



Transition Practices and Experiences at Age Three: If We Knew Then What We Know Now

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Introduction

The National Early Childhood Transition Center (NECTC) conducted a series of multi-state research studies to measure important dimensions of transition for three groups of children: children who transitioned from early intervention to preschool; children who transitioned from preschool to kindergarten; and a longitudinal group of children who transitioned across both of these age periods (age 3 and kindergarten). The studies were designed to describe children, their families, and providers as they exited early intervention, entered preschool, exited preschool, and entered kindergarten. A fifth study described the context and transition experiences for a group of children who participated in the study across both transitions. This presentation provides information about the transition from early intervention to preschool.

Methods

Participating States. Multi-state studies of transition practices at age 3 were conducted in five states. These states were *purposively selected* (Patton, 1990) to represent a diversity of region, size, population density, minority membership, early intervention lead agency, and history of early intervention and special education service provision and delivery.

Sample Selection Criteria. Based on the nested research design, recruitment of participants began with selection of programs and providers to identify a stratified sample pool.

Table 1. Cohort Groups

Study	Children (n)	Families (n)	Providers (n)
Study 1 Exiting Early Intervention	225	193	168
Study 2 Entering Preschool	209	210	112

Recruitment. Recruitment began with the youngest participants through recruitment of their direct service providers. The demographic variables of race (American Indian, Asian/Pacific Islander, African American, Hispanic and Anglo-European) and community/population size (urban/rural) were used to stratify the sample based on state proportions.

Instrumentation. In the first year of the project, prior to and following the grant award, NECTC research team members collaborated with members from the NECTC Expert Panel, Advisory

service providers. Variables of race and community/population size were used to stratify the sample based on state proportions.

Instrumentation. NECTAC worked with members from the NECTAC Advisory Council, Expert Panel, Diversity Workgroup and other experts in early childhood research and assessment to identify appropriate instrumentation for the study. The instruments used are listed below.

Instruments	Type of Administration	Reported in Study
<i>Behavior Assessment System for Children, Parent and Teacher Report Scales (BASC - PRS; Reynolds & Kamphaus, 1992)</i>	Norm-referenced survey	Studies 1- 5
<i>Dimensions of Temperament-Revised (DOTS-R, Child and Adult; Windle & Lerner, 1999)</i>	Survey	Studies 1, 3, & 5
<i>Emergent Literacy Measure (ELM; NECTC, 2003, adapted from Office of Planning and Research and Evaluation, 2002)</i>	Project- developed tool	Studies 1- 5
<i>Merrill Palmer Scales of Development -Revised (MP-R; Roid & Sompers, 2004)</i>	Norm-referenced direct child assessment tool	Studies 1 - 5
<i>Peabody Picture Vocabulary Test-Third Edition (PPVT-III; Dunn & Dunn, 1997)</i>	Norm-referenced direct assessment tool	Studies 1 - 5
<i>Ecomap (Hartman, 1978)</i>	Semi-structured interview	Studies 1 & 5
<i>Early Intervention Services Assessment Scale (EISAS; Aytch, Cryer, Castro, & Selz-Campbell, 2004)</i>	Survey	Studies 1, 2, & 5
<i>Family Support Scale (FSS; Dunst, Jenkins, & Trivette, 1984)</i>	Survey	Studies 1 - 5
<i>Family Interview (NECTC, 2003)</i>	Semi-structured interview	Studies 1 - 5
<i>Family Empowerment Scale (FES; Koren, DeChillo , & Friesen, 1992)</i>	Survey	Studies 1 - 5
<i>Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977)</i>	Survey	Studies 1 & 5
<i>Transition Perception of Parents (TPP; adapted from Innocenti, Judd, & Taylor, 1998)</i>	Survey	Studies 2, 4, & 5
<i>Early Intervention Provider Survey A & B (NECTC, 2003)</i>	Project-developed Survey	Studies 1 & 5
<i>Pediatric Evaluation of Disability Inventory (PEDI; Haley, Coster, Ludlow, Haltiwanger, & Andrellos, 1992).</i>	Norm referenced survey	Studies 1 – 5
<i>Provider Survey A and B, Family Child Care (NECTC, 2003)</i>	Project-developed Survey	Studies 1, 2, 5
<i>Special Needs Provider Survey, A and B (NECTC, 2003)</i>	Project-developed Survey	Studies 2 & 5

Data Collection. NECTC research coordinators recruited data collectors from each state. The training backgrounds of data collectors were most often from the disciplines of early childhood,

early childhood special education, family studies, human development, school psychology, and speech and language pathology. Across five states, a total of 32 data collectors were trained; 28 collected data in their respective states beginning December 2003 and concluding February 2007. Data were collected from children and families in a face-to-face format, while data from providers and administrators were obtained through surveys and questionnaires.

Data Analysis. All data were de-identified and analyzed as an aggregate data set. Quantitative data were entered into Statistical Package for the Social Sciences (SPSS Inc., Chicago, IL). Data were analyzed qualitatively, using NVivo (QSR International, 2008). Data were examined using the nested design of the model: child, family, provider, program, services, and community. Each group was analyzed separately to gain insight into individual factors that might impact child outcomes at each level.

Study One: Exit from Early Intervention

Study One describes the transition process for children and their families at exit from early intervention. For this study, transition is defined as specific practices and activities used by families and providers to plan for and support child and family preparation for new programs/services at age three (Rous, Hallam, Harbin, McCormick, & Jung, 2007). The specific research questions that guided this study include:

1. What are the characteristics of the transition process for children and families as they exit early intervention programs?
2. How do early intervention programs and providers support the transition process for children and families as they exit early intervention?

Children in the sample were:

- Heterogeneous with respect to race (32% were from minority populations) and disability;
- Largest disability category was speech/language delays; followed by DD
- More than 1/3 (35%) had no insurance coverage;
- Developmental concerns were identified **close to birth** for more than 55% of the sample;
- A larger number than expected (8%, national average of 2.5%) had been in foster care at some point in their lives.

Family respondents were:

- Predominantly female (85%);
- Married (70%);
- Almost equally divided re: employment (53.2% employed; 46.8% unemployed);
- More than half (51.7%) were eligible for WIC services.

Providers (Service Coordinators and Early Intervention Providers) were:

- Overwhelmingly white (97% for Early Intervention providers; 87% of Service Coordinators) and female (90% for EI; 97% of Service Coordinators)
- Well educated (60% or more of the EI providers hold Master's degrees; 34% of the Service Coordinators)
- Caseloads of more than 20 children and families (21% for EI providers; 32 for Service Coordinators)

Results

Families in this sample generally reported high levels of satisfaction with their early intervention services. They indicated approval for both quality and quantity of early intervention services. Families also reported accessing a wide range of early intervention services and generally had positive reports of early intervention services received.

Transition Planning & Practices. Findings suggest that families are at a minimum receiving accurate information about the transition process and necessary agency or program information (i.e., contact person). However, the more individualized and interactive or collaborative planning components (i.e., working collaboratively to write the IEP or plan for continuity in services) are those least utilized. Early intervention providers identified several barriers to effective transitions for children and families. Primarily, they identified a lack of services offered in the summer and scheduling conflicts across groups as barriers. An analysis of a sample of IFSPs suggest early transition planning is not common. Data demonstrate that very few IFSPs included family priorities or concerns and no IFSPs included specific resources related to transition. Although 90% of the IFSPs reviewed included explicit steps to be taken to support transition, IFSPs included very few transition outcomes. In other words, IFSPs included general steps (typically not individualized) in facilitating transition but failed to include outcomes to document positive transitions for children and families. This is particularly disconcerting in light of the temporal context of data collection. What appears to be the case is a potential disconnect between the process of identifying steps to facilitate transition and the transition outcome. Furthermore, only 9 of the 83 (11%) IFSPs reviewed were identified as taking place during a transition conference, even though IFSPs reviewed occurred within the natural timeframe for transition planning and holding transition conferences (24 to 36 months prior). In fact, contrary to what we expected, there were relatively few differences in IFSPs for children ages 24 – 28; 29 – 32; and 33 – 36 months. Data from Study 2 will provide more information about transition practices.

Study Two: Entry to Preschool

The major goal of Study Two was to examine the transition process for children and families as they enter preschool services. The specific research questions that guided this study include:

1. How do children and families experience the transition to preschool?
 - a. What transition services do children and families receive?
 - b. How involved are families in transition planning?
 - c. What child and family characteristics impact the transition experience?
2. How do preschool providers support the transition process for children and families as they enter preschool?
 - a. What types of transition services and supports are provided to children and families?
 - b. What types of professional development and other supports do providers receive regarding the transition to preschool?

Children in the sample were:

- Less racially heterogeneous than Study 1 (29.5% minority; 70.5% Caucasian/white);

- Primarily male (66.5%)
- Minority with summer birthdays (23.3%)
- Slightly less than half received WIC benefits (46.8%)
- Lived with their biological parents (83.8)
- Minority the result of multiple births (12%) or of prematurity (28.4%)
- Had identified developmental concerns more than one month **after** birth (61.2%)

Family respondents were:

- Predominantly female (91%);
- Married (81%);
- Slight majority not employment (51% unemployed);
- Less than half (47.7%) eligible for WIC services.

Providers (Special Education Providers = 62 of 112) were:

- Overwhelmingly white (92%) for Early Intervention providers; 87% of Service Coordinators) and female (94%)
- Well educated (57% or more held Master's degrees;
- Caseloads of more than 25 (mean = 27.93) children

Results

Families indicated satisfaction with the services their child received in preschool; however, there were some areas for which families needed but didn't receive support. A majority of families reported that: *early intervention providers helped them prepare for the transition; they received information to help them with decision making; and they were a major decision-maker about where and when the child would transition.* Families also identified a number of barriers to the transition process. Families report struggling with *services that were not offered during the summer*, even when their child's birthday did not fall during the summer months. *Lack of placement options for their child* was also identified as a barrier to transition planning.

The family's reported level of empowerment was important in the transition process, with more empowered families being more involved in transition planning and more transition services received. Child disability also related to the effort families expended on transition planning, with families of children who they reported had more than one primary disability and children with lower expressive language skills reporting more family effort for transition planning. Families also reported a number of family-initiated activities aimed at facilitating child development to promote successful transition. It may be hypothesized that families who are active in facilitating their child's growth and development in home and community settings will also be active in collaborating with providers in transition practices; which, in turn, have as potential outcomes the facilitation of continued child growth and development, engagement, and adaptation to a new environment. Finally, a major responsibility of preschool providers is supporting children and families as they enter preschool services, specifically helping to ensure their successful adjustment to the new service system. Providers were asked to indicate the degree to which they used a set of 9 transition practices; 3 were reportedly utilized by more than 70% of the participating providers. These were: *talking with parents* (92.9%), *arranging for visits to preschool classrooms* (74.6%), and *attending transition conferences* (71.4%). The widespread utilization of transition conferences is a significant departure from the low incidence of transition conferences presented in Study 1. In conclusion, congruent with the NECTC conceptual model of transition, a number of factors impact transition to preschool and are located at each level of the transition ecology- child, family, and

provider. Our next step will be to determine if the use of these practices impacts child and family outcomes in the post transition environments of preschool and kindergarten.

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