	12.5%	
8	1	12.5%	
IEP vs. At-Risk			
IEP	6	75 %	
At-Risk ECSE	2	25 %	
Diagnosis			
Autism Spectrum	6	75%	
Cerebral Palsy	1	12.5%	
Speech Delay	1	12.5%	

*Note*. ECSE indicates the children were attending a four year old at-risk early childhood special education classroom.

In addition, military families reported that 50% of their children have behavioral challenges, in addition to their primary diagnosis. Importantly, 37.5% of children were receiving three or more outside private services (e.g., speech therapy, ABA therapy, tutoring, occupational therapy).

*Educators*. Thirteen female educators with an age range of 24-54 years and average age of forty years attended a focus group or interview. Educator demographic information (i.e., education level, licensure) can be found in Table 5 below.

Table 5

Demographic characteristics of educators represented

Variable	Frequency	Percentage
N=13		
<b>Education Level</b>		
Some college	1	7.7%
Bachelor's Degree	1	7.7%
Master's Degree	3	23.1%
Master's Plus Coursework	8	61.5%
Licensure		
None	1	7.7%
School Leadership	2	15.4%
ECSE	5	38.5%
SLP	1	7.7%
Elem. Ed.	2	15.4%
Reading Specialist	2	15.4%

Note. ECSE=early childhood special education, SLP=speech language pathology

Of the thirteen educator participants, six were at Site I and seven were at Site II. Interestingly, 46% of all the educators who attended interviews or focus groups were also military spouses. Moreover, 30% of the educators had been in their current position for less than a year.

#### **Data Collection Procedures: Qualitative Methods**

The following section describes the qualitative data collection methods used in this study. These methods included family interviews, educator focus groups, educator interviews and referential data (e.g., pamphlets from the Military Family Life Educator programs, school district handbook, school district website).

**Researcher.** The researcher's role is critical to the qualitative inquiry process that seeks to understand the military culture and build theory about what is needed to support military families and their children with exceptionalities. The researcher is the key instrument in data collection. Therefore, throughout the study the researcher's perspectives and experiences can provide key insights, hypotheses, and validity checks (Strauss, 1987; Strauss & Corbin, 1997) which are relevant to establishing trustworthiness (Lincoln & Guba, 1985; Patton 1990) The researcher is considered an apprentice in using qualitative methodology because she has completed coursework and previously conducted one qualitative study. However, the researcher does have foundational knowledge about the context of working with families and their children with special abilities, military culture, and special education service delivery procedures. The researcher is an early childhood special education doctoral candidate with five years of early childhood / early childhood special education experience in the classroom. In addition, she has personal experience of being a sibling of a soldier who deployed when his first son was only six weeks old which inspired her pursuit of this research topic. Therefore, as Reason (1988) suggested the researcher has maintained an awareness of her primary experiences without being

swept away and overwhelmed by them. Her experiential cognizance was used with critical subjectivity as part of the inquiry process.

**Qualitative software**. *NVivo 10* (2012), a qualitative software, was used to support the qualitative data analysis of this research study. The software allowed the researcher to collect, organize, and later analyze content from the interviews, focus groups, field notes, referential data, and surveys used in this study.

Exploring existing theory. Existing theory and research was reviewed to gather information and assist the researcher in organizing and developing the focus of the study. Figure 1, first introduced in Chapter 1, provides a conceptual framework for organizing the approaches to working with military families derived from the literature review. A conceptual framework was developed to depict the existing research regarding the move from a military family syndrome approach to a family-centered approach in our work with military families. Figure 1 illustrates the changes in approaches used to support military families and their children with exceptionalities. Then a logic model was developed to depict this study's research goals, research questions, and anticipated outcomes. The logic model in Figure 2, found in Chapter 1, presents key elements for which understanding is needed in order to develop a positive collaborative partnership with military families; poses research questions and anticipated outcomes for schools, educators, and families; and shows how the expected outcomes are related to the measures, research questions, and goals.

In summary, the conceptual framework (Figure 1) was used to guide and monitor the tone of the interview and focus group protocol questions. The logic model (Figure 2) was used to make sure protocol questions addressed key elements required to develop a positive collaborative relationship specific to schools, educators, and families. Finally, some questions were developed

to elicit a response that compared or contrasted information (i.e., having family participants contrast their ideal educator with educators they feel were not as supportive). Examples of protocol questions can be found in Appendix B, these questions were designed to elicit responses that may contribute information for the research questions. These semi-structured question protocols were continually revised to add follow-up questions or refined to improve clarity of questions.

**Family Interviews.** The primary data collection method for family data were semi-structured individual interviews. These interviews were originally planned for approximately sixty minutes, but the average length of time for interviews was actually ninety minutes. At the beginning of each interview the participants were provided with some background information related to the researcher's personal interest in this topic, the purpose for the research project, and were again reminded they had the option to withdraw from the study at any time.

All family interviews occurred in a face-to-face meeting using guiding questions that facilitated open-ended responses. These guiding questions were written down to ensure that important topics were discussed. The iterative process of keeping the interview conversational allowed the interviewee and the researcher opportunities for expansion, clarification, and follow-up questions. During the interviews the researcher noted any questions used as follow-up questions to make sure to include some of those questions during future interviews. Following suggestions made by Lincoln and Guba (1985), notes were taken by the researcher during the interview to record interviewee's emotions, engagement, responsiveness, demeanor, attitude, home environment descriptions, interactions with children, and other interesting observations during the interview.

Additionally after participants left the meeting, the researcher set aside time immediately following the interviews to audio-record self-debriefing reflections. Field notes from these audio-recordings, additional thoughts, and observations during the interview were kept regarding key concepts or ideas present in each recording. In some cases, transcriptions of these debriefings were transcribed and entered into the *NVivo 10* qualitative software.

The family interviews were audio recorded using two Sony 4GB Voice Recorders (ICD-PX333) and transcribed verbatim by two transcriptionists who had prior experience transcribing. One transcriber was an undergraduate student who completed all family interviews from site I. The other transcriber, a friend of the researcher, completed all the family interviews from site II. After the transcriptionists finished transcribing, both the audio and digital files were kept secure under the researcher's password protected computer software. The voice recorder's software automatically assigned a day and date to the audio file. The researcher assigned the audio file a coded name (e.g., S1Fam1, S1Fam2), and the audio file names corresponded with name given to the transcribed word file. Within the transcribed word file a key for the participants' identification code (i.e., A=Mother, B=Researcher, C=Dad) was included, along with page and line numbers.

After interview audio files were transcribed verbatim, the transcribed word file was saved as a pdf and sent to the interviewee to be reviewed for accuracy and to solicit additional responses. Furthermore, after reviewing the field notes and transcriptions of the interview data, when the researcher had additional questions regarding any part of the interview, an additional contact via email was made to clarify these questions. Finally, after accuracy checks were completed transcripts were entered into the *NVivo 10* qualitative software using the previously described coded file name.

Educator focus groups. The primary data collection method for educator data were semi-structured focus groups. Two focus groups (i.e., Site I focus group had four educators present; Site II focus group had five educators present) lasting an average of seventy-five minutes each were conducted. Due to reduced attendance four other scheduled focus groups became individual educator interviews which lasted an average of eighty minutes. At the beginning of each focus group or interview the participants were provided with some background information related to the researcher's personal interest in this topic, the purpose for the research project, and were again reminded they had the option to withdraw from the study at any time.

All educator focus groups and most educator interviews occurred in a face-to-face meeting using guiding questions that facilitated open-ended responses. One educator/administrator interview was conducted over the phone. Guiding questions were written down to ensure educators' perspectives were captured regarding: a) their prior training regarding working with military families and their children with special abilities, b) their professional development needs centered around supporting military families, and c) the current educational strategies they feel have been successful in supporting military families and their children with special needs.

During the two educator focus groups (i.e., Site I with six and Site II with seven), participants were encouraged to compare and contrast their experiences with each other (Morgan, 1997). The researcher was able to capture data in field notes regarding how the participants understood their similarities and differences. The iterative process of keeping the focus groups conversational allowed the participants and the researcher opportunities for expansion, clarification, and follow-up questions. During the educator focus groups and

interviews the researcher noted questions used as follow-up questions to ensure inclusion of the questions during future interviews. Following suggestions made by Lincoln and Guba (1985), notes were taken by the researcher during the focus groups and interviews to record participants' emotions, engagement, responsiveness, demeanor, attitude, home environment descriptions, interactions with children, and other interesting observations during the interview.

Additionally, the researcher set aside time immediately following the educator focus groups and interviews to audio-record self-debriefing reflections. Field notes from these audio-recordings, additional thoughts, and observations during the focus groups and interviews were kept regarding key concepts or ideas present in each recording. In some cases, these debriefings were transcribed and entered into the *NVivo 10* qualitative software. Furthermore, referential documents gathered from the school district and the military family life educators describing their programs and policies were also uploaded to the *NVivo 10* software to be coded and categorized during the data analysis process (Creswell, 2003). This information provided the researcher with additional insight into the administrative support available, programs accessibility, program descriptions, and a source of validation of categories and theories.

The educator focus groups and interviews were all audio recorded using two Sony 4GB Voice Recorders (ICD-PX333) and transcribed verbatim by a transcriptionist and the researcher both of whom had prior transcription experience. The researcher completed the educator focus group transcript from site I, while the undergraduate transcribed all educator individual interviews and the educator focus group from site II. After the transcriptionists (i.e., researcher and undergraduate) finished both the audio and digital files were kept secure under the researcher's password protected computer software. The voice recorder's software automatically assigned a day and date to the audio file. The researcher assigned the audio file a coded name

(e.g., FRed1, FRed2) the audio file names corresponded with name given to the transcribed word file. Within the transcribed word file a key for the participants' identification code (e.g., A=Ed1, B=Researcher, C=Ed2) was included, along with page numbers and line numbers.

After educator audio files were transcribed verbatim, the transcribed word file was saved as a pdf and sent to the educator participants to be reviewed for accuracy and to solicit additional responses. Furthermore, after reviewing the field notes and transcriptions of the educator focus group and interview data, if the researcher had additional questions regarding any part of the focus group or interview an additional contact via email was made to clarify these questions. Finally, after the accuracy checks were completed transcripts were entered into the *NVivo 10* qualitative software. The transcribed data were entered with the same previously coded file name.

#### **Data Analysis Procedures**

Collected raw data from interviews, focus groups, field notes, debriefing transcripts, referential data, and surveys were analyzed throughout the study. Data analysis is an iterative process between data collection and data analysis using a constant comparative analysis (Glaser & Strauss, 1967) where each step of the analysis process directed the researcher's next steps (Maxwell, 2009). For example, after analyzing the rich data transcriptions, initial notes and categories were documented describing any interesting findings. Then a cluster of two or more family interviews transcribed from Site I (Figure 3), provided earlier in this chapter, were coded using *NVivo 10* software tools and the first categories were defined. After each subsequent interview was transcribed, a cross analysis of coding definitions, themes, and other findings continued. As additional interviews were coded some themes were combined into overarching themes.

Similarly, after two or more focus groups were transcribed from site one, the first themes were coded using *NVivo 10* software tools and defined. Then the same process of identifying initial concepts at site two occurred, using clusters of family interviews and educator focus groups. After choosing relevant groupings of interview or focus group data to maximize or minimize differences in data, the researcher analyzed the data further. Then simple comparisons of different groupings of data from both sites (i.e., axial coding) were combined and used to identify broader concepts or themes.

To identify broader concepts and themes the researcher continued to use a constant comparative analysis to highlight commonalities, differences, and areas to further investigate by hand and with support from the computer software program (Glaser & Strauss, 1967). The clusters of interview data from both sites were combined to identify and compare concepts and themes. Then clusters of focus group data from both sites were combined to identify and compare concepts and themes. The researcher continued to compare various combinations of interview and focus group data in order to begin to develop new theory. Finally, concepts found common in interview data and focus group data were compared until new theory and assertions were made and confirmed in a repetitive process. After themes emerged, were refined, checked for reliability, and achieved saturation, the researcher developed a new concept map. As depicted in Figure 3, saturation occurs when the researcher makes an informed decision that no further information can be found to contribute to solidifying a new theory and framework.

After the researcher decided saturation was achieved, the computer software was used to generate a visual picture of the data, new theory, and framework that has been revealed throughout the constant comparative process. This computer-generated visual provides samples of data as evidence for conclusions and illustrates how the researcher obtained the new theory

and conceptual framework present in the last concept map of Figure 3. Finally, this computergenerated visual was used to summarize the research study's findings.

# **Trustworthiness**

The researcher designed the study, to include processes used during research that contribute to the rigor and trustworthiness of the data collection, analyses, and interpretation (Creswell, 2013). This section describes the validation processes the researcher used to evaluate the rigor and trustworthiness of the data: a) rich data, b) member checking, c) peer debriefing, d) triangulation, e) comparisons, and f) dependability are explained in relation to this study's procedures (Charmaz, 2006; Maxwell, 2005).

Rich data. This type of detailed and diverse data is gathered through long-term involvement and intensive interviews (Becker, 1970) that include verbatim transcripts and descriptive notes (Emerson, Fretz, & Shaw, 1995). Long-term involvement was achieved through sequential interviews and focus groups conducted over three weeks at each research site. Additionally, verbatim transcripts were completed for all interviews; focus groups, and self-debriefing sessions. Furthermore, detailed notes of were kept during the interview and made after the interview as memos.

Member checking. By systematically soliciting feedback about the data from the family and educator participants, the researcher attempted to verify the accuracy of the data (Bryman, 1988; Lincoln & Guba, 1985). The member check process involved asking the individual participants to review the interview and focus group written transcripts to confirm that: a) the content accurately depicted the spoken conversation, and b) accurately depicted the participant's intended perspective and meaning. The participants were asked to make changes, deletions, additions directly to the transcript. While the participants may have found that the content is

accurate they may have thought of additional explanations that would more clearly describe their intended perspective. The researcher encouraged continued contact through email or phone calls.

**Peer debriefing.** An outside person can serve as a peer debriefer who engages in discussions with the researcher for the purpose of assisting the researcher in: a) becoming aware of personal biases, b) improving the sensitivity of the researcher's attitude toward data and analysis, c) clarifying emerging ideas, and d) defending emergent hypotheses (Lincoln & Guba, 1985). A university faculty member from the Early Childhood Unified program within the special education department was the peer debriefer for this study. This individual understands the complexities of working with families and their children with exceptionalities from the perspective of an early childhood special education classroom teacher, teacher education faculty, and researcher. Interactions with this peer debriefer occurred throughout the study. Notes were taken during the sessions and sometimes uploaded to *NVivo 10* to be coded as data sources.

**Triangulation.** The triangulation process involves collecting information from a variety of sources and crosschecking the conclusions using multiple methods and sources (Maxwell, 2005). The researcher triangulation to ensure the findings of inquiry could be regarded as credible (Creswell & Plano Clark, 2011; Denzin, Lincoln, & Smith, 2008). Different data forms were used to substantiate the emergent themes. For example, in this study, the different types of data used included: individual interviews, focus groups, interview and observation notes, audio files, referential data, and survey data (Fielding & Fielding, 1986). In addition, simple numerical data or quasi-statistics will be used to assess the amount of evidence that supports a particular conclusion or determine if discrepant instances exist (Becker, 1970).

**Comparisons.** To assess for validity threats, comparisons were used throughout this study, particularly since a multicase or multisite study (Maxwell, 2005). As Miles and Huberman

(1994) suggested, the following comparisons have been made between: a) both sites, b) both school districts, c) families and educators, d) families and families, and e) educators and educators. In addition to comparisons being used within the data analysis process, the researcher purposefully created questions that required the participant to offer a comparative response.

**Dependability.** An audit of a study is sometimes used for ethnographic studies to assess the study's dependability (Lincoln & Guba, 1985). An auditor can confirm that the assertions and quotations in the case study can be traced back to the data. An audit trail for this investigation was created through *NVivo 10* software to ensure an audit could be done later if required.

Furthermore, reliability checks were completed for 20% of the transcripts. The researcher employed two reliability checkers to verify they would code and define definitions of themes in the same way as the primary investigator. The researcher and faculty member met to come to an agreement for coding and theme definitions.

#### **Chapter 4: Results**

The overarching goal of this study is to understand family and educator perspectives regarding the unique needs of a military family and their children with exceptionalities.

Particularly, the purpose was to better understand the partnership practices that currently exist between families living on or near a military base and the educators working for school districts serving military families. The qualitative methods used in this study were selected to address three guiding questions:

- 1. Do educators working on or near a military base routinely receive professional development regarding working with military families? If so, what is the content and how is it delivered or accessed?
- 2. What are the professional development needs of educators working with military families?
- 3. How do military families want educators to support them?

This chapter is divided into two sections. Section one provides a narrative introduction of the military culture, military family members and educators who were participants, and military and school programs that exist. The brief descriptions provided within section one provide the context for understanding salient relationships between ecological systems that impact the military family. This initial section provides a foundation for interpreting the second section of the chapter addressing the three guiding questions for this study.

Section two is organized by the three guiding questions while each subdivision addresses key categories and themes that emerged through the grounded ethnographic data analyses. Each subdivision is anchored to the corresponding ecological

system, the different data collection sites, the participants' perspectives, and the researcher's insights.

Names were either removed entirely, or when not possible replaced with pseudonyms to protect the confidentiality of the participants. Furthermore, each site's identity was kept confidential and will be referred to as Site I and II. The researcher's narrative reports were provided in first person voice when these were included in the text.

## Section One: An Overview of Ecological Relationships Impacting Military Families

Section one provides brief school descriptions of both sites and a description of the ecological systems to provide context regarding the setting and culture of this study.

### **Site School Descriptions**

As described earlier in the setting and participant description within the Methods

Chapter, the two sites where this study was conducted were located in a Midwestern state. The following brief description of both sites will provide a foundation for understanding the results.

Both sites were public school districts serving military families living on or near a military base. The first site, Site I, was a large school district that served a diverse population of families. This district was the primary school district serving military families living on or near a large military base which trained enlisted soldiers for their specialist areas (e.g., logistics, transportation, infantry). At Site I, schools were located on the military base and in the town surrounding the Army base. The schools were observed to be typical of other neighborhood schools you might find within the Midwestern state. All of the schools observed were single story smaller buildings with a contemporary appearance and style. These schools had average but well-kept playgrounds and nicely groomed school grounds. The only gates observed were surrounding the main Army post entrance.

At Site II, the school district was half the size of Site I's school district and only served military families living on or near a military base which trained officers for leadership positions in the Army. The schools were only located on the military base. All schools were observed to have a large electric security gate with some entrances locked to visitors. In contrast to Site I, the schools on this base looked elite. The playground equipment was wheelchair accessible, new in appearance, and the school grounds were groomed like an upscale shopping center. In addition to the main entrance gate, there were large security gates around each school, gates around public playgrounds, and gates around some housing units.

### **Ecological Systems**

Figure 4 below provides a visual depiction of the ecological systems relationships that emerged as family interview and educator focus group data was analyzed.

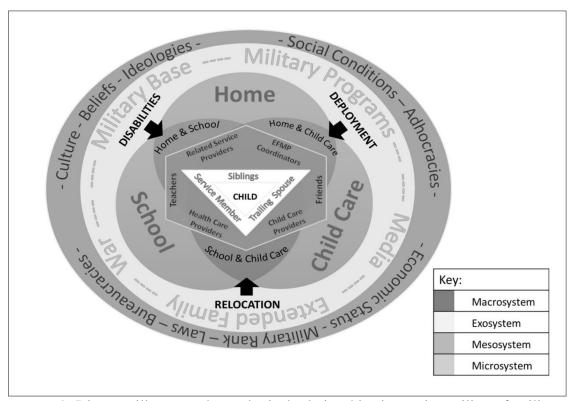


Figure 4. Diagram illustrates the ecological relationships impacting military families.

Specifically, emergent coding themes, using *NVivo 10* qualitative software, included military culture, military community, military resources, response to relocation, and response to deployment. These themes were then collapsed or refined into content themes by hand by the researcher.

Key findings are organized and presented by:

- Macrosystem: The culture impacting military families,
- Exosystem: Distal settings and events that influence children,
- Mesosystem: Interactions between proximal environments, and
- Microsystems: Proximal environments that directly impact children.

Macrosystem: The culture impacting military families. All military families are a part of a larger cultural context with a common identity. As stated by participants, "You all have that same thread in common of living a military lifestyle." "You have an instant bond," within the military community, no matter where you move. Military culture is dynamic, meaning that the elements of culture (e.g., beliefs, ideology, social conditions, laws, military rank, economic status) are frequently changing and evolving. The dynamic culture of the military is presented through two lenses. First, rules, regulations, and military rank are discussed as they pertain to the bureaucratic system of the military. Second, social conditions, values, and beliefs are discussed as they pertain to the adhoc approach military families use to navigate bureaucratic military systems.

The Military is bureaucratic. Bureaucracy as defined by Merriam-Webster's dictionary is a system of administration that has many complicated rules. Like a machine bureaucracy, military decisions are authorized at a higher level before they are implemented below, throughout the ranks (Mintzberg, 1979). During an interview one soldier explained, "The Army

is compartmentalized and bureaucratized. What happens is the Army identifies a problem, sets up a team to solve the problem, and that becomes a bureaucracy." Therefore, military families live by rules and expectations overseen by a chain of command. This bureaucratic system impacts military family members' lives directly, especially regarding their access to resources.

Complicated rules. Some rules are in place to maintain the beliefs, ideology, and order which may result in penalties for service members. For example as noted by an interviewee, there is a "Uniform Code of Military Justice, it's a big thing. Like, they can take money from your paycheck. It can be like your whole month's paycheck. That's punishment." These codes require military service members and families to "do things by the book, it's not like a normal job, it's just not." Although, service members are taught to do things "by the book," sometimes soldiers may be wary of following a particular regulation for fear of negative consequences. For instance, in a choice between the rules and what may be better long-term, the decision is usually to follow the rules. Service members realize that within the military community "everybody knows your business."

One of the regulations sometimes viewed negatively by service members is the mandatory U.S. Department of Defense enrollment program that works with all branches of the military to provide coordinated support and protection for exceptional family members.

Exceptionalities are defined in regulation as medical, physical, developmental, emotional or mental disorder. The Army Regulation 608-75 states: "this Exceptional Family Member Program (EFMP) applies to active duty and retired Army, Army National Guard, and US Army Reserve family members." However, because the exceptional family member's medical and special education needs are considered before the soldier is given an assignment, sometimes this protective regulation may be considered punitive. Parents stated, "One of the things preventing

military families from seeking help is EFMP." "People don't file for EFMP because if they choose not to have the services, then there's no record of it." Educators in a focus group shared similar information regarding parents signing consent for special education services, "I just placed somebody today and they were a little afraid of filling out the paperwork. They were almost opposed to services. I wondered if they felt like it was going to hurt their career."

Military ranks. The chain of command impacts military families in a variety of ways.

One way the chain of command can impact military families is when "there are breakdowns in the chain of command." For example again as noted by a family, when "resources are disseminated to the service member but the service member isn't receiving the information from the unit," this will require the soldier to go to his higher ranking officers to inquire about the information.

For a young soldier who's 19, fresh out of high school and basic training, who just knows to do what you're told, they are very hesitant to approach people. Normally officers are self-sufficient enough to find out information on their own.

A lower-ranking enlisted service member may feel as though asking for those resources will hinder future career advancement.

Another way a lower-ranking soldier's chain of command may impact the military family is when the command views the young soldier differently due to his experience. For example:

If you are a newly enlisted soldier, you are young, maybe you had dynamic issues like family issues at home, it's, "Oh this is just the family that has got problems." Where, if you are a commissioned officer with a college degree and you are having these issues, I think there is a much more helpful or supportive attitude from the command. Like, "Oh yeah. Go to EFMP and do this."

This kind of view of the young enlisted service member can be detrimental to the military family. As noted by participants,

Young soldiers who haven't been oriented yet, to know that it's ok, they need somebody to say, "Hey, if you are having a problem, let's get you some help."

That's what good leaders should do. [It is up to the commander to remove the] fear of stigma [from the soldier and to help him] have time off so he can take care of things.

However, even when the command is important, rank may still impact how the service member handles these issues.

The rank of a soldier is correlated with "different incomes" and that makes a "big difference. Income sometimes makes a difference in how happy people are." Therefore, income motivates soldiers to protect their ability to achieve higher ranks and may be one reason why enlisted service members are sometimes hesitant to ask for help for their family situations. In addition, rank is correlated with military experience. As a participant stated,

Higher ranked officers or even just upper enlisted, typically, they've been around a lot longer, so they know a little more about where to go and what to do to get help.

Due to the need to be resourceful in finding the answers they need, military families interviewed for this study learned how to navigate the bureaucratic military systems with adhocracies they developed over time.

Military families create adhocracies. Adhocracy is a flexible and adaptable form of organization that seeks to solve problems and get results (Waterman, 1990). Adhocracy is achieved through collaboration (Skrtic, Sailor, & Gee, 1996). Military families discussed solving problems regarding accessing resources and navigating the different military communities on an adhoc basis. Military families develop their understanding of each base's military culture, schools, and systems through their "neighbors basically, an adhoc process, it's if you happen to know somebody that lives there, you call them." Another spouse explained,

I met this lady who was married to one of the guys in my husband's unit. I was talking to her about my daughter's disability and school situation and she became my key source for accessing the meaningful information. [She reported this contact was able to tell her] you need to do this, go here, and call this person. [She

went on to say] All the information I have gotten for my daughter has been through other families that have dealt with this situation. The military is a small world; it's really a community where people are so good at rallying around you.

Families reported during interviews, that to get information they need, for results they want, they have to use "word of mouth." Importantly, families create these small adhocracies at each military base because it is a mode of survival since "consistency in the military does not exist."

Exosystem: Distal settings and events that influence children. An exosystem encompasses the links between distant or far away settings and events children are not directly involved in, but directly influence children. For example, children may exhibit behavior problems at school related to the deployment of a parent. The parent deployed is away from home for an extended period of time, which can affect the interaction that occurs between the parent at home and the children. The distal settings and events families and educators discussed involved the following: school programs, military programs, parents work, media, extended family, war, and the military base.

As key findings are discussed throughout this initial section of results, it is important to be aware that families and educators revealed relocation, deployment, and disability challenges to be the primary causes for stress in the military family. Two unique military challenges (i.e., relocation and deployment) were consistently discussed in relation to the impact on children with exceptionalities and their families. Although having a child with exceptionalities poses challenges for all families, caring for a child with exceptionalities creates some complex and distinctive challenges for military families due to the frequent relocations and deployments they experience. These challenges are interwoven throughout the remainder of this section.

*Military bases*. Both educators and families reported that all bases are different; some are "isolated" but have a lot of activities for families to be involved in, while other bases may be

large and located where families can access a "variety of different clinics" for support. "You are going to find different challenges at every base." Here key findings will be shared regarding social challenges, social emotional support, and feelings of security that military bases pose for families, their children with exceptionalities, and educators.

*Social challenges*. Military bases pose challenges for families, their children with exceptionalities, and educators because the population within the community is frequently changing.

It's not like when you live in a small town and you go to the corner store and find the same guy there every time. Everyone is constantly changing; people at the commissary, people at the PX, people at the shopettes, and doctors at your clinics.

For families and their children with exceptionalities this can cause additional anxiety. Imagine for children with autism who may struggle to visit their familiar family doctor or familiar grocery store, this can be even more challenging. Not only are the families frequently moving, but the local community is constantly changing every few months.

For educators, the revolving population brings challenges into the classroom. From their perspective, "The twenty children I started the year with were not the twenty I ended the year with." An administrator explained, "The turnover on base is something around half of the population on base, at the school building level about a third of the students change every semester." This causes educators to be vigilant about their communication with parents, so they will need to provide the beginning of the year information to the parents coming in during January. In addition, educators discussed the need to remember the children are coming from "several different places." Therefore, it is important for them to:

Stop to teach children how we do things here. You might have had different rules at your previous school, but these are our rules. This might have happened at your school, but at our school we do it this way. [It is important to remember to] uncover those hidden rules, I guess for children with exceptionalities.

Other educators in the focus group replied, "Yes, that's important, it is important to not just expect children to come in knowing what they are expected to do." Educators at both bases shared important strategies that can help everyone with the transition process within the school. These strategies are further described in Section Two of the Results Chapter and within the appendices.

Social Emotional Support. The setting of the military base provides families and their children with exceptionalities a community of support because of their shared military experiences. The social conditions on post make it easy for families to develop social groups. "I loved living on post because I have a support group." For families and children, making friends was described as being an easier process. "It cuts through a lot of red tape in making friendship. You don't have to worry, if you grew up in the same area. For military wives, we have an instant bond because we are married to soldiers." Another family explained, because they understand their time at any given military base is short, "Everyone gets really close to each other really fast." Wives talked about how living on post was beneficial for maintaining a positive disposition while their husbands were deployed.

Children living on post and attending a school with other military children experiencing the same dynamic lifestyle challenges may be more likely to have an easier time adjusting to the new location, depending on individual differences regarding social emotional competence.

Schools on base provide them with peers who are experiencing the same challenges of being new to the school. In addition, teachers working at a school on base are likely familiar with military life experiences. Children may not feel "as secluded" when they attend a military school.

One of the reasons it's nice to live on post, it's most likely your children are going to a school where every other kid is only there for a couple of years. They have to make friends too.

In addition, families reported that they feel educators and staff working at a school on base are more responsive to their children. For instance, during an interview one family stated:

When you go to school on base, the teachers, the staff, they know the military. They are more sensitive, and they understand that a military kid coming in from a different state might not be at the same level as the rest.

Living on post "is beneficial" for families and their children with exceptionalities because "when everyone on post knows exactly what you're going through, it makes a difference; and I think that's huge." Knowing that you have a place to live where others will understand what you are experiencing appears to provide families with reassurance.

Security feelings. Families moving to/from a military base may feel a sense of security because they are have "guaranteed housing on post", other resources, and consistent employment. As noted by a family participant,

We've got all these things guaranteed to us that most of us didn't grow up with. Where else will you find 100% employment? We've got jobs that pay way better than most other jobs.

Another participant compared growing up on a farm:

My mom had debt and worked two jobs, while my Dad always got laid off. So money was always a juggle for them, "Pay the light bill or feed the kid, we'll feed the kid." For us there is no juggling, we plan our budget ahead of time. I don't want kids that go without stuff because that's scary.

Families have a sense that the military will take care of them with these guaranteed benefits and resources they have access to while living on base.

*Military programs*. The military provides families and their children with two primary programs that greatly impact the lives of families and their children with exceptionalities. The two programs discussed in detail included the insurance program and the Exceptional Family Member Program (EFMP). These two programs provide support services that mediate or intervene to resolve challenges the military family and their child with exceptionalities may be

experiencing. These programs are designed to work together in providing coordinated services and care for the families and their children with exceptionalities.

However, sometimes the challenge for families is learning the different paperwork processes each base has for accessing or maintaining program services. Even with the challenges the families may experience in this process, from their perspective these programs were beneficial to their families and children. One family explained it this way:

I think being in the military has been an advantage for my daughter with cerebral palsy. I don't think she would survive in the civilian world. I don't think she would be where she is today if we didn't have the services within the family. Meaning the healthcare and insurance, the doctors on base always know what they are doing. We do have a support system at the EFMP that will send us anywhere there are services for her.

Although, these are two separate programs, most families discussed the benefits as one combined benefit. Next the benefits of how these programs are intended to work together to provide care and protection to families and their children with exceptionalities is discussed.

*Insurance*. Families have the benefit through their insurance to receive related services for their children with exceptionalities, such as occupation therapy, physical therapy, applied behavior analysis therapy, and/or speech therapy. As previously mentioned in the description of participants, over 35% of families reported having three or more related services. As described by one parent,

If it wasn't for the Army, my daughter would not be able to get speech services, twice a week, one-on-one, for a year. The insurance paid for that, I couldn't afford it without the insurance.

Other families shared significant surgeries, medical treatment, alternative therapies, counseling services, and behavioral therapy as covered by their insurance. Military families reported another insurance benefit.

We get reimbursed if we have to go 90 miles from the base to see a specialist. [That reimbursement can be for] gas, hotel accommodations, and food. We just bring in the receipts, the paperwork saying we went to the appointment, the paperwork that approved our appointment, and they reimburse us through our bank account.

Exceptional Family Member Program (EFMP). The military families who had chosen to enroll in the EFMP program explained the program as key to their child's positive development. "When we got EFMP, it was just wonderful. The information that we had and the support we had that allowed us to connect with a neurologist and orthopedic specialist was needed." One of the EFMP's objectives is to make sure the family is not stationed in a place that doesn't have the resources needed by the enrolled exceptional family member. One family talked about how the EFMP was currently trying to help their family get a "compassionate assignment" to a different Army base that is closer to the specialist they have been driving to see. A compassionate assignment "requires the soldier to make a request for deletion, deferment, or compassionate reassignment must be processed under AR 614–100 or AR 614–200" (AR 608-75, p17). The following description for what this request entails was found on an Army website. The soldier must explain the personal and "unusual circumstances that necessitate the soldier's presence with his/her family and no other possibility exists for resolution of family difficulties." (http://usmilitary.about.com/od/armyassign/a/humanitarian.-u4H.htm) Several families reported their personal stories or relayed friends' stories about the benefits of deletion, deferment, or compassionate reassignment. An example:

My friend thinks the world of EFMP because they were able to stay at their current base for six years. Her daughter has significant needs related to autism and needed to continue the services she was receiving. For a child with those kinds of special needs that is huge.

Another family who had a similar experience reported,

Although the EFMP itself can be very tricky to navigate, if we wouldn't have had EFMP when my daughter got sick in Korea, we would've been kinda stuck. The EFMP got us out of there.

Still others communicated they understood why maybe some people would choose not to enroll but wish they could explain to families the benefits.

Sure people are worried about not being able to go where they want to go. My policy was; if the Army doesn't want me to go there, then I shouldn't go there because that duty station won't have the right medical care for my son. It was never a decision. You sign up for EFMP and start services.

The majority of the families were satisfied with the programs, however as mentioned earlier navigating the paperwork and learning how to access the programs at their new base was "difficult or ridiculous." Many families relied on social media or social groups to help them through this process.

*Media*. In today's world, mass media is used to communicate information to large audiences across the world. This type of communication can affect all of us negatively or positively. The military families and educators within this study communicated the benefits of media (i.e., blogs, Skype, Facebook, websites). Here families' and educators' perspectives about the challenges and benefits of media will be discussed.

Challenges. Military families reported several different challenges related to using media, but stated the benefits usually outweigh the challenges. Several families discussed their child with exceptionalities becoming frustrated due to, "Not understanding Skype and the delayed response required between conversations." Another family talked about their son having anxiety anytime he sees them "Skype with friends" because, "He remembers Daddy being gone and Skyping." A couple of families were cautious about using social media due to the service member being deployed. "I don't go on there because if I ever get shot down, I don't want to have any data out there." "I just really am suspicious of it." These families discussed only using

"reputable websites" or shared the various "official" Army websites they accessed for military programs and each military base.

Benefits. Families use social media to access information regarding the military because "The Army offers everything, but you have to seek it out. If you don't ask about it, you will never know." Others talked about finding information regarding their next duty station through Facebook. "We're moving to Virginia, anybody know anyone there?" While others stated, "The main resource I have is a Facebook page that is for families of children with special needs." Some reported their "primary source for information is Facebook. Every base has an official Army page and a spouse's page." Facebook allows families to network, collaborate, and connect with each other for two purposes: a) to connect socially with others experiencing the same situations for emotional support, and b) to navigate and learn the different systems at each base.

Educators discussed using a Facebook page or classroom website to "connect and communicate with deployed parents." They reported having service members accessing homework assignments and then, "Doing the assignments (i.e., spelling, math, reading) over Skype with their children." Other parents used blogging websites to find out information at new schools or bases to which they would be relocating. Skype and FaceTime were mostly perceived to be positive because they allow the family to stay connected with the service member during deployment.

In summary, social media plays a significant role in all families' lives, but for military families it was more imperative in accessing information. Media is used to help families navigate the frequent moves, the different paperwork processes, and assist them in understanding the complex military systems on base. During interviews families discussed helping their child overcome anxiety or frustration by using FaceTime or Google Hangout during the next

deployment. Although there may be challenges with social media, all families talked about how they planned to continue using media to communicate and "network with other families" to gain information.

War. Although military families and their children with exceptionalities may never experience war first hand, they certainly are affected by the armed conflicts of the last decade. Non-military persons may not understand that war causes military families to experience increased relocations and deployments. Unique military challenges such as relocations and deployments affect family members, soldiers, and educators.

Relocation. As described in Chapter 3, 75% of the family participants in this study had moved more than three times. More importantly, 25% of the families had moved annually for the last eight years. These relocations occur sometimes before deployment, after deployment, and in between deployments. For example, when a soldier is deployed sometimes his or her family will move in with extended family members, which means they may move once before the soldier deploys and then once upon return. One family shared, "In general it's like entering this black hole with where we go next. For one, we don't have any control over where we go. We put in preferences, and they send us where they want." Children and family members become connected to people and then pack up and move again. One family member explained, "My children do get sad, but then it's like 'Oh, we'll see them later." Then she described how her family has periodically been stationed where former friends were located and how much her children enjoyed becoming reacquainted with their friends. At the same time, during an interview one mother described her son telling her that he didn't want to be in the Army when he grew up. When she asked him to explain why he replied, "I don't want to go wherever somebody tells me to live. I just want to live where I want to live."

Relocations that occur frequently may bolster resilience in children, but it is important for the educator to understand the relocation challenges and not assume all military children are resilient. Some children hide their emotions regarding relocation with a happy face but may isolate themselves from interactions with peers, depending on age and social emotional competence. An educator, due to the nature of the school setting, may recognize a child is struggling to cope with relocation because they have opportunities to observe the child in social interactions. For example one educator shared,

A parent might say, "Oh, we've moved so many times, they've been through this, they know the drill." And yet, [the child] is sinking further and further and not really thriving in their new environment.

Educators can provide the family with insights about the child's emotions and together they can work to build resiliency. Several educators shared strategies they have used to support families including:

EDUCATOR 1: I think that I do a lot of roleplaying with him. I try to help him overcome some of those things.

EDUCATOR 2: Families might not have all their stuff when they get here. So as teachers we have extra supplies and don't expect families to bring them.

EDUCATOR 3: A majority of our families are very mobile, due to the nature of their work, and have already had special education services in other school districts. They are trying to navigate the waters of coming to a new school district and learning that school district's Individual Education Plan format. [Our] educators make time to sit down and talk with parents when they have questions and help guide the parents through the school's IEP process.

*Deployment*. For this study, deployment was defined as anytime a soldier was moved into action for three to eighteen months. Families described their soldier's deployments as:

Limited phone calls, limited mail, and limited face to face communication [with the soldier for long periods of time.] Twelve months is a long time to be gone, sixteen months is even longer, and eighteen months is a huge amount of time to be gone from a family. [The Army has long deployments, usually they last] a year to sixteen months, [while other branches of service have deployments lasting a

month to six months.] So, six army deployments are a lot different [than what other branches may experience.] Not that being deployed for many months at a time, is worse or better, it's just, the Army family and soldier need something different.

For parents the enormity of, "taking a two parent household and trying to mold it into a single parent home" can be very overwhelming. The parent may not immediately understand they need to "give themselves permission let go of that two parent household" and realize they can maintain routines without so much stress.

Families and educators talked about the times during deployment, reunion, and reintegration phases of deployment all bringing their own unique challenges for families. Educators stated that we may,

Label it as deployment, but there's all sorts of things going on [for families and their children with exceptionalities.] Just be patient with the parents, because you know, especially with multiple kids, they are trying to do everything and keep it together. There's just a lot going on, you know. It's a whole new rhythm for people.

Yet, another shared, understanding that, "Families are going through an adjustment period, both when they deploy and when they come back during the reintegration phase." One educator felt like, "People don't do enough to prepare for deployment. I think you can do a lot more in the preparing for the deployment stage so it doesn't hit the kiddos as hard." While another felt that as the educator she needed, "To be a listening ear that guided parents to come to their own conclusions about supporting their children with exceptionalities during deployment."

A couple of educators described the emotional toll deployment and war had on them.

EDUCATOR 1: I had a student whose parent was killed and another student whose parent was severely injured and it - I still get chills thinking about it. It was a really hard year for me.

EDUCATOR 2: Several years ago I had a little girl who lost her father, he was killed. The Army came in their dress uniform, and she knew that he was killed.

She asked if they could come to my class and do the salute ceremony under the flag. That was a really hard year.

Educators who work with military families and their children with exceptionalities must be prepared to help everyone in the family during any phase of deployment or in the event of death. Part of understanding deployment requires the educator to understand how deployment might impact all the children in his/her classroom and to plan ahead how they might deal with various challenges.

Extended Family. Often military families will rely on their extended family members to help them during deployments. For example, some parents move back home to live with extended family members, while others have extended family members come live with them.

Extended families can provide social emotional support and child care support during the service member's deployment.

Social Challenges. Moving in with extended family members may cause the families a few challenges. For families that made that decision, they were confident they could overcome any challenges related to moving back home. One of the challenges mentioned was that the military family would likely, "Lose their place on the housing waiting list at their new post." The other challenge is the move to extended family member's home adds one additional move and transition for the family. "When I thought about unstructuring my children's routines with a move to be with extended family members, it didn't make sense for us." Finally, the family has to decide if the break in routine that may occur at the extended family member's house, will be beneficial for the family over a long period of time. For example, if you have a child with autism that extra transition and break in routine may be too much of a challenge.

Social Emotional Support. Having extended family members to help with child care is beneficial for the family in many ways. When the family is larger, managing all the different

tasks can be "a bit of a challenge" for the remaining spouse at home. One family participant's brother came to live with the family:

He would watch them during the day or if I had to do shopping, instead of dragging all three kids to a place to go shopping, he would watch them so I could go shopping. Then, in the mornings, he would help me get them ready for school.

Another told of her plans for the upcoming deployment, "I'm going to go home. I'm going to have babysitters. I'm going to have family. I'm going to have help with the kids."

Families explained how their family members mediated the stress of deployment. As one family participant explained, some trailing spouses experiencing "anxiety or depression" need support family members can provide.

I'm going home this time, because at the last post, I was having a hard time managing my own issues. I was with the kids and having a hard time but I was making sure the kids had support. I started going to therapy. That's one of the reasons I decided this time when my husband leaves, I'm going to go home.

Having child care support with the ability to get some alone time, as a Mom, can be therapeutic. Furthermore, a spouse at home who is dealing with depression or anxiety will require childcare in order to make time for therapy sessions.

Mesosystem: Interactions between proximal environments. Families discussed some interactions and relationships between people involved in the microsystem environments (e.g., teachers, peers, related service providers, child care providers, EFMP coordinators, and friends). Here key findings about interactions and relationships between: a) Home and school, b) Home and child care, and c) School and child care within the mesosystem are discussed. These interactions and relationships will be presented from the family and educator perspectives.

*Home and school*. Most of the interactions and relationships described by families and educators occurred between home and school. Families talked about educator practices regarding communication and empathy. One parent shared,

I would suggest better communication with emails, phone calls or notes homes. [When prompted to elaborate further, this parent explained] The teacher said my daughter was doing, "Great!" However, my daughter came home and said, "Momma, I don't like being in the low reading group." I didn't know. Her teacher didn't tell me.

## Similarly, another parent reported:

I feel like sometimes teachers don't realize just how, when they do call, or try to communicate, there's a really good way to do it and then there's a really bad way to do it. I like the sandwich method, when they open with a nice thing, give me the brunt of it, but end with, he did this at least. This way I'm not just hanging up the phone feeling empty, like, ugh.

While families discussed these challenges related to communication they also shared positive communication they have experienced. "My son's teacher is really, really good about sending home a letter every day." She described the letter to be a brief note about what the child did throughout the day. "Yeah, that's kind of going above and beyond, I feel like. At least, I know what she's doing so when she gets home I can read that quick note, and then I can ask my daughter about specific questions." While another family talked about the importance of a listening educator, "She was really listening to us and what we were trying to say, not what we were saying, but what we were trying to say." In addition to communication, many talked about the appreciation they have had for educators that "understood the military" and could relate to what they were going through as a family.

Other families explained they feel supported by teachers when they demonstrate high expectations for their children. "She understands little boys and she pushes him. She doesn't let him get away with anything." It is important for the teacher to be understanding but keep the "consistency" in the routine at school. Families didn't want special treatment for the children, just understanding.

The teacher doesn't have to treat my son special, but you know, if he sits there crying one day, the teacher might benefit from knowing why and be able to help

him with his emotions. If he starts acting out a little, the teacher can cut him some slack. Like I know you are going through a hard time, but it's still not okay to do those things. Understand their heart, that there's a reason for the behavior.

In order for educators to have this understanding the families need to trust the educator with certain information.

For example, educators discussed sometimes not knowing that a parent had deployed. "If you don't know what's happening, then you won't have that communication with that family." It's important, "As the educator to start building communication and trust with families early on so they will share information about deployment." Educators expressed the importance of getting to know each individual family's needs. Military families, like other families, respond differently to communication from the classroom. For example, some families may want daily notes and a few phone calls here and there; while others may think they get too much paper communication. "I think it runs the gamut of parents dependent on how much they trust you. Some are happy with just the weekly newsletters."

Similarly, other teacher's described "getting to know families" as learning what kinds of activities they are involved in outside of school, learning about challenges they may be experiencing, or being available to talk when they just need somebody to listen. For example,

Just listening and then you can adjust what you are doing for them for a time, keep in contact, and ask how things are going. I think most parents appreciate that kind of communication. Just ask how are things going, how can I help your child?

Another communication strategy educators used was being interested in what the families were finding successful at home. This strategy opens the door for families to share about things happening at home.

There's this way of communicating with the parent without being judgmental. "Is there anything you are trying at home that is working really well? If so, just to let me know so I can support you here at school." This type of communication

prevents the parent from feeling like they have one more thing to take care of, but may feel like they have already figured things out.

This is a good example of how educator's communicate strengths to families and empower them. "Let them cry on your shoulder and then say, 'Well, we've noticed some changes in the classroom, but we are staying constant.' By talking and listening to those parents, they have an outlet for their emotions." Furthermore, they may be able to figure things out just by having the opportunity to talk to another adult. Several educators discussed the importance of guiding the parents to come to their own conclusions in a decision process and how empowering this is for families.

Home and childcare. The key finding regarding interactions and relationships that occur between home and child care mostly revolved around parents' concerns in finding quality child care they trusted to care for their child with exceptionalities. Finding competent childcare providers who have experience working with children with exceptionalities was not an easy task for families. For example some families explained their experience with multiple childcare facilities because one or another child care could not "handle" their child's behavior. "After multiple daycares, we found a daycare owner that had her master's in special education. She was one of the only people that would take children with exceptionalities." Another family participant explained, "I worry about taking her to daycare, I wonder if they would understand or how they would deal with the tantrum." In addition, when the child care provider asked questions about the daughter such as, "Does she not answer to her name? Is there something wrong?" The parent said she, "Worried about how the child care provider would handle the stress of her daughter not responding." Family members worried about the childcare provider's ability to work with their children with exceptionalities.

As mentioned previously, it is easier for families to rely on extended family members than to trust their most precious gift with a childcare provider they don't have confidence in. "My in-laws are driving up just so they can help with the kids because I can't put her in daycare right now. I don't know exactly how to tell someone else to care for her." Families that were interviewed need quality childcare they can depend on for children with exceptionalities. These families did utilize private therapy and special education services, which may allow family members an hour or so a week to take care of family tasks without children.

School and childcare. The interactions between childcare and school professionals were not discussed given the fact that the families did not use childcare centers. However, one family discussed having a notebook that went between home, school, and an applied behavior analysis therapy clinic. This communication notebook was a very positive interaction and relationship model that was a byproduct of a family and school district working together to overcome misunderstandings when developing an IEP.

It was just so bizarre. I was like, why is this like this? Why are they making it so hard? We went round and round until our ABA therapist stepped in. He was the mediator that took care of it. He explained what we were trying to communicate and then it got better. We now share this communication notebook.

This family just needed an educator to ask the family to explain their thoughts and then take the time to listen. An administrator told a story related to the same family.

This year we had a family asking a lot of questions. They were very thoughtful questions, but sometimes that can be intimidating to a team when it is so in depth. So, the team continued to work with them. The parents continued to work with school personnel as well. It was a long, involved process. They were supposed to move to their next duty station before the father deployed but the army had approved that deployment would happen out of this duty station so that they could stay here. They wanted to stay because they were so pleased with the early childhood education.

The adults working together resulted in a productive and effective team and a positive child outcome. Specifically, the child with autism was able to benefit from what each adult including school personnel, related service providers, and family members contributed to supporting his continued learning and success. For this family and their child with exceptionalities, this negotiated outcome was very important to the child's development. Children with exceptionalities and their families are greatly impacted by the relationships between childcare professionals, school personnel, and related service providers that interact within their mesosystem.

Microsystems: Proximal environments that directly impact children. The daily learning environments of the child directly impacts their development and growth. Better developmental outcomes are associated with learning opportunities that occur when adults engage children in a variety of activities including reading books, using complex language, being responsive to the child's needs and interests, and modeling appropriate behaviors (Wolery, 2005). Here key findings will be reported from both the perspectives of families and educators.

*Home*. All of the families interviewed, lived on the post in Army housing. These homes were newer, duplex homes with garages. All homes were well-kept, organized and orderly, and smelled pleasant. In the living room of one home, there were three child-sized chairs with a tape mark on the floor so the children would keep their chairs in their own space. In several homes visual schedules, incentive charts, and artwork were observed posted in the preschool type play area, kitchen, and on the back door. Five out of the eight homes had preschool-type play areas located in the main living space. These areas had a table and small chairs, organized bins of toys, and children's books were observed on nearby low shelves.

Families shared several strategies used to assist with managing their children's emotions and behaviors. "My daughter works off of positive praise. We have a star chart that she knows what she's working for every week." Another parent reported that she used to be more flexible and loose in her home schedule but to support her daughter's needs she now is "more structured for her" daughter. She continued, "If we have a specific nap time, specific play time, family time, it seems to help her. It seems to help her mood and how she adjusts to things."

Still another parent described how they work to help their children express their feelings, "We have books on feelings for the kids. I think it is really important for us to talk about what we are feeling and to name the feeling so we can figure out a solution or a way of coping." Another parent talked about "keeping snacks on the counter low enough to where the kids can get to them" and requiring the children to ask for the snack. All of the parents interviewed use some form of private special education services because their insurance pays for it. Several families talked about private ABA therapy consisting of two to six hours a week and they also had private speech therapy services. They are "advocates" for their children and themselves.

Educators explained, "Military families strive to get the best they can out of their education system, almost in a very competitive nature." These expectations are fought for because, "Military families know they have choices and if they don't feel like the duty station meets the needs of their family, they are going to call EFMP and raise hell." Military families are usually, "Well informed, and are pushy on their child's behalf."

Military parents, however, are also just as critical of themselves. An educator reported, "Military families question everything they do because they want to make sure they are doing the right thing." Similarly one parent reported, "I feel like, if I would've known quicker. I felt like I missed it. You know, like I should've been seeing it earlier but he was my first child, so I didn't

know any different." Spouses feel an extreme amount of pressure to manage things at home while the soldier is working or deployed. They stated their job is to "be the glue that holds the family together" through all of the unique military challenges the families experience. This is especially challenging when they have a child with exceptionalities, "The biggest challenge is that military wives have to do it on their own. Not having the support that they need from their spouse because of the nature of the soldier's job." Some educators understood this pressure, "Sometimes the spouse at home just needs reassurance, a lot of the time, they know what the right answer is, they just need to hear from someone else that they are doing a good job."

School. The key finding derived from observations and educator's, and family's input was a sense that school should be a place where the child has a consistent routine and is a safe haven from the stresses of the constant changes of their military life. In this section, the school settings as a part of the microsystem framework is more deeply described using the researcher's perceptions and field notes gathered from observations during focus groups. Like most schools today, each school had security buttons at the entrance of the school. Visitors needed to buzz into the office to enter the building and sign their name at the office. The schools were clean with hallways decorated with character trait posters, historical figure posters, and children's artwork. Other features observed were quilts hanging, rocking chairs, seating benches near the entrance way, and plants.

There was one school, however that was strikingly different from all other schools on both of the bases. Specifically, in this school the impact of military rank was apparent, in ways that were not seen in other schools. There was a sense that here at this school, children's lives could be routine, calm, and safe; as opposed to the sometimes frenzied lives they may experience at other locations within the military culture.

As I entered the school, the office was to the right, but my eyes naturally were drawn to an open area directly in front of me. As I walked forward, there was a balcony overlooking the glass-walled entrance to a very inviting library. Looking down from the balcony I see a brick walkway located in front of the library. I hear water. There is a small tropical paradise of plants surrounding a water feature where water was flowing tranquilly over a mound of rocks into a small pond located just below the balcony.

This school was different than any other school I have ever entered. The water feature and other selective, coordinated, and calming interior design of the school was an indication that this school served officers' children. The peaceful interior of the school contrasted with the gated protection surrounding the exterior of the school seemed ironic. In many ways, the school seemed to be engaged in an attempt to lock the dangers of the civilian world and challenges of the military lifestyle outside the school environment, both physically and emotionally.

When listening to the educators talk about their role they supported this theory, that here at school things are different. "When they come here they feel safe. This is a part of their school family. They can be safe here." Other educators supported this idea with the following comments:

EDUCATOR 1: We are a little more detached from the military or deployment here at school. It might be more structured here than it is at home and easier for them at school than it is at home.

EDUCATOR 2: I think that's where you really try to keep it consistent. You want that stability for the kids. And that's where you keep your expectations at a higher level in the classroom.

EDUCATOR 3: Yes, things will be different, but routine is important. Children need stability in their lives. That's one reason children have an easier time at school than at home, because the routine is still there.

Educators took some time to describe the learning environments they set up in their classroom in order to help maintain a safe and consistent environment. Educators described providing materials for children, as well as using specific education practices they felt supported

the maintenance of a safe and consistent learning environment. They reported the following practices, "I have books on deployment and I have a deployment packet on stuff that I give to parents. Making sure our families know what's available in our communities because there are things in our communities." It is important to do the extra things:

EDUCATOR 1: Having a daddy doll in the classroom, having pictures of your families in the classroom.

EDUCATOR 2: Set up an area where my children could write cards or color pictures for deployed soldiers for all children. Along with setting up a quiet area they can go at any point of the day.

In addition, "speeding up the friendship process" by setting children up with buddies in the classroom was explained to be effective and frequently used. These activities build community within the classroom for all children. It helps children learn to be empathetic toward peers.

Childcare. As noted earlier childcare issues were not specifically solicited but the families interviewed were concerned about their childcare options. However, through conversations with military personnel, observations on base, and an additional website search child care information was found for both bases.

At Site I there are six childcare centers that offer part day preschool programs and hourly child care. Hourly childcare can be reserved thirty days in advance. At Site II there are three childcare centers on base that offer full day care, part day preschool, and hourly child care. Hourly child care can be reserved twenty-eight days in advance but the waiting list for the part-day and full-day programs is six to eight months. That being said, there is a way that families can be put on the waiting list prior to their arrival at the base, if they know to request this service. In addition, there is a family childcare system of in-home childcare available for families, at Site II, that are certified by the base and regularly inspected. These in-home programs, not only provide

child care during the day, but they are also valuable for families requiring overnight and evening care.

## **Section Two: Study Results**

Family and educator perspectives presented in section one described the military culture, community, and ecological systems that impact the lives of military families. In section two results are provided that focus on the family and educator perspectives regarding the professional development educators experience and need; and resources, concerns, and priorities military families have for their children with exceptionalities and themselves. Educator and family responses indicated that as a collective group they all had passion for children with exceptionalities and saw a need to improve their collaborative partnership.

The results presented in this section are organized into three subdivisions pertaining to each of the three guiding questions of the study. Key findings regarding each question are presented by the themes that were identified as data was interpreted. As each theme is described, quotes and examples from the data are provided. The topic focus of each of the guiding questions and the content focused themes that emerged relative to each question are listed below.

- 1. Question one: Current professional development
  - Current professional development
  - Historical professional development
  - Professional development barriers
- 2. Question two: Professional development needs
  - Family centered support pillars
  - IFSP and IEP related professional development
  - Shared responsibility for professional development

- 3. Question three: Supporting military families
  - Understanding the impact of relocation and rank on resource access
  - Ways to support families in accessing resources

Question one: Current professional development. A key probe used in interviews and focus groups was, Do educators working on or near a military base routinely receive any professional development regarding working with military families? If so, what is the content and how is it delivered or accessed? Educators from both sites shared information regarding their professional development and content for current professional development that was related to military culture. Figure 5 provides a comparison between current and historical professional development was delivered as explained and described by educators during the focus groups. Using this figure it is possible to contrast the professional development practices of both sites.

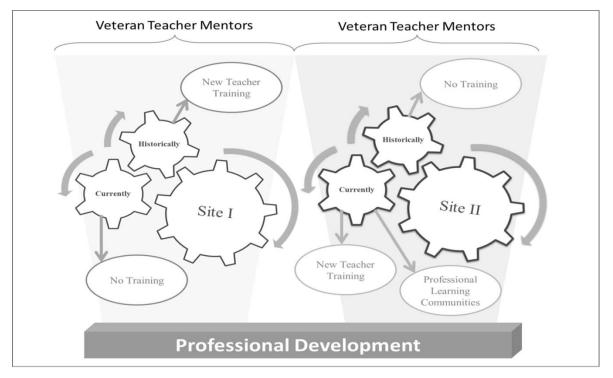


Figure 5. Diagram depicts the current professional development training educators receive at each of the study's sites.

In focus groups and interviews with educators often their first response regarding professional development was a statement about utilizing informally assigned veteran teacher mentors to gain important military information. "I would go to a co-worker. Tell me what this means, after the parents would tell me something I didn't understand." An educator from Site II responded, "The best thing for me was working here and being around people, having people in my room that were military and understand it and can explain each child's situation." Formal professional development does not equate with veteran teacher mentors but it was a key finding that merits consideration for further developing as an informal mechanism of information delivery.

Current professional development. The researcher purposefully did not define professional development pertaining to preparing educators to work with military families to assure broader responses. Site I currently offers no specialized training pertaining to working with military families. Site II identified the availability of a new teacher training program and the use of professional learning communities. During a Site II focus group educators described new teacher training:

EDUCATOR 1: I went to new teacher training just this year when I was hired and it was about – we came three or four days earlier than the rest of the teachers and one full four hour period of that new teacher training was devoted to helping all the new teachers as best they could understand the culture of the military and the special needs of the child. I was to quote our superintendent, "We love you and we are glad you are here. But, we are here for these kids and it is an honor to serve them, so you need to get to know what that's like." And there were a lot of military wives who are also educators there so we were put on the spotlight for those newer teachers who were coming in and they were putting us – kind of like, "How would you answer this?" or "What do you think about that?" So, it was more of a dialogue. They did bring in some of the people from the programs that are resource-wise to say, "Please point them in the direction." It was a very clear thing for all new teachers coming in.

EDUCATOR 2: It was more of an introduction.

EDUCATOR 3: Can us old ones have a revision course?

The educators seemed to be proud of this training and considered this professional development as meaningful and a good use of their time.

At Site II, some educators considered professional learning communities (PLCs) to be a form of professional development where they gained information about working with military families. "We have really good professional learning communities for each grade level and we really rely on each other." "Yes, I think our PLCs are really good, we work together so closely." The educator that was advocating for PLCs was younger and the knowledge she reported gaining through this experience was learning how much to communicate to parents. "Just seeing in the PLC meetings, how much the other teachers communicate with parents. How much to communicate with parents. I always thought, you can't communicate too much with parents. But then, parents kept wanting more and more."

Historical professional development. As Figure 5 shows, Site I and site II reported opposite historical professional development practices. Site I discussed a previous new teacher training she remembered during a surge of deployments. "Years ago someone from the post came and talked to all the teachers. This was right around Desert Storm. The person who came before, he had kids in the district so it was from the parent's perspective." While at Site II the educators did not remember having a military-related professional development training in the last five years.

It is interesting that both sites reported a similar new teacher training opportunity. Of equal importance, these professional development opportunities did not appear to be routinely offered to teachers. Based on the conversations about when educators would want these types of

trainings it may be that district personnel consider a surge of deployments or other factors when planning this type of training.

It might need to be done more on an as needed basis where you could sign-up. Or maybe if the district knew there was going to be a surge of deployments. Then that would be appropriate, but like right now when things seem to be calming down, it may not be needed.

Other educators within this focus group suggested that "online modules" or "websites" pertaining to "military acronyms and basic information about culture" be offered to teachers. Educators indicated they would more likely utilize these types of professional development as a resource, as they needed support. There may be other reasons why the districts choose or do not choose to make a professional development opportunity available to educators regarding working with military families.

**Professional development barriers.** The other important consideration for professional development, revealed as a content theme in the analyses, is that holding tight to roles can create barriers. For example, roles may give us a false assumption that someone else is taking care of providing valuable information to families.

Professional development for parents, that becomes more challenging. They have the EFMP, the exceptional family member program; they have things within their own setting in which to call upon. My role is to work with the special education staff and provide them with as much information as possible, while trying to partner with our families. There certainly could be times when we would ask our families to join us on something, but I actually focus on needs of my staff, which are similar to those of our students, in reality.

Similarly, when talking to an EFMP coordinator, she stated the EFMP office at one time provided special education trainings /military trainings in partnership with schools to families. However, now since all the school districts provide special education services by law they trust the schools to provide support to parents.

Several families stated they took college courses specifically for the purpose of gaining information that would help them navigate the special education process. When military families feel like they aren't getting the best service from the education system, they may sometimes "raise hell," "complain," or "get loud" with teachers. Families also discussed wishing they had a military advocate.

I would like someone I could sit with one on one and show them the IEP. Let them know what my daughter is going through in school and how is she developing. Then they could say, 'Okay, I don't agree with this teacher. I don't agree with what they are doing here.' Something like that would be very helpful in the military community. We don't have that. We just have what the teachers are telling us through the IEP, which you put that trust in them, to give you the correct information and your child is going to be okay.

Yes, military families are informed and expect the best from educators. However, remembering families come from many different places and experiences may explain why a parent may want reassurance from an advocate that "everything" the district has proposed in the current IEP appropriately addresses their child's current learning needs.

As mentioned earlier, both the representatives of the EFMP and the school districts view their own role as providing very specific supports to families. However, these clearly defined roles may pose a problem for families if each party is assuming the other person is providing that particular support. For example, if the school district thinks the EFMP coordinator's role is to provide families with transition training, while the EFMP coordinator views their role as just connecting families to available related service providers, then families may not being prepared for transitions.

Perceived roles of school personnel and EFMP coordinators in the above testimonies possibly prevented families from receiving training regarding the IFSP/IEP processes.

Additionally, family interviews revealed that many families chose to go back to college

specifically to gain information about special education law and IFSP/IEP requirements.

Furthermore, families felt taking college courses provided an assurance of information which may help them navigate the special education processes that vary between school districts.

Question two: Professional development needs. The key findings regarding professional development needs were focused on: a) family-centered support practices that assist families to be full-fledged team members to assist in creating quality transportable documents in case of deployment or another military relocation; b) IFSP and IEP related professional development regarding process timeline, transition, and individualized goals; and c) shared responsibility for professional development to maximize resources and make sure needed training occurs.

The data analyses revealed communication and the IFSP/IEP to be emergent codes from both family and educator focus groups. Table 6 shows the average number of references to communication and the IFSP/IEP at each interview or focus group.

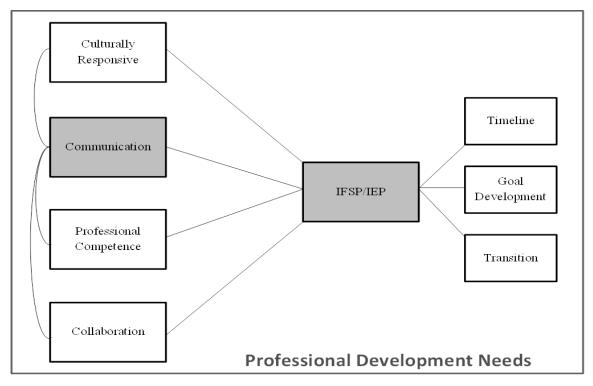
Table 6

Average number of references to each emergent code

	Site I		Site II	
	<u>Families</u>	Educators	<u>Families</u>	Educators
Communication	14.4	9	7	16.6
IFSP/IEP	15.4	10.4	32	4.3

These emergent codes were then further collapsed and refined into content themes such as, culturally responsive, communication, professional development, collaboration, IFSP/IEP goal development, IFSP transition to IEP, and IFSP/IEP evaluation timeline. Figure 6 illustrates the relationship between these codes. Culturally responsive, communication, professional

competence, and collaboration are family-centered practices required of all members of the child's IFSP or IEP team in order for families to be satisfied and the child to reach their goals. The professional development needs regarding the IFSP and IEP include: timeline, individualized goal development, and transition.



*Figure 6*. Diagram illustrates how the emerging themes of communication and IFSP/IEP were further analyzed to organize key findings.

Family centered support pillars. Throughout the study and data analysis process four content themes were noted to be important family-centered practices which serve as a foundation for achieving outcomes related to developing quality IFSPs and IEPs. These family-centered practices (represented by the pillars in Figure 7) were either directly talked about or inferred during the interviews as significant practices educators needed to use or already used.

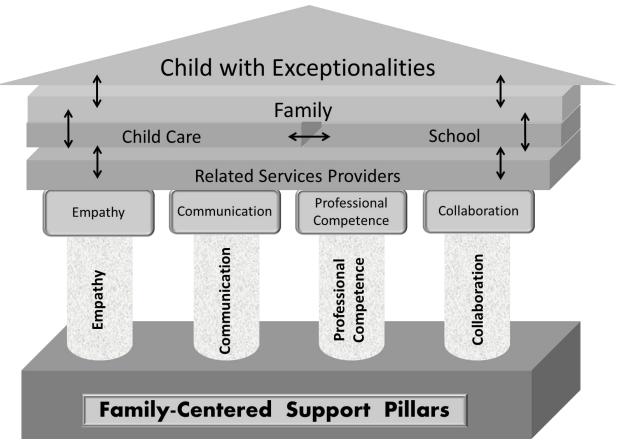


Figure 7. Family-centered support practices

Empathetic practices. The culturally responsive practice of empathy, visiting children's families and learning about their community is important for all educators. By getting to know the children's home and community environment, educators have insight into behaviors of children and know what resources to use to help children (Gay, 2000). During a focus group educators suggested, "There is a need to understand what the military family goes through, the infrastructure of the military, an overview background of deployment, military terms and acronyms, chain of command, that kind of thing." Practices that can lead to a better understanding of military lifestyle were described as, "I have reduced homework assignments to balance things out." Another practice is understanding that sometimes, "I may adjust my expectations somewhat to accommodate a family's situation." More common things used by

educators to show responsiveness included, making "deployment books" available for children, posting "family pictures" on the wall, and "sharing common experiences" with children and families.

Educators may need to develop an appreciation of military families that may be different from themselves. Importantly, educators can learn the histories and experiences of families from the perspective of families (Gay, 2000). Several, educators mentioned the different priorities of military families in a less than favorable tone. The tone of the educators' responses indicated that these educators had used their own priorities as a lens without reflecting more deeply about "why" military families seem to have their "priorities mixed up." For example, educators complained about families being, "tardy to class, taking extra days off around holidays, not having school supplies but having new shoes, and children having electronics as babysitters" to name just a few. The educators had not considered why the military wife may get her children to school late, from the perspective of a family involved in deployment or relocation. Wives reported the challenges of learning a "new rhythm" of managing a "two parent household as a single parent" which includes "grocery shopping, cleaning, doctor's appointments, mowing the lawn, and doing homework" which is exhausting and sometimes they just drop the ball. Children not having school supplies may be due to families "living in transition housing on the base" and their "household belongings have not yet arrived." The reason the child may come to school with new shoes, rather than school supplies may be that her parents want her to be as "normal as possible," so that her disability doesn't impact her friendships.

I got her the latest shoes, even if they cost \$80, which they did and my husband wanted to kill me for that. It didn't matter. They were name brand. And all the girls were wearing them at school and she needed to be like everybody else, so she can be as normal as possible.

In addition, new shoes may be a priority due to the needs of a growing child. There are many reasons families choose to do the things they do, but unless educators use some informed perspectives to view these decisions, a judgment may be made that is possibly unfair.

Communication. Communication was a significant content theme because educators and families talked about this topic often. However, the underlying communication issue that was inferred from observations, stories, and the tone of participants was the inability of both the educator and perhaps the parent to hear what the other person was meaning to say. The barriers to communication existed because of people's roles in the relationship, past experiences, and even lack of understanding of the perspective of others. Appendix C contains a poem about communication created by the researcher using key quotations concerning communication needs of families and educators. Empathetic communication which requires both parties to seek to understand the other's perspective through clarifying questions was not clearly apparent. This appeared to be especially true in the context of an IEP meeting.

*Professional competence*. Geller's (2002) definition of unconscious competence may be applied to an educator's professional capacity and understanding, sometimes educators have been described as not "knowing what they know." Sometimes veteran educators don't realize all of the teaching strategies and evidenced based practices they are using throughout the day. One family member described professional competence in this way:

The benefit is their practice in the classroom and reacting to the child and especially teachers who have been doing it for a while, it's very organic, you know, it's the child and I completely on board with that. It's an artisan. It's an artistic type process. It's not a lab.

The veteran teacher can be everything a parent would want in the classroom because they automatically provide a quality education to children and set high expectations for children, all while they continually learn and adjust their teaching according to the child's individual needs.

However, a quality teacher that can't articulate and document the evidenced-based practices and strategies they are using may not adequately prepare a detailed IEP. For the military family that is frequently relocated it is important that those details be placed within the IEP. Therefore, helping teachers recognize the effective strategies they are using in the classroom and keeping documentation of these strategies is a vital professional development need.

Collaboration. Another quality of a "gold standard" teacher is their ability to collaboratively work with other staff, families, and community members. As one administrator reported:

A well-rounded, quality educator, no matter what year in their career, will have a knowledge base, will look at the whole child – not just the disability, will be able to work with parents, will work with their administration, and will work with their peers in a collaborative model/method.

The district at Site II reported that they provide, "general education and special education time to collaborate" each week "as a professional learning community" in order to discuss data, plan, and meet the needs of the students. For this district working with other educators collaboratively is highly valued by educators and administrative staff.

Families, however, reported collaboration needs from a different perspective. One family reported the following frustration, "There was disjointedness between people. Like it's supposed to be a collaborative team, but everybody works as individuals." Thus, showing from the families' perspective, educators need to learn to work collaboratively with parents and each other in the context of IEP meetings and document development. Highlighting the importance of remembering the family-centered support pillars in Figure 7 are interrelated; they are connected to each other and have a reciprocal relationship.

*IFSP and IEP-related professional development*. Professional development needs regarding the IFSP should be focused on training educators to assist parents in transitioning from

IFSP services to IEP services. As with many locations, IEP professional development needs were related to writing individualized measurable goals and making sure enough details about accommodations and modifications were included in the IEP. This was a general need, not specific to military families. However, one of the most important and unique professional development needs pertained to the need for schools working with military families to consider expediting their evaluation and IFSP/IEP process time due to their unique military lifestyle.

Transitioning from an IFSP to an IEP. The professional development need for effectively supporting transition is also not unique to the military. As recommended by the *Division of Early Childhood (DEC) of the Council for Exceptional Children (CEC)*, "Programs should offer access to parent education activities which promote the family's and professional acquisition of new knowledge and skills to strengthen competence and confidence." (Wolery, 2005. p. 118)

Additionally, Rous and colleagues (2007) recommended parent transitional trainings, information meetings, and parent-to-parent support groups to provide empowering support for parents. Transitioning from IFSP services where the family is centered in the evaluation process to the IEP where they are simply a part of the process served to be very difficult for family participants. One educator thought parents may need transition support, such as:

I think that just helping parents by explaining in enough detail, that families understand what their child was doing and what the child's level was at the previous school. Then specifically explaining what the new goals are, what procedures they can expect. So they feel less confusion and misunderstanding perhaps about where their child was and what they were doing versus what they are doing here and how we do things, just helping clarify anything that may be different.

#### As one family described:

It is so hard to have a child with special needs. And when you don't have that support moving in, it's like a whole mountain on your back. You already have a whole mountain on your back that you put there on your own because you are trying to give your child a normal life.

Parents were opposed to or frustrated when the school district presented a preplanned IEP.

You can tell the school is just like, we have to make sure I check all these boxes or else we'll get sued. So that's what it kind of turns in to. They're not very flexible in their approach. Like there's a definitive way they are going to approach the IEP and what they propose, whether the parents want it or not, that's the way it's going to go because they have to make sure they check all the boxes.

DEC of CEC family-centered practices also caution educators to avoid this practice and instead develop IEP goals together (Wolery, 2005).

Another parent shared her transition experiences as being a chain of frustrations that delayed services for her son.

What would happen is in these transition meetings, when my son was transitioning they would do these tactics where they would have you come in with your early intervention person. They would have a few special education people from the department at this office and they would talk to you and sort of watch the child, but they wouldn't do any formal assessments it was all observations. At that point, I didn't know being new to the process. I had no idea. The lady just said, well, he is not going to qualify for anything.

Obviously this parent just described play-based assessment, a common practice for assessing abilities of young children (Lowenthal, 1997). But without prior explanation or understanding it is easy to see why a parent who is accustomed to more formalized assessment may be upset. For the parent that is frequently relocating and moving between states and localities the differing practices in terms of service delivery models, can lead to dissatisfaction with services. This can lead to parents feeling hopeless, frustrated, and defeated. Therefore, programs need to not only prepare their educators to provide parents with family-centered transition support, but also programs, trainings, or meetings need to be planned to support parents in gaining confidence in their understanding of the transition process.

*IEP individualized and measurable goals*. Several families reported that they felt the goals on their child's IEP were not adequate. Parents stated they felt the goals did not seem to fit

their child, they were "cookie cutter" goals, or the goals were not measureable. The following is one parent's account of an IEP meeting.

From the school's perspective, when you tell a parent you want their input, you want them to just come in and have a conversation about what their child does at home or fill out a survey and say, this is what my son's like and these narrative type things. Note: The parent recalls a specific conversation during the IEP meeting. [So, parent said] Well, from my reading of the IEP, we need a present level of development, we need a future goal and we need benchmarks in between that tell us where we are going on time. How are we developing the present level of development? Where's that coming from? [School personnel responded] Well, we are going to watch him. We are going to do classroom observations. [Parent says] Ok, I have no problems with qualitative, subjective data. But at the same time, let's do some quantitative instruments and get some measurements down that are transportable. Because my biggest beef with all this is transportability. For military families, we're moving. We move every year. This is the longest we've ever been anywhere and we've been here for 2.5 years.

#### Similarly another parent tells:

A good IEP has measurable goals. You got to have data to back up what you are doing. I can only imagine how difficult they are to write especially if you have lots of students. But unfortunately, I found the contrast has been this is a systems-based, cookie-cutter approach. When we first got to this district, the school told us, 'We just do a behavioral goal, in the behavior classroom he is in.' I said, 'But my son is academically behind and came with academic goals. Let's get him to where he can be in that classroom.' I refused to sign the IEP. I looked at her and said, 'I am not signing your IEP. It is junk.' I am not going to sign an IEP that says, My son will not whine, cry, or shout 40% of the time. I said, 'How are you going to measure that goal? Tell me how you will measure that. What is whining to you?' I said, 'You guys are obviously admitting he is behind, where are the academic goals?'[The researcher says] He didn't have any? There weren't any academic goals on his IEP? [Parent replied] No. So, I refused and she called me up like a month later and asked, 'If I throw in some academic goals, will you sign it?' I said, 'No, we are not going to wheel and deal.' He needs to be reevaluated. If you aren't going to take the recommendations that came from elsewhere, then you need to do a reevaluation.' Then, we can make a whole new IEP.

There were other stories that were similar to these regarding IEP goal development. In particular, families seemed to report these issues with goals when they were transitioning into the school districts. Although this need is not unique, school districts that serve military families may require additional professional development pertaining to: collaboratively working with the

parent to develop the goals of the IEP, thoughtfully developing measurable goals that are individualized to meet the child's academic and behavioral needs, and evaluating the child in a timely manner. Military families in this study seemed to be aware of their rights and held educators to high standards of performance related to the IEP process.

This should be a planning process. It should be a design process. We should be visualizing our end stage. We should be coming up with goals that align with our desired end stage. Mixing the art and science together, and then the teaching, the doing can be artistic.

This is especially important to the military family that consistently moves from place to place. As the one parent stated, the "transportability" of an IEP is important and a concise IEP will be understood, which means the receiving team will be more likely to adopt the IEP and ensure a seamless transition.

IFSP/IEP expedited timeline and process. As previously noted, relocations for military families occur frequently which impacts the child with exceptionalities and their parents. When school districts wait their allotted 60 school days to complete an evaluation this means services may not be fully implemented for several months (34 CFR 300.301(c), 20 U.S.C. 1414(a)(1)(C)). The true concern then is for those children who are moving every year. The cumulative impact of delayed and inconsistent services can be detrimental to children's achievement of outcomes. Therefore, school districts may consider amending their timeline for military families to prevent delays in children's services.

Nevertheless, it is equally important to consider the military parents' perspective that extended evaluations create additional stress and pressure for the family. Primarily due to the uncertainty of relocations described as "black holes" and the danger of deployment. Military families have a sense of urgency related to taking care of things that non-military educators and administrators may not understand. The following is one father's lengthy and moving account of

their view of time. This parent was an officer who had a substantial leadership role within his military unit.

FATHER: I'm talking about, like I need to get this evaluation and IEP done now. I need to get this done right away. They are like, 'No, there's no rush. We've got all the time.' I'm like, you don't understand. I might be deploying. I want this nailed down before I go. I don't want to be thinking about this. I don't know what other dads do, but I know that I'm active in this process and I don't want to leave her loose ends before I leave. 'So we are going to nail this down now or we are going to have a problem!' Then the school said, 'Well we can videoconference with people.' I don't like to say this, but there are people that have really hard jobs and there are people who don't, So just because some guy had a job where he had the time to be available to video conference from a different time zone, doesn't necessarily mean that would fit my schedule. I don't want to say, 'Well look, it's not like I don't care about my son, but at a certain point, I have responsibilities to other people when I'm deployed.' I mean, when S--- was going through the IFSP and stuff, she would call and T--- would just be screaming on the phone. I had been up for 20-22 hours every day, just trying to get us out of Iraq. I'd come home and try to have a conference, Skype or whatever the case is. She's like, 'He's crying all the time, I don't know what to do.' I'm thinking, I don't know what I can...what can I do? I was like, call so and so, and you know. I can tell she was frustrated with me, because you know, I couldn't, and she didn't expect me to...she knew rationally there wasn't anything I can do. But that doesn't change it emotionally. So then I'd get off the phone and I'd just be a disaster.

WIFE: He wasn't sleeping very much anyway. He was like literally working as much as he could around the clock, trying to get everybody shut down, shutting everything down so they could come home from Iraq.

FATHER: Like we had a guy that got shot out on patrol, and it was like a month before we were supposed to leave. I was like, 'Ahhh, if we had just worked faster, we could have been done.' I don't want to repeat that again. I don't want the school to not have the testing done that could've helped T--- get into some program because they had all the time in the world. I just, I know they work with military all the time and they can relate in a way because they've seen it, but they're not on the battlefield they haven't experienced it from my perspective. When someone tells me I have all the time in the world, my son's 3 years old and I've been around for a year of his life, because I was deployed the other 2 years, I don't want to hear about having all the time in the world. What I wanted to say, but I didn't want to be melodramatic; is there's no guarantee that I'm coming back. 'So, don't tell me I have all the time in the world.' Clearly I am not in a position where that is likely to happen, but I don't like them to presume it. It's ok for me to presume I'm coming back, but for her to presume it, NO!

During a focus group, an administrator explained that the law was created to protect the child and to ensure a thorough evaluation occurs.

The law was designed to protect children, so it is again that education piece. You may not like it and we don't have to agree, but the law is the law and there has to be a comprehensive evaluation. That's where the 60 school days comes in. We are following the law that is there to protect the child. We cannot do a truly comprehensive evaluation that happens over time. We can't just take this data from this week, or data from the last few weeks. Because we want to be sure that it is a measure over time for children.

However, when the school district, "waited until the last day" this parent had the following impression, "they were just messing with me because I was having them work more than they wanted to." This type of discourse can create tension in the family professional partnership that is not ideal for supporting the child in meeting the maximum learning outcomes possible. Expediting the special education process for military families moving in with an existing IFSP/IEP is a proactive way to demonstrate responsiveness towards military families' unique needs. The child receives full or appropriate services sooner and the parent can experience some relief and comfort in knowing their family has been taken care of.

Question three: Supporting military families. The final guiding question focused on understanding how military families might want to be supported by educators. This final subdivision of the results includes: a) understanding the impact of relocation and rank on resource access and b) providing suggestions for supporting families in accessing resources. The key findings are supported with quotations and examples. Table 7 presents the challenges of relocation and the service member's rank.

Table 7

Interactions between soldier's rank and resource access at each site

Enlisted Rank	Officer Rank
Decreased Resource Access	Increased Resource Access
Less Experience	More Experience
Path to Access Resource	
1. Social Media	1. Directly to Program
2. Directly to Program	2. Commander for Assistance
3. Commander for Assistance	3. Social Media

Understanding the impact of relocation and rank on resource access. Families and educators reported that just as every base is different, so are the resources available at each base. Thus, the paths to resource and program access vary, with a different set of expectations or rules, at each base. This requires basic knowledge of where to go to access the resource, as well as effort and time.

I am still finding out about new resources and there are a lot of families that don't even know. Yesterday, I met a lady – her husband had been in the military before and he became a civilian, then rejoined after marrying her. Even though her husband had already been in the Army, she is learning new things all the time.

Families explained even with common family paperwork, military spouses cannot do all of the paperwork required unless the spouse has a power of attorney because "all paperwork disseminates through the service member." Often, a military family who has been in the military for a longer period of time has a basic knowledge of various programs and resources that should be available. This basic foundational knowledge provides the service member with a place to start looking for resources and a better idea of the best set of questions they can ask about accessing requirements.

Resource access, thus, may increase due to the accumulated experience of the service member. In addition, the lower-ranking enlisted service member is more likely to use social media to gain access to information, while the higher ranking officer is more "wary or cautious" about using social media.

This could be an artifact of age or having more negative experiences with fall-out from personal information or brief comments being misused or misinterpreted by others within a command. From the commander's perspective, a younger service member may not have established credible reputations. For example, one commander was not willing to let the service member have time off for his daughter's birth until the doctor confirmed his wife was truly in labor. In addition, some lower ranking soldiers fear asking for help will be a "blot on the record." In addition, an entering service member may not wish to or know how to "seek help in finding resources." However, "in this day of budget cuts" soldiers are cautious. Especially, when the soldier is seeking help for themselves because a base "is such a closed place" and "everybody knows your business." Therefore, a higher ranking officer is more likely to know where to gain access to resources on base or will go directly to the commanding officer, while the lower ranking enlisted service member is least likely and often discouraged by peers to go to the commanding officer for information.

It is known that soldiers fear having "a stain on the record." However, it is concerning that commanders and leaders may be less likely to support a lower-ranking soldier in accessing support due to their own perceptions of the soldier's "family issues." Therefore, the commanding officer on post is the link that can change this fear and stigma for the newly enlisted soldiers. Importantly, by having this top-down priority of nonjudgmental support for soldiers, families can access resources that will reduce military life stressors and build resilience

in all family members. Moreover, reduced stress may be associated with improved adult and child interactions (Repetti, Taylor, & Seeman, 2002).

Ways to support families in accessing resources. True support for military families requires a systemic change in the way the military system interacts with school systems regarding mutual and unique roles. Throughout this study families demonstrated the need for the resources and programs that already exist for them, but are less accessible. However, families indicated frustration with gaining access to resources or the difficulty in managing the coordination of services. As a result of the ongoing analysis, it has become increasingly apparent true collaboration barriers exist between the military, schools, programs, and families.

At the beginning of this study, my hypothesis was that specific educator practices would positively affect military families. This study was designed to gain insights from two sites the primary researcher perceived would be able to provide salient and perhaps contrasting insights about what military families need with regard to support for their children with exceptionalities due to frequent deployments and relocations.

In fact, real support may begin through a partnership between military and school leadership. Figure 8 illustrates how this partnership can play a key role in providing coordinated professional development opportunities while jointly making policy changes which may improve resource access for families and improve the understanding of educators as to the unique needs and supports for military families whose children qualify for special services.

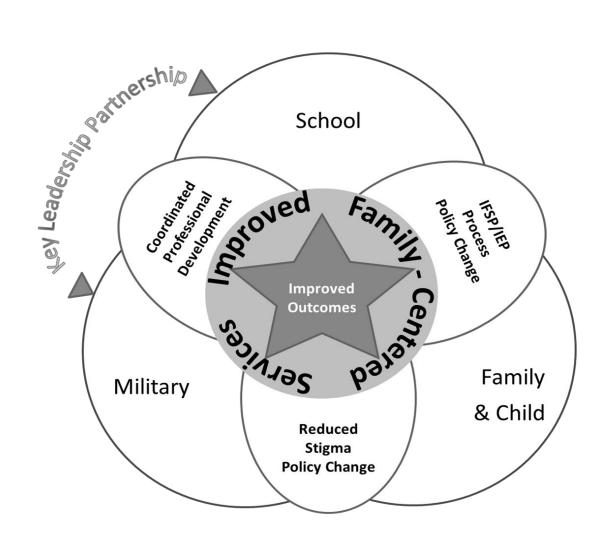


Figure 8. Diagram illustrates how a partnership between military and school leadership can improve the family-centered services that support military families.

During an interview with a family member who was also an officer, he suggested the key partnership to be between the military post commander and the school superintendent. It was his belief that through this leadership partnership conversations could begin about needs and resources they each bring to the table, and perceptions of how they can improve their partnership. This collaborative effort should result in the coordinated professional development discussed previously. The military leadership then could focus on reevaluating programs or "releveling of the programs" to eliminate potential barriers. In addition, the military EFMP coordinator may benefit from a partnership with the command on base to reduce the stigma of

enrolling in the EFMP program. This would require a partnership between the command, the EFMP coordinator, and families.

Similarly, schools may benefit from a partnership with families to reevaluate and change the IFSP/IEP process. One potential way to eliminate stress on families is to adjust the evaluation timeline and procedures in which school personnel and families actively work together to develop the IFSP/IEP. The EFMP coordinator may benefit from being included in the partnership. In addition, the EFMP coordinator and school personnel could then collectively organize the appropriate IFSP/IEP training for parents. These policy changes should result in improved family centered services and improved overall outcomes for families and their children with exceptionalities.

#### **Chapter 5 Discussion**

This discussion chapter is comprised of three major sections. The first section provides a brief summary of the methodology and the findings. The second section presents the researcher's synthesis of the key findings, and implications for practice. Lastly, the limitations of the study and implications for future research are discussed.

#### **Analysis Summary**

The purpose of this qualitative study was to examine the perspectives of families and educators regarding military family needs. This required data collection pertaining to the individual family's resources, concerns, and priorities the family felt promoted or hindered positive family-professional partnerships. The researcher grounded the investigation in a strengths-based, family-centered approach which uses family strengths to empower each family in achieving desired family goals or goals specifically for their child with exceptionalities to accomplish (Sandall et al., 2005; Turnbull et al., 2007). This approach is focused on serving families and their children with exceptionalities by using the family's self-identified resources, concerns, and priorities as the foundation. When educators work for families, using a strengthsbased, family-centered approach, the family may be more active members of the child's education and the child may achieve better outcomes (Sandall et al., 2005; Turnbull et al., 2007). More specifically, this study was designed to: a) understand current content addressed in professional development regarding working with military families and how this information is delivered; b) gain insight about the professional development need of educators working with military families; and c) identify how military families want educators to support them and their children with exceptionalities.

Given the need to understand military families' real life experiences, culture, and social processes from the family's and educator's perspective, a grounded ethnography methodology was used to inductively build a new substantive theory (Brott & Myers, 2002; Chamaz, 2000; Maxwell, 2005; Merriam, 2009; Pelto, 1970; Strauss, 1987). The researcher utilized semi-structured individual interviews and focus groups to address the research questions.

This study used a multi-case design to examine families and educators associated with the military from different sites. Multi-case design allowed the researcher to gather data which could be used to compare characteristics and establish the general condition of family-professional partnerships (Creswell, 2003; Stakes, 2005). Eight families and thirteen educators participated in sequential individual interviews or focus groups across a time period of three months. Additional data sources for this study included field notes, debriefing notes, and referential documents gathered from each site.

### **Key Findings Summary**

Military families and their children with exceptionalities have a need to overcome challenges associated with frequent relocations and deployments. Military families and their children are often perceived to be resilient and strong. Family participants in this study described their children as being resilient most of the time, while educator participants noted that military children often require supports to help them build resilience. Thus, the false impression that young children are not affected by adversity and are resilient creates a barrier for assisting military family members and their children with exceptionalities. This study found that military families do require a variety supports from the military and civilian community. Participants in the interviews and focus groups indicated resources are difficult to access because of rules for paperwork, knowledge that resources exist, or the service member's rank and experience.

Families often seek information, answers, and solutions from their other more informal support networks (e.g., educators they trust, extended family members, friends, social groups, and social media). The families who participated reported that they find themselves spending a lot of personal time and energy getting services started initially or restarted at the new base.

Military families in this study viewed time as a very precious commodity as several families indicated they understand today's time as all they are guaranteed. Importantly, when military families are moving so frequently from place to place accessing resources in a timely manner becomes a very important concern and priority. Communities of care should work to provide preventative support to military families rather than waiting for families to access the appropriate combination of services and support (Kudler & Porter, 2013).

Educators' experiences and perspective of relocation and deployment expressed in the study were sometimes quite different from the families they serve. From the perspective of teachers they are asked to do so much within their school day already but did feel that they provided some "little extras." As noted, educators stated they: buy extra supplies, catch children up after absences, have additional patience in answering parents questions, encourage families and children to keep doing a good job, make an additional effort to make personal connections with parents, and plan to teach emotional skills to children. In addition, these educators were willing to do an afterschool child care or club to support families through respite child care. Educators' and families' responses indicated they all had a passion for children with exceptionalities and saw a need to improve what they were currently doing.

It appeared at first, as the researcher conducted initial interviews and focus groups, that educators and families did not always agree upon what was best for children. However with indepth analysis of family and educator interview and focus group data it was more evident that

this perceived disagreement was really more of a shared misunderstanding of the others' experiences. Both family members and educators appeared to be defensive and quick to respond, rather than taking the time to interpret each other's perspective and understand the potential meaning behind behaviors.

Building collaborative partnerships through family-centered practices requires educators to understand military families' unique culture, concerns, priorities, and intended messages (Hess, Molina, & Kozleski, 2006). Families must also be willing to take the time to share information. Therefore, educators can begin to encourage parental involvement in the schools beyond the minimal amount required by law. In fact, several interviews noted some situations where partnerships were forming, as time went on. Educators can assist families in gaining control over available resources and by obtaining information related to their options and their rights (Parsons, 1991). Often families may need advice from support professionals or advocates to assist them in understanding the advantages and disadvantages of various resources, as well as accessing the resources families' choose.

Using a family-centered community approach to supporting military families. This study's conceptual framework hypothesized a systemic use of family-centered practices to support all members of the military family to encourage better outcomes for children. Other researchers have suggested a family-centered community approach for serving military families (Kudler & Porter, 2012). Kudler and Porter (2012) stated that military communities of care increasingly need the support and coordination of civilian services and systems including schools, youth programs, child and family services, law enforcement, child and family services to identify military families and children needing support. It was apparent from the results of this study that family-centered practices are needed when supporting military families but may be

more effective when partnerships are created between systems, as Figure 8 in Chapter 4 (Results) described.

The results suggest that partnerships between the school leadership and military command could assist families with the challenges of relocation and deployment when they also have children with exceptionalities. The cumulative effects of stress and change may be mitigated by systems in which representatives coordinate their efforts in serving the families. The Division for Early Childhood of the Council for Exceptional Children (DEC) and the National Association for the Education of the Young Children (NAEYC) state that the cornerstone for implementing a high quality inclusive early childhood education is the collaboration of key stakeholders (DEC & NAEYC, 2009). Therefore, it may be important to consider having these systems (e.g., schools, child care facilities, community services, and military services) collaborate with families and coordinate their efforts to serve military families and their children with exceptionalities.

The military EFMP has the responsibility to work with schools to coordinate services including military training for school staff. The EFMP helps military families who have child with exceptionalities access military and community services when families arrive at their new post (Floyd & Phillips, 2013). In addition, the EFMP is supposed to: teach parents about their child's exceptionality, provide information about the local school, assist families in accessing early intervention services, and offer case management services of individualized service plans. Inconsistencies in reports about the EFMP program occurred regularly during family and educator interviews and focus groups. Therefore, the researcher would suggest having EFMP coordinators visit with special education and general education teachers for the purpose of informing these educators about the benefits of the EFMP program. If educators are able to

provide complete information to families on EFMP programs families may respond to and accept EFMP services, as well as special education services more readily.

In a similar vein the EFMP coordinator should be informed about the special education laws, district IEP formats, and other specific special education processes the district employs. The EFMP coordinator could establish a collaborative partnership with special education staff to support active and effective communication in advance of new families arriving. Finally, this type of collaborative family support across the different systems could mediate the stress on the family to coordinate between programs and services. In addition, this collaboration may provide families with knowledge about resources they are unaware of and assist them in accessing the services (Blue-Banning et al., 2004).

Professional development and community mapping. The educator focus group data indicated that, educators were less likely to understand the interactions between the military culture, military challenges, and the child with exceptionalities. For example, educators may view deployment as a time when one parent is away from home, they may not understand the dynamics of each deployment phase and the unique challenges that exist for the family. Kudler and Porter (2013) suggested, systems within communities of care must understand how military culture and deployment can impact all family members' capacity for resilience and their physical and mental health. The researcher's perception was that educators may benefit from professional development regarding military culture and challenges together with the professional development they regularly receive regarding specific exceptionalities, IEP development or other special education content.

Educators may be able to use community mapping, a method of documenting contacts, resources, and supports, to assist their own understanding of the military culture and community

and resources offered through the military and civilian communities. Community mapping situates learning in the context of children's experiences and settings (Tredway, 1999). Using community mapping may promote collaboration between families, community-based organizations, military-based programs, and schools to better meet the needs of children with exceptionalities (Ordonez-Jasis & Myck-Wayne, 2012).

The family-centered practices that community mapping encourages include professionals and families: a) sharing responsibility and collaborating to meet a common goal, b) implementing practices that improve family function, c) individualizing services and flexibly adjusting those services as needed, and d) utilizing practices that are focused on the families' strengths (Dunst & Trivette, 2005). When educators seek to understand military families and their children with exceptionalities within the context of their unique communities, community resources, concerns, and priorities they gain an informed perspective which may result in a positive partnership.

Employing a strengths-based, family-centered practice of developing a detailed IEP document which can be transportable to the next school district may build "trust" and a "personal connection" with military families. Several family participants in this study described their experiences with the IEP process as less than satisfactory and frustrating. When school personnel take the time to actively engage families in the IEP process, professionals send the message that they value military families' perspectives, concerns, and priorities. Furthermore, military families may appreciate a sense of control in the process which they may not be accustomed to feeling during relocations and deployments. Providing families with opportunities to be actively involved may reduce the potential for families to develop feelings of defensiveness and/or anxiousness due to the uncertainty of their new setting and this new IFSP/IEP process (i.e.,

evaluation timeline, developing individualized goals, and deciding upon appropriate accommodations/modifications).

Professional development implementation. School districts across the nation have a difficult task in prioritizing professional development needs and then finding the time to provide the prioritized professional development. Districts need to provide consistent and on-going professional development opportunities that scaffold content information for staff in a manner that is easily accessible and meaningful (e.g., online modules, books, webinars). When educators view professional development to be meaningful and a current need they will be more likely to implement the training.

It was evident that educators wanted more information or training and viewed the families they serve as having unique challenges. Similarly, the military has placed a high priority on providing resources to serve military family members in the recent years. Although there is little research regarding military families and young children with exceptionalities, this study indicates all systems at the two sites within this study seem to be ready to begin implementing a collaborative system of community supports for military families.

For these proposed community type supports to be fully implemented across military bases and military branches, it is important to adhere to the implementation science guideline of making all stakeholders aware of the challenges, supports, and motivation for change involved when a new model is proposed (Metz & Bartley, 2012). Collaboratively these systems of community support can agree upon acceptable outcomes and guidelines for adaptation across other military sites. School leadership and military command should be prepared for implementation of this type of collaborative system of community support to take one to three

years depending upon the changes, the setting, and the personnel involved (Felner et al., 2001; Fixsen et al., 2005).

The military as a unique organization and schools working with military families and their children with exceptionalities recognize a need to improve the supports available for families involved in service to their country. Individually, educators have begun to develop programs and resources that may be effective. However, mutual knowledge of the scope of resources available for military families and educators seemed unknown by all systems. By providing more transparency of information and working collaboratively across systems military families may be better served through informed preventive care. This approach will take time to get started but long-term effects will save families' time. Of course, any communication and collaboration is dependent on the individuals from schools and military agencies involved.

Personal interaction is needed to support each and every military family's special needs.

#### Limitations

Each military family, just as every civilian family, is unique. As was evident from the families interviewed, they each have unique prior military experiences, responses to relocation and deployment, histories with extended family, stories regarding access to resources, and experiences with schools. Clever and Segal (2013) cautioned that military families cannot easily be characterized because they are a "diverse population whose needs change over time and no single story can encapsulate what military families need to flourish in military and civilian communities." (p. 15) Therefore, this study's findings, though important need to be extended to a broader population.

Several limitations of this study relate to the participants. The sample of participants is small and isolated in relation to one branch of service. This study may be improved by including

some military leadership such as, an exceptional family member program coordinator and/or a military family life educator. The researcher attempted to conduct a focus group that would have included these participants but the proposal needed to be approved by the Judge Advocate Generals on the base. Given the multiple levels of approval, the submitted proposal has not yet been approved at this writing.

In addition, this study may have been enhanced by military family participants who had children with exceptionalities between birth and three years of age. Similarly, having some early intervention educators may have provided other unique insights, since early intervention is often conducted in homes and child care settings and includes family needs as part of the assessment process for services. The researcher sent emails and called early intervention state coordinators but was unable to obtain family or educator participants connected to children in this age group.

Finally, the study may have been enhanced by additional observations of military families within the community and school settings and educators within the classroom setting. Observations of these key environments and interactions between families, children, and educators would have enriched the data of this study.

#### **Future Research Implications**

This study has reinforced what we know about resilience as a relationship rather than a characteristic. Resilience is established through interactions between people and their environments as part of a dynamic developmental system that is consistently changing and evolving (Lerner, 2006). Thus, partnerships among people representing systems within communities that support military children and their families are vital to their health and growth both individually and as a family. This study proposes a strength-based, family-centered community support system for military families which would support families in knowing about

resources, accessing resources, and being informed about their rights regarding the IFSP/IEP process.

The results of this study need to be further investigated using a larger sampling of families and educators in order to determine if these same resources, concerns, and priorities for support are common among other military families who have children with exceptionalities. In particular, future research should further investigate how families access resources available to them through the military related to the service member's rank.

Interestingly, many families discussed social media as being their primary source of community support. More research is needed to understand how this trend may be used to increase positive family-professional partnerships. Specifically, investigating how educators might use social media or blogging to improve communication and collaboration between families. Educators may be able to use these media formats to share information gained through community mapping about community supports and resources available.

This study focused on active duty Army service members. Future research is needed to determine the resources, concerns, and priorities of National Guard members and reservists that serve part-time. These service members are often not included in research, yet may be a population just as important to understand, especially since children of these service members are more difficult to identify and reach out to for services (Clever & Segal, 2013). For example, military families who serve through the National Guard may live more than an hour away from where the unit is located. In addition, several National Guard units may be deployed from a military base located in another state. Providing these military families with resources then becomes more complex. Therefore, this branch of service may require preventative supports from partnerships across community organizations around the individual National Guard units.

Future researchers should investigate military families and educators that are connected with children ages birth to three years, especially, since young children of this age are vulnerable to the healthy or unhealthy responses of their parents toward relocation and deployment. "Infants and young children depend on their primary caregivers for their wellbeing, and the disruptions of military life place increased stress on the attachment relationship." (Osofsky & Chartrand, 2013, p. 72) Researchers should include military child care facilities as a point of access for investigating how the youngest children's development may be impacted by relocations and deployments. However, future investigation must also seek multiple perspectives, observational data, and survey data.

Researchers should consider conducting an investigation of military families IFSP/IEP satisfaction, concerns, and priorities. This current study only began to uncover important data regarding IFSP/IEP process concerns and priorities of families. More research exploring only this aspect of how the school system encourages family participation should be conducted. Furthermore, future research should explore how policy might be changed regarding the evaluation timeline for the IEP to accommodate the unique transient military population.

Importantly, future research should explore family interventions that synchronize efforts between community organizations and the EFMP coordinator to assist families in acquiring advocacy support. Researchers may design the intervention to prepare military families to create their own self-initiated adhoc support and advocacy group. Collaboratively community organizations and the EFMP coordinator can coach parents to not only find advocacy support but to build their own advocacy groups at each military base.

More high quality research is needed in order to understand the salient issues military families and their children with exceptionalities experience. Research findings of what military

families find as satisfactory supports may have significant impact on military families. More importantly, findings related to what works to promote resilience, empower parents during a transition from IFSP services to IEP services, and address individual unique needs related to a specific exceptionality may have profound significance for the future of all American children (Masten, 2013). Communities have a vested interest in contributing to this research effort to effectively support military families and their children with exceptionalities.

#### References

- Albano, S. (2002). What society can learn from the U.S. military's system of family support.

  National Council on Family Relations Report, 47(1), F6-F8.
- Allen, M., & Staley, L. (2007). Helping children cope when a loved one is on military deployment. *Young Children*, 62(1), 82.
- Allen, R. I., & Petr, C. G. (1998). Rethinking family-centered practice. *American Journal of Orthopsychiatry*, 68(1), 4-15.
- Applewhite, L. W., & Mays Jr, R. A. (1996). Parent-child separation: A comparison of maternally and paternally separated children in military families. *Child and Adolescent Social Work Journal*, 13(1), 23-39.
- Arcus, M., Schvaneveldt, J., & Moss, J. (1993). Family life education: Current status and new directions. *Handbook of family life education: The practice of family life education*, 2, 199-213.
- Army Federal Acquisition Regulation Supplement, AR 608-75, (February, 2011). *Army Publishing Directorate*. Retrieved [March 2014] from http://www.apd.army.mil/pdffiles/r608\_75.pdf
- Banks, J. A. (2006). Improving race relations in schools: From theory and research to practice. *Journal of Social Issues*, 62(3), 607-614.
- Barrera, I., Corso, R. M., & Macpherson, D. (2003). *Skilled dialogue: Strategies for responding to cultural diversity in early childhood*: Paul H Brookes Pub Co.
- Becker, H. S. (1970). Sociology work: Method and substance. New Brunswick, NJ: Transaction Books

- Bennett, T., Deluca, D., & Bruns, D. (1997). Putting Inclusion into Practice: Perspectives of Teachers and Parents. *Exceptional Children*, 64(1), 115-131.
- Bennett, T., Lee, H., & Lueke, B. (1998). Expectations and Concerns: What Mothers and Fathers Say about Inclusion. *Education and Training in Mental Retardation and Developmental Disabilities*, 33(2), 108-122.
- Boeije, H. (2002). A purposeful approach to the constant comparative method in the analysis of qualitative interviews. *Quality and quantity*, *36*(4), 391-409.
- Bradshaw, C. P., Sudhinaraset, M., Mmari, K., & Blum, R. W. (2010). School transitions among military adolescents: A qualitative study of stress and coping. *School Psychology Review*, 39(1), 84.
- Brault, M. (2008). Disability status and the characteristics of people in group quarters: A brief analysis of disability prevalence among the civilian noninstitutionalized and total populations in the American Community Survey. *US Census Bureau*.
- Becker, H.S. (1970). Sociological work: Method and substance. Chicago: Aldine.
- Bennett, T., Deluca, D., & Bruns, D. (1997). Putting inclusion into practice: Perspectives of teachers and parents. *Exceptional Children*, 64(1), 115-131.
- Bennett, T., Lee, H., & Lueke, B. (1998). Expectations and Concerns: What Mothers and Fathers Say about Inclusion. *Education and Training in Mental Retardation and Developmental Disabilities*, 33(2), 108-122.
- Blue-Banning, M., Summers, J. A., Frankland, H. C., Nelson, L. L., & Beegle, G. (2004).

  Dimensions of family and professional partnerships: Constructive guidelines for collaboration. *Exceptional Children*, 70(2), 167-184.

- Boeije, H. (2002). A purposeful approach to the constant comparative method in the analysis of qualitative interviews. *Quality and Quantity*, *36*(4), 391-409.
- Brinberg, D., & McGrath, J. E. (1985). *Validity and the Research Process*. Beverly Hills, CA: Sage Publications.
- Bronfenbrenner, U. (1979). Contexts of child rearing: Problems and prospects. *American Psychologist*, 34(10), 844.
- Bryman, A. (1988). Quantity and quality in social research. London: Unwin Hyman.
- Brott, P. E., & Myers, J. E. (1999). Development of professional school counselor identity: A grounded theory. In S. Merriam, *Qualitative research in practice: Examples from discussion and analysis* (pp. 145-159). San Francisco: Jossey-Bass. (Reprinted from *Professional School Counseling*, 2(5), 339-348)
- Chamaz, K. (2000). Grounded theory: Objectivist and constructivist methods. In N.K. Denzin & Y.S. Lincoln (Eds.). *Handbook of Qualitative Research* (pp. 509-535). Thousand Oaks, Sage.
- Chandra, A., Lara-Cinisomo, S., Jaycox, L. H., Tanielian, T., Burns, R. M., Ruder, T., & Han, B. (2010). Children on the homefront: The experience of children from military families.

  \*Pediatrics\*, 125(1), 16-25.
- Chandra, A., Lara-Cinisomo, S., Jaycox, L. H., Tanielian, T., Han, B., Burns, R. M., & Ruder, T. (2011). Views from the homefront: The experiences of youth and spouses from military families. *RAND Corporation, Santa Monica*.
- Chartrand, M. M., Frank, D. A., White, L. F., & Shope, T. R. (2008). Effect of parents' wartime deployment on the behavior of young children in military families. *Archives of Pediatrics & Adolescent Medicine*, *162*(11), 1009-1014.

- Clever & Segal (2013). The demographics of military children and families. In S. McLanahan (Ed.), *Future of Children* (pp.13-40). Princeton, NJ: Brookings Institute, Princeton University.
- Cornille, T. A. (1993). Support systems and the relocation process for children and families. *Marriage and Family Review*, 19: 28 l-298.
- Cozza, C. S. J., Chun, C. R. S., & Polo, C. J. A. (2005). Military families and children during Operation Iraqi Freedom. *Psychiatric Quarterly*, 76(4), 371-378.
- Cozza & Lerner (2013). Military children and families: Introducing the issue. In S. McLanahan (Ed.), *Future of Children* (pp. 3-12). Princeton, NJ: Brookings Institute, Princeton University.
- Creswell, J. W. (2002). Educational research: Planning, conducting and evaluating, quantitative and qualitative research. Upper Saddle River, NJ: Merrill Prentice Hall.
- Creswell, J., & Plano Clark, V. (2011). *Designing and Conducting Mixed Methods Research*.

  Thousand Oaks, CA: Sage.
- Davidson, A. C., & Mellor, D. J. (2001). The adjustment of children of Australian Vietnam veterans: Is there evidence for the transgenerational transmission of the effects of warrelated trauma? *Australian and New Zealand Journal of Psychiatry*, *35*(3), 345-351.
- Denzin, N. K., Lincoln, Y. S., & Smith, L. T. (2008). *Handbook of critical and indigenous methodologies*. Thousand Oaks, CA: Sage.
- De Pedro, K. M. T., Astor, R. A., Benbenishty, R., Estrada, J., Smith, G. R. D., & Esqueda, M. C. (2011). The children of military service members challenges, supports, and future educational research. *Review of Educational Research*, 81(4), 566-618.

- Department of Defense, *Demographics 2009: Profile of the Military Community* (Washington: Office of the Under Secretary of Defense, 2010), Retrieved from <a href="http://www.militaryonesource.mil/12038/MOS/Reports/2009\_Demographics\_Report.pdf">http://www.militaryonesource.mil/12038/MOS/Reports/2009\_Demographics\_Report.pdf</a>.
- Drummet, A. R., Coleman, M., & Cable, S. (2003). Military Families Under Stress: Implications for Family Life Education. *Family Relations*, 52(3), 279-287.
- Dunst, C. J. (2002). Family-centered practices birth through high school. *The Journal of Special Education*, *36*(3), 141-149.
- Dunst, C. J., & Trivette, C. M. (1996). Empowerment, effective helpgiving practices and family-centered care. *Pediatric nursing*, 22(4), 334.
- Dunst, C. J., Trivette, C. M., & Hamby, D. W. (2007). Meta-analysis of family-centered helpgiving practices research. *Mental retardation and developmental disabilities* research reviews, 13(4), 370-378.
- Eby, L. T., DeMatteo, J. S., & Russell, J. E. (1997). Employment assistance needs of accompanying spouses following relocation. *Journal of Vocational Behavior*, 50(2), 291-307.
- Emerson, R. M., Fretz, R. I., & Shaw, L. L. (1995). Writing ethnographic fieldnotes. Chicago: University of Chicago Press
- Esqueda, M. C., Astor, R. A., & De Pedro, K. M. T. (2012). A Call to Duty Educational Policy and School Reform Addressing the Needs of Children From Military Families. *Educational Researcher*, 41(2), 65-70.
- Felner, R. D., Favazza, A., Shim, M., Brand, S., Gu, K., & Noonan, N.(2001). Whole school improvement and restructuring as preventionand promotion. *Journal of School Psychology*, 39, 177–202.

- Fielding, N. G., & Fielding, J. L. (1986). Linking data. Beverly Hills, CA: Sage.
- Finkel, L. B., Kelley, M. L., & Ashby, J. (2003). Geographical mobility, family, and maternal variables as related to the psychosocial adjustment of military children. *Military Medicine*, 168(12).
- Fitzsimons, V. M., & Krause-Parello, C. A. (2009). Military children: When parents are deployed overseas. *The Journal of School Nursing*, 25, 40-47.
- Fixsen, D. L., Naoom, S. F., Blase, K. A., & Friedman, R. M. (2005). *Implementation research:*A synthesis of the literature. Tampa, FL: University of South Florida.
- Floyd & Phillips (2013). Child care and other support programs. In S. McLanahan (Ed.), *Future of Children* (pp. 79-98). Princeton, NJ: Brookings Institute, Princeton University.
- Gay, G. (2000). Preparing for culturally responsive teaching. *Journal of Teacher Education*, 53, 106-116.
- Gewirtz, A. H., Erbes, C. R., Polusny, M. A., Forgatch, M. S., & DeGarmo, D. S. (2011). Helping military families through the deployment process: Strategies to support parenting. *Professional psychology: Research and practice*, 42(1), 56.
- Glaser, B. G. (1965). The constant comparative method of qualitative analysis. *Social Problems*, 12(4), 436-445.
- Glaser, B. G., & Strauss, A. (1967). The discovery of grounded theory: Strategies for qualitative research. Chicago: Aldine.
- Gorman, G. H., Eide, M., & Hisle-Gorman, E. (2010). Wartime military deployment and increased pediatric mental and behavioral health complaints. *Pediatrics*, 126(6), 1058-1066.

- Gooddale, R., Abb, W.R., & Moyer, B.A. (2010). *Military culture 101: Not one culture, but*many cultures [PowerPoint Slides]. Retrieved from http://www.citizensoldiersupport.org
  /lib/resources/ORNC%20Military%20Culture%20101%20Workshop%2014%20Sep%20
  12.pdf
- Halvorson, A. (2010). *Understanding the military: The institution, the culture, and the people*.

  Retrieved from http://partnersforrecovery.samhsa.gov/docs/military\_
  white\_paper\_final.pdf
- Harrison, J., & Vannest, K. J. (2008). Educators supporting families in times of crisis: Military reserve deployments. *Preventing School Failure: Alternative Education for Children and Youth*, 52(4), 17-24.
- Hess, R. S., Molina, A. M., & Kozleski, E. B. (2006). Until somebody hears me: Parent voice and advocacy in special educational decision making. *British Journal of Special Education*, *33*(3), 148-157.
- Hillenbrand, E. D. (1976). Father absence in military families. Family Coordinator, 451-458.
- Holmes, A. K., Rauch, P. K., & Cozza, S. J. (2013). When a parent is injured or killed in combat.

  In S. McLanahan (Ed.), *Future of Children* (pp.143-162). Princeton, NJ: Brookings

  Institute, Princeton University.
- Individuals with Disabilities Education Improvement Act of 2004, 20 U.S.C.§ 1400 et seq. (2004)(reauthorization of the Individuals with DisabilitiesEducation Act of 1990).

  Retrieved from http://nasponline.org/advocacy/IDEA2004.pdf.
- Jensen, P. S. (1999). Mental health in military children: Military risk factors, mental health, and outcomes. In P. McClure (Ed.), *Pathways to the future: A review of military family research* (pp. 155–162). Scranton, PA: Military Family Institute, Marywood University.

- Jensen, P. S., Grogan, D., Xenakis, S. N., & Bain, M. W. (1989). Father absence: Effects on child and maternal psychopathology. *Journal of the American Academy of Child & Adolescent Psychiatry*, 28(2), 171-175.
- Jensen, P. S., Lewis, R. L., & Xenakis, S. N. (1986). The military family in review: Context, risk, and prevention. *Journal of the American Academy of Child Psychiatry*, 25(2), 225-234.
- Jensen, P. S., Martin, D., & Watanabe, H. (1996). Children's response to parental separation during Operation Desert Storm. *Journal of the American Academy of Child & Adolescent Psychiatry*, 35(4), 433-441.
- Jensen, P. S., Watanabe, H. K., Richters, J. E., Cortes, R., Roper, M., & Liu, S. (1995).
  Prevalence of mental disorder in military children and adolescents: Findings from a two-stage community survey. *Journal of the American Academy of Child & Adolescent Psychiatry*, 34(11), 1514-1524.
- Kelley, M. L., Hock, E., Smith, K. M., Jarvis, M. S., Bonney, J. F., & Gaffney, M. A. (2001).
  Internalizing and externalizing behavior of children with enlisted Navy mothers
  experiencing military-induced separation. *Journal of the American Academy of Child & Adolescent Psychiatry*, 40(4), 464-471.
- Kenny JA (1967) The child in the military community. *Journal American Academy of Child Psychiatry*, 51-63.
- Klingner, J. K., Artiles, A. J., Kozleski, E., Harry, B., Zion, S., Tate, W., Riley, D. (2005).

  Addressing the disproportionate representation of culturally and linguistically diverse students in special education through culturally responsive educational systems.

  Education Policy Analysis Archives, 13(38). Retrieved [March, 2014] from

- http://epaa.asu.edu/epaa/v13n38/.
- Kudler & Porter (2013). Building communities of care for military children and families. In S.McLanahan (Ed.), *Future of Children* (pp. 163-186). Princeton, NJ: Brookings Institute,Princeton University.
- LaGrone, D.M. (1978). The military family syndrome. *American Journal of Psychiatry*. 135, 1040-1043.
- Lester & Flake (2013). How wartime military service affects children and families. In S.

  McLanahan (Ed.), *Future of Children* (pp.121-142). Princeton, NJ: Brookings Institute,

  Princeton University.
- Lester, P., Peterson, K., Reeves, J., Knauss, L., Glover, D., Mogil, C., Wilt, K. (2010). The long war and parental combat deployment: Effects on military children and at-home spouses. *Journal of the American Academy of Child & Adolescent Psychiatry*, 49(4), 310-320.
- Lincoln, Y. S., & Guba, E. G. (1985). Naturalistic inquiry. Beverly Hills, CA: Sage.
- Lowenthal, B. (1997). Useful early childhood assessment: Play-based, interviews and multiple intelligences. *Early Childhood Development and Care*, 129, 43-49.
- MacDermid Wadsworth, S. M. (2010). Family risk and resilience in the context of war and terrorism. *Journal of Marriage and Family*, 72(3), 537-556.
- Manning DT, Balson PM, Xenakis SN (1986) The prevalence of Type A personality in the children of alcoholics. *Alcoholism: Clinical and Experimental Research*, 10(2), 184-189.
- Masten, A. S. (2013). Afterword: What we can learn from military children and families. *The Future of Children*, 23(2), 199-212.

- Maxwell, N. (2009). The Metaphysics of Science: An Account of Modern Science in Terms of Principles, Laws and Theories. *International Studies in the Philosophy of Science*, 23 (2), 228-232.
- Maxwell, J.A. (2005). *Qualitative research design: An interactive approach* (2<sup>nd</sup> ed.). Thousand Oaks, CA: Sage.
- Merriam, S. B. (2002). *Qualitative research in practice: Examples for discussion and analysis*. Jossey-Bass.
- Merriam, S. B. (2009). *Qualitative research: A guide to design and implementation*: John Wiley & Sons.
- Metz, A., & Bartley, L. (2012). Active implementation frameworks for program success. *Zero to Three*, 11-17.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded source-book* (2nd ed.). Thousand Oaks, CA: Sage.
- Military One Source (n.d.) *EFMP Overview*. Retrieved from http://www.militaryonesource.mil/efmp/overview.
- Mintzberg, H. (1979). The structuring of organizations: A synthesis of the research. *University of Illinois at Urbana-Champaign's Academy for Entrepreneurial Leadership Historical Research Reference in Entrepreneurship*.
- Morgan, D. L. (1997). Focus groups as qualitative research (Vol. 16): Sage.
- Morrison, J. (1981). Rethinking the military family syndrome. *The American Journal of Psychiatry*.

- National Association for the Education of Young Children (2009). *Position statement:*Developmentally appropriate practice in early childhood programs serving children from birth through age 8. Retrieved from https://www.naeyc.org/files/ naeyc/file/ positions/ PSDAP.pdf
- National Military Family Association (2004). *Serving the home front: An analysis of military* family support from September 11, 2001 through March 31, 2004. Retrieved from http://www.militaryfamily.org/assets/pdf/Serving-the-Homefront-Report.pdf
- National Scientific Council on the Developing Child (2010). Early experiences can alter gene expression and affect long-term development: Working paper no. 10. Retrieved from http://www.developingchild.net
- Neisworth, J. T., & Bagnato, S. J. (2005). DEC recommended practices: Assessment. DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education, 45-69.
- Nice, D.S. (1981). The course of depressive affect in Navy wives during family separation.

  \*\*Military Medicine\*, 341-343.
- Nichols, W. D., Rupley, W. H., Webb-Johnson, G., & Tlusty, G. (2000). Teachers role in providing culturally responsive literacy instruction. *Reading Horizons*, 41(1), 1.
- Nieto, S. (2000). Placing equity front and center some thoughts on transforming teacher education for a new century. *Journal of Teacher Education*, *51*(3), 180-187.
- NVivo qualitative data analysis software; QSR International Pty Ltd. Version 10, 2012.
- Ordoñez-Jasis, R., & Myck-Wayne, J. (2012). Community mapping in action: Uncovering resources and assets for young children and their families. *Young Exceptional Children*, 15(3), 31-45.

- Orthner, D. K. (1990). Parental Work and Early Adolescence Issues for Research and Practice. *The Journal of Early Adolescence*, 10(3), 246-259.
- Orthner, D. K., Jones-Sanpei, H., & Williamson, S. (2004). The Resilience and Strengths of Low-Income Families. *Family Relations*, *53*(2), 159-167.
- Osofsky & Chartrand (2013). Military children from birth to five years. In S. McLanahan (Ed.), Future of Children (pp.61-78). Princeton, NJ: Brookings Institute, Princeton University.
- Park, N. (2011). Military children and families: Strengths and challenges during peace and war.

  \*American Psychologist, 66(1), 65.
- Parsons, T. (1991). *The social system*: Psychology Press.
- Patton, M. Q. (1990). *Qualitative evaluation and research methods* (2<sup>nd</sup> ed.). Newbury Park, CA: SAGE.
- Phillips, D. C., & Burbules, N. C. (2000). *Postpositivism and educational research*: Rowman & Littlefield.
- Pelto, P. (1970). Anthropological research: The structure of inquiry. New York: Harper and Row.
- Pollari, J., & Bullock, J. R. (1988). When children move: Some stresses and coping strategies. *Early Child Development and Care*, 41(1), 113-121.
- Reason, P. (1988). Introduction. In P. Reason (Ed.), *Human inquiry in action: Developments in new paradigm research* (pp. 1–17). Newbury Park, CA: Sage.
- Repetti, R. L., Taylor, S. E., & Seeman, T. E. (2002). Risky families: Family social environments and the mental and physical health of offspring. *Psychological bulletin*, 128(2), 330.

- Richards, H. V., Brown, A. F., & Forde, T. B. (2007). Addressing diversity in schools: Culturally responsive pedagogy. *Teaching Exceptional Children*, *39*(3), 64-68.
- Rous, B., Hallam, R., Harbin, G., McCormick, K., & Jung, L. A. (2007). The transition process for young children with disabilities: A conceptual framework. *Infants & Young Children*, 20(2), 135-148.
- Russell, P. (2003). 'Access and achievement or social exclusion?' are the government's policies working for disabled children and their families? *Children & society*, 17(3), 215-225.
- Ryan-Wenger, N. A. (2001). Impact of the threat of war on children in military families.

  \*American Journal of Orthopsychiatry, 71(2), 236-244.
- Sandall, S., Hemmeter, M. L., Smith, B. J., & McLean, M. E. (2005). DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education. Longmont, CO: Sopris West.
- Siegel, B. S., & Davis, B. E. (2013). Health and mental health needs of children in US military families. *Pediatrics*, 131(6), e2002-e2015.
- Solomon, Z., & Mikulincer, M. (1992). Aftermaths of combat stress reactions: A three-year study. *British Journal of Clinical Psychology*, *31*(1), 21-32.
- Soodak, L. C., Erwin, E. J., Winton, P., Brotherson, M. J., Turnbull, A. P., Hanson, M. J., & Brault, L. M. (2002). Implementing inclusive early childhood education: A call for professional empowerment. *Topics in Early Childhood Special Education*, 22(2), 91-102.
- Specialized Training of Military Parents (STOMP) (2003). *PCSing?: Pointers for families of individuals with disabilities*. Retrieved from http://www.stompproject.org/down/materials/PCSing.pdf
- Stake, R. (2005). Qualitative case studies. The Sage handbook of qualitative research, 443-466.

- Strauss, A. L. (1987). Qualitative analysis for social scientists. New York: Cambridge University Press.
- Strauss, A., & Corbin, J. M. (1997). *Grounded theory in practice*: SAGE Publications, Incorporated.
- Soodak, L. C., & Erwin, E. J. (2000). Valued member or tolerated participant: Parents' experiences in inclusive early childhood settings. *Research and Practice for Persons with Severe Disabilities*, 25(1), 29-41.
- Tredway, L. (1999). The art of juggling: Preparing preservice teachers for urban schools. *Journal of Negro Education*, 382-396.
- Trivette, C. M., Dunst, C. J., Boyd, K., & Hamby, D. W. (1996). Family-oriented program models, help giving practices, and parental control appraisals. *Exceptional Children*.
- Turnbull, A. P., Summers, J. A., Turnbull, R., Brotherson, M. J., Winton, P., Roberts, R., Schrandt, S. (2007). Family supports and services in early intervention: A bold vision. *Journal of Early Intervention*, 29(3), 187-206.
- U.S. Department of Commerce, Bureau of the Census. (2000). *Overview of race and Hispanic origin 2000* [on-line]. Available: http://www.census.gov/prod/2001pubs/c2kbr01-1.pdf
- Valenzuela, A. (1999). Subtractive schooling: US-Mexican youth and the politics of caring:

  Suny Press.
- Wolery, M. (2005). DEC recommended practices: Family-Based practices. In Sandall, S.,

  Hemmeter, M. L., Smith, B. J., & McLean, M. E. (eds.). DEC recommended practices: A

  comprehensive guide for practical application in early intervention/early childhood

  special education. Longmont, CO: Sopris West.

# Appendix A

# **Terms and Definition**

<u>Term</u>	<u>Definition</u>
Pre-	Pre-Deployment occurs six to eight weeks period prior to deployment. Families
Deployment	experience feelings of fear, anger, denial, resentment, excitement, and guilt during this
Phase	phase. Family members may demonstrate honeymoon behaviors or engage in severe
1 Muse	arguments.
Deployment	Deployment is any time a service member is moved into position for military action.
Phase	Families experience relief, anxiety, enthusiasm, pride, and a sense of abandonment during
	this phase. Family members may experience a change in eating and sleeping habits;
	intense busyness, establishing routine, and being independent.
<b>Reunion Phase</b>	A reunion phase occurs one to six weeks before the reunion. Families experience anxiety,
	excitement, guilt, fear, and elation during this phase. Family members may work to
	improve the appearance of the home or self (e.g., decorate home, new furniture, new
	haircut)
Post-	Post-Deployment occurs one to six weeks post reunion. Families experience euphoria,
Deployment	resentment, and role confusion during this phase. Often the most difficult time period for
	the family. The service member may feel displaced or no longer needed and the spouse
	may feel resentful when the service member attempts to manage finances or discipline
	children. During this phase the couple is reestablishing intimacy and redefining roles.
At-Risk for	a) children diagnosed with a physical or mental condition which has a high probability of
Developmental	resulting in developmental delay; b) children at risk of experiencing a substantial
Delay	developmental delay if early intervention services are not provided; and c) children who
	may be at risk for a developmental delay due to environmental risk factors; such as
	children living in a single parent home, children who are English language learners,
	children living in poverty

#### Appendix B

## **Guiding Questions for Interviews and Focus Groups**

#### **Interview Question Protocol: Military Family Members**

- What job-specific special education service providers were involved in meeting the needs
  of your child? Describe the supports these service providers gave to you and your child or
  children? Describe their unique qualities that you were drawn to or qualities that caused
  you to be disconnected.
- Does your child have special needs? What types of supports do you need that may be different from other military families with typically developing children?
- What types of support would make transitioning from school to school easier? What has
  your child needed in regards to transitioning to a new school, preschool, kindergarten?
- Some resources are easy to access while others may be more difficult. Would having an
  early educator that is knowledgeable about military resources improve your use of
  resources and programs? What supports have you received from early educators that
  positively impacted your child's social-emotional or academic development?

*Note*. These protocol questions address research Questions 1 and 3: What types of specialized training have educators working on or near a military base received and how? How do military families want educators to support them?

#### Interview Question Protocol: Military Family Members Continued

- What are unique military ways of life or challenges you think educators should know?
- Describe an early educator that has met your expectations and one that has not met your expectations. What changes in supports would you suggest?
- Military families have been described as being the most active members in their school. How would you describe your involvement in your child's early education? Do you volunteer? Help when asked? Go to parties? Attend all conferences? Attend other meetings?
- Your families' needs differ during each phase of service (peace time, pre-deployment, deployment, sustainment, post-deployment). Can you describe what you would need from an early educator during each phase within the school day setting?
- How have you established a rapport with the early educator? In what ways did you prefer communication? Did your preference for communication change during the various phases of deployment?

*Note*. These protocol questions address research Question 2: What are professional development needs of educators working with military families?

- What kind of supports would make you feel connected with the community or school?
   What would make you feel unconnected or uncomfortable?
- Describe ideal supports you would like from an early educator? Describe how you would like to be supported by early educators?

*Note*. These protocol questions address research Question 3: How do military families want educators to support them?

#### **Focus Group Question Protocol: Educators**

- What previous experience had you had with the military before working with this military family? How did that previous experience help or hinder your work with military families?
- Outside of the specific special education needs you serve within your classroom, what are
  three greatest needs you feel military children require support with? Did you feel you had
  the resources you needed to meet those needs? What did you need in order to help support
  the children?
- What type of training do you feel prepared you for the military culture and meeting families' needs? Describe the training you feel prepared you for supporting military families or describe training you wish you might have received.

*Note.* These protocol questions address research Question 1: What types of specialized training have educators working on or near a military base received and how? How do military families want educators to support them?

#### Focus Group Question Protocol: Educators Continued

- What are unique military ways of life or challenges you think educators should know?
- If you had every resource available to you, how would you support military families in the various stages of service? What kinds of programs or supports would you establish at school or in the community?
- Do you have any suggestions for other early educators to provide the best learning environment for all military children? Describe.
- What was the hardest event you experienced with a military child or family? What ways
  did you support the family? What did you do that seemed to be most effective in
  supporting the military child?
- Military families say they would like early educators to \_\_\_\_\_\_. How do you see
   yourself in the role of providing these supports?
- What information would you like from your families about the deployment phases or military culture? Describe the family you feel you were able to positively impact. What made this positive contribution possible?
- We all gain knowledge the hard way at times, were there any lessons you learned the hard way when working with military children and families?

*Note*. These protocol questions address research Question 2: What are professional development needs of educators working with military families?

#### Focus Group Question Protocol: Educators Continued

- How do you establish communication with the military family and in what ways has your communication differed from what you have provided for civilian families? Does the turnover and frequent relocation of families impact your methods of communication?
- Describe the differences between working with a civilian family, a military family experiencing deployment, a military family experiencing post-deployment, and a military family with a child that has special needs? What are the challenges and the strengths of the families? What do early educators need to be able to work with a range of military families and child abilities?
- Some resources are easy to access while others may be more difficult. Would having an early educator that is knowledgeable about military resources improve your use of resources and programs? What qualities and supports have you received from early educators that positively impacted your child's social-emotional or academic development?

*Note*. These protocol questions address research Question 3: How do military families want educators to support them?

#### Appendix C

#### **Communication Poem Created from Data**

Parents suggest Open with a nice thing,

better communication. Give me the brunt of the concern,

Emails, phone calls, newsletters, one-on-one 
End with, this is how we handled the

There are multiple ways to communicate. concern.

Communication, Open communication,

Start that communication early. involves sharing resources.

Take time to learn military acronyms, We like hearing your successes.

To build connections with us. Remember we struggle at home too,

So end our conversation with

Communication goes back and forth, empowering information

So listen for what we're really trying to say.

Be sensitive to our situation, Communication is support

Ask for clarification, and be friendly. that goes back and forth!

We don't like feeling empty, like, ugh!

Open communication is critical. What I am going to do with this kid?

When you communicate realize, What am I doing wrong?

There's a really good way to do it

Then there's a really bad way to do it. Communication, communication,

No party should pass judgment! Should not be limited to face-to-face,

emails, or phone calls.

Open those lines of communication, It should be provided in multiple ways,

Use the sandwich method,

That communicate progress is in the making

that's what I call it.

Be clear and honest with the, Communication, communication

Positive, concern, positive. Is both parties seeking to understand

We want what is best for the same child!

Let's work together!