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THE IEP TEAM: TEAM MEMBERS' PERSPECTIVES OF THE DECISION-MAKING PROCESS

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THE IEP TEAM:
TEAM MEMBERS' PERSPECTIVES OF THE DECISION-MAKING PROCESS

by

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B.A., Speech and Hearing Sciences, University of New Mexico, 2001
M.A., Special Education, University of New Mexico, 2007

DISSERTATION

Submitted in Partial Fulfillment of the
Requirements for the Degree of

Doctor of Philosophy
Special Education

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Dedication

This is for all of the starfish ✭; *everyone* matters.

I would like to acknowledge the IEP team, who willingly shared their story and made this research possible. I will be forever grateful for their honesty and willingness to let me listen to their stories and understand their process.

Acknowledgments

Every time I sit down to write my acknowledgments, I am overcome with emotion. I find myself struggling to find the words to fully capture my gratitude to the many individuals who have shaped me into the person I am today. As I consider first the community of strong, passionate, dedicated women who have guided my footsteps, I am filled with love, admiration, and awe, and I don't know how to say thank you for the many gifts you have given me that have transformed my journey.

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ABSTRACT

The Individualized Education Program (IEP) remains a pivotal document for ensuring educational equity for students with disabilities in public education (Bateman, 2017). This qualitative interview study investigated how an IEP team supporting a student with extensive support needs navigated the decision-making process during annual IEP development. Through in-depth interviews with six out of eight team members, I explored IEP team members' perceptions of their and others' responsibilities and contributions to the development of an annual IEP. Qualitative coding revealed four key decision-making themes: Unspoken norms, privileging professional knowledge, avoiding conflict and responding to disagreements, and identifying your place at the table. The findings highlighted how implicit norms, unwritten policies, and personal beliefs influenced decision-making dynamics. I also addressed study limitations, proposed areas for future research, and discussed practical implications.

Keywords: individualized education program (IEP), individualized education program (IEP) team, decision-making process, team collaboration, qualitative interview study.

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Chapter 1

"Education is our birthright; it is owed to us in order that we may be able to make a living, grow intellectually, govern ourselves. In a word, so that we may be a free people" (Levine & Wexler, 1981, p.7).

Between 2021 and 2022, 7.3 million students with disabilities between the ages of 3 and 21 accessed schools utilizing special education supports and services identified in their individualized education programs (IEP; National Center of Educational Statistics [NCES], 2023). The IEP is "a written statement for each child with a disability that is developed, reviewed, and revised" (20 U.S.C. § 1414(d)(1)(A)(i)), and it is constructed by an IEP team (20 U.S.C. § 1414(d)(1)(B)). This team is the decision-making body that creates an educational program to meet the unique needs of each student identified as having a disability (Bateman, 2017; Yell, 2019; Yell et al., 2020a). Additionally, an IEP team works to ensure that the IEP reflects the individualized services and supports necessary to ensure these learners have access to a free and appropriate public education (FAPE; Yell, 2019; Yell et al., 2020a). The Individuals with Disabilities Act (IDEA) guides the IEP process (Yell, 2019; Yell et al., 2020a).

While the IEP process and the supports of an IEP team exist for all students with disabilities, this study focused on teams that supported a subset of these students: students identified with extensive support needs (ESN). Learners with ESN may include individuals with autism spectrum disorder (ASD), intellectual disability (ID), multiple disabilities (MD), or deaf-blindness (McCabe et al., 2020; Taub et al., 2017). Additionally, students with ESN may require assistance and supports across multiple areas of their lives (e.g., academic, social, communication, self-help; McCabe et al.,

2020; Taub et al., 2017), and these individuals may qualify for alternative forms of

assessment throughout their academic careers (Kurth et al., 2019; McCabe et al., 2020;

Taub et al., 2017).

Disability and Education

According to IDEA (2004), Congress emphasized that disability is natural and the

experience of having a disability should not impede or diminish an individual's human

right to be an integral part of society (20 U.S.C. § 1400). In protecting these fundamental

rights, Congress found that improving student outcomes was essential in ensuring that

children with disabilities have equitable access and engagement in their communities,

improved independence and self-determination, and expanded opportunities for financial

stability (20 U.S.C. § 1400).

Congress noted that decades of research have provided evidence that educational

outcomes may be improved by having high expectations for children with disabilities

while ensuring their access to rigorous, age-appropriate, grade-level curriculum in the

regular education classroom. IDEA (2004) mandates that children with disabilities access

their education in the least restrictive environment (LRE), and under LRE the law

designates a strong predilection that children with disabilities are educated alongside their

nondisabled peers. In particular, LRE is defined as an educational environment that

ensures that students with disabilities are educated with their peers without disabilities

(e.g., within the general education classroom) to the maximum extent appropriate (20

U.S.C. § 1412(a)(5)(A)). Further, the definition of LRE emphasizes that removal of a

student with disabilities from this educational setting may only occur if the "nature or

severity of the disability is such that education in regular classes with the use of

supplementary aids and services [SAS] cannot be achieved satisfactorily" (20 U.S.C. §
1412(a)(5)(A)).

Students with ESN who access their instruction in the LRE are often provided
opportunities to learn (OTL) rigorous, age-appropriate, and engaging content (Taub et al.,
2017). Additionally, in comparison to matched pairs educated in segregated education
classrooms, students with ESN included in general education showed improved
instructional outcomes in core academic areas (i.e., English language arts and
mathematics) and communication skills (e.g., development of more complex, volitional,
expressive communication systems; Gee et al., 2020). Further, there is evidence that these
benefits extend beyond the students with disabilities to their non-disabled peers and the
educators instructing in these classrooms (Carter et al., 2005; Copeland, 2006; Cushing &
Kennedy, 1997; Szumski et al., 2017). Copeland (2006) discussed that general and
special education teachers instructing in inclusive educational programs reported a
positive impact on their instructional time with all students, efficacy as educators in
diverse classrooms, and job satisfaction (e.g., personal fulfillment in supporting
collaborations between students).

In considering the evidence regarding the benefits of LRE, Brock (2018) stated
that the general education setting is where IEP teams should begin their work and
discussion. However, despite the legal stance in favor of, and the growing evidence of the
benefits of placement of students with ESN with their non-disabled peers in the general
education setting, the National Council on Disability (2018) reported that there has been
little to no change in shifting to more inclusive educational placements for students
identified with ID, ASD, MD, and deaf-blindness over the past decade. IEP teams

continue to make decisions that place students with ESN in the most restrictive educational settings even when they could benefit from inclusion in the LRE (Agran et al., 2020; Carter et al., 2005; Cushing & Kennedy, 1997; Jackson, 2014; Keefe et al., 2006; Kennedy et al., 1997; Morningstar & Kurth, 2017; Morningstar et al., 2017; Ryndak et al., 2014; Wehmeyer et al., 2001). Ryndak et al. (2014) stated that "a lack of attention to these issues…has resulted in the stagnation of students with significant disabilities in segregated special education settings" (p. 66).

The IEP

How students with ESN are provided OTL in the LRE, and how they are afforded opportunities to engage in age-appropriate educational opportunities are in part addressed through the development of an IEP (Taub et al., 2017; Yell, 2019; Yell et al. 2020a; Yell et al., 2020b). Additionally, the law stipulates that this document must be developed and in place "at the beginning of each school year" (20 U.S.C. § 1414(2)(A)) for every eligible student. According to Yell et al. (2020a), having the IEP in place at the beginning of each school year is critical to ensure that students receive a free and appropriate public education (FAPE). Providing a FAPE is defined by IDEA (2004) as both special education and related services and supports that are provided at public expense (20 U.S.C. § 1401(9)(A)). Further, the law states that the educational opportunities afforded to the student must meet state standards, and students with disabilities must be provided an appropriate preschool, elementary, or secondary school education within the state (20 U.S.C. § 1401(9)(B)(C)). Finally, to ensure FAPE, the school must provide educational access and opportunities that conform to a child's IEP (20 U.S.C. § 1401(9)(D)).

Development of the IEP may be viewed as an involved process, and therefore,

IDEA outlines the specific components that serve as the framework that supports IEP

teams in the creation of an IEP that may guide a child's educational experience.

According to Yell et al. (2020a), IEP teams must collaborate and make decisions in

developing an individualized education program that contains mandatory components.

For example, IEP teams must discuss and include the child's present levels of functional

and academic performance (PLAFF), and the team must make decisions regarding

measurable annual goals and a means to assess progress toward these goals (Yell, 2019;

Yell et al., 2020a). Additionally, IEP teams must include a statement of related services

and SAS that may be provided to support a child's education (Yell, 2019; Yell et al.,

2020a). Another decision encountered by the IEP team is the development of an LRE

statement that explains or justifies the extent that a child with a disability may be

removed from the LRE (Yell, 2019; Yell et al., 2020a). Furthermore, IEP team members

must also work together to determine which accommodations and modifications might

assist a student in their classroom and support their access to state and district testing

requirements (Yell, 2019; Yell et al., 2020a). Finally, IDEA requires that IEP teams must

begin to consider transition supports for older students (i.e., beginning for students

between 14 and 16 years of age) that include goals that consider what students will do

after they graduate (e.g., post-secondary education, employment, independent living

skills; Yell, 2019; Yell et al., 2020a).

The IEP Team

When considering all required elements in an individualized education program

for students with ESN, it comes as no surprise that the IEP should be constructed by a

team of participants with experience and expertise that would enable them to create a

procedurally (i.e., process requirements) and substantively (e.g., the content standard)

sound IEP (Yell et al., 2020a). To effectively generate such a multifarious product, IDEA

(2004) identifies the individual contributors, the IEP team, who must be included in the

IEP meeting. This team is defined as (U.S.C. § 1414(d)(1)(B))

a group of individuals composed of—

    i.   the parents of a child with a disability;

    ii.   not less than 1 regular education teacher of such child (if the child is, or

             may be, participating in the regular education environment);

    iii.   not less than 1 special education teacher, or where appropriate, not less

             than 1 special education provider of such child;

    iv.   a representative of the local educational agency who—

- is qualified to provide, or supervise the provision of, specially designed

  instruction to meet the unique needs of children with disabilities;

- is knowledgeable about the general education curriculum; and

- is knowledgeable about the availability of resources of the local

  educational agency;

    v.   an individual who can interpret the instructional implications of evaluation

             results, who may be a member of the team described in clauses (ii)

             through (vi);

    vi.   at the discretion of the parent or the agency, other individuals who have

             knowledge or special expertise regarding the child, including related

             services personnel as appropriate; and

    vii.   whenever appropriate, the child with the disability

This team of decision-makers, including professionals, parents, and the child, when appropriate, is responsible for creating perhaps one of the most important documents found in special education (Bateman, 2017; Smith, 1990; Yell et al., 2020a). Every choice or decision made by the IEP team paints a roadmap of student participation and engagement and guides how students with disabilities will access both the general education content and classrooms while receiving an equitable education alongside their non-disabled peers (Bateman, 2017; Smith, 1990; Yell, 2019; Yell et al., 2020a).

Statement of the Problem

While the law explicitly designates who must be involved in the decision-making process, it does not guide how individual team members work together to make decisions (Yell, 2019). Giangreco (1990) emphasized that the lack of a decision-making framework has negatively impacted how IEP teams engage in the development of the IEP. He posited that current practice resulted in the development of IEPs containing gaps or overlaps in supports and services. Further, Giangreco found that these issues resulted in divisive recommendations from the many experts at the table, creating a final document that failed to align with student needs. In addition to this lack of guidance impacting service and support decisions, Kurth et al. (2014) found extensive variability in how IEP teams decided placement (i.e., considerations for LRE access for students with ESN). Moreover, when considering how placement decisions were made, Morningstar et al. (2017) found that despite legal guidance that IEP teams should consider general education first, placement decisions were often decided based on the availability of existing programs, which does not require the collaboration or reflexive considerations that were intended by IDEA (Smith, 1990).

Due to the significant impact the IEP has on education for students with ESN, there is a need to understand this process better (Smith, 1990). Prior research has focused on many factors that may impact the IEP process including current professional practices (e.g., the perceived appropriateness or feasibility of access for students with ESN; Jackson, 2014; Morningstar et al., 2017; Ryndak et al., 2014), perceived policies/beliefs, the existence of a continuum of services (McCabe et al., 2020; Sauer & Jorgensen, 2016; Taylor, 1988), and a lack of capacity and resources (e.g., time, materials, or highly qualified teachers; Agran et al., 2020).

The body of research that has examined IEP team members has largely focused on the experiences of parents (Ruppar & Gaffney, 2011). For example, investigations found that parents often felt excluded from the decision-making process (Fish, 2006; Lytle & Bordin, 2001; Thoma et al., 2001; Zagona et al., 2019). Additionally, parents cited that professional communication (i.e., discourse that is heavily laden with jargon) during the IEP meeting created barriers that impacted equity of access when trying to be heard (Bacon & Causton-Theoharis, 2013; Lytle & Bordin, 2001). In addition to communication and language barriers, the rigid structures often associated with an IEP meeting (e.g., use of the IEP document as an agenda, turn-taking meeting format, limited meeting times) excluded parental ideas, concerns, and thoughts (Bacon & Causton-Theoharis, 2013; Fish, 2006; Ruppar & Gaffney, 2011; Zagona et al., 2019). Due to these identified struggles and barriers to equity in the IEP process, parents reported the emotions of anger, frustration, and a need to battle to gain currency as an IEP team member (Fish, 2006; Thoma et al., 2001; Zagona et al., 2019).

While this inability to effectively work together and share ideas is noted in the

above research, having equitable contributions in the IEP team meeting may be an even more significant hurdle when a parent and their child are from a culturally or linguistically diverse background (Sheehey, 2006). The ability to advocate and demand supports and services are skills that may be characteristically representative of the dominant culture (Sheehey, 2006). Sheehey (2006) asserted that the core values associated with parent involvement in the IEP process are equity, individualism, and choice, and families from diverse cultures (e.g., collectivist) may not engage in this system effectively, making the IEP process even less accessible for diverse students and their families.

The IEP has been called the cornerstone of education access for students with disabilities (Drasgow et al., 2001), and as stated above, continued research to better understand how IEP teams envision their role and responsibility in this process is crucial to the development of a system that allows practitioners to stop the process of minimal compliance that has been the status quo for far too long (Smith, 1990). While existing research has investigated the IEP process and the experiences of parents, a paucity of research exists in consideration of how individual IEP team members define their roles and responsibilities within the decision-making processes associated with the IEP (Ruppar & Gaffney, 2011). Further, Ruppar and Gaffney (2011) found that the meeting experiences of school-based IEP team members (e.g., related services, teachers, and administrators) were also largely underrepresented.

Research Purpose

This brief overview of research on the development of IEPs and the IEP team process seems to indicate that the intention behind IDEA to provide access to FAPE for

students with ESN is not being met (Agran et al., 2020; Jackson, 2014; Ryndak et al., 2014; Smith, 1990). Previous investigations have found that this gap between policy and practice may cause professionals and parents to view the IEP team, the IEP meeting, and the resulting document as nothing more than a paper process surrounded by procedural requirements that consume time and resources while having limited impact on improving services for students with disabilities (Smith, 1990). Prior research findings have indicated a need for continued investigations into the processes and practices that occur before, during, and following the creation of the IEP (Hartmann, 2016; Ruppar & Gaffney, 2011). Investigating team members' perceptions of their roles within this complex phenomenon may yield critical information regarding team cohesion and collaboration, parent, and student involvement, and procedural and substantive concerns that may impact the IEP process and the guiding document it produces.

The purpose of this research study was to investigate each IEP team member's understanding of their roles and responsibilities regarding the many educational decisions made to support a student with ESN when creating an IEP and was guided by the following research questions:

- How do IEP team members conceptualize their responsibilities within their IEP team role in the decision-making process when developing an IEP for a student with ESN?

- How do IEP team members conceptualize their own and others' contributions to the decision-making process when developing an IEP for a student with ESN?

Methodological Approach

Qualitative research aims to investigate complex issues, ideas, or topics that are

not easily quantified while seeking to understand the intricacy of a phenomenon situated in the complexity of its context (Bogdan & Biklen, 2007). This inductive methodological approach is intended for investigations seeking to grasp a specific phenomenon's inner workings or mechanisms through gaining insider knowledge (i.e., an emic perspective; Merriam, 1998). My study sought to explore how insiders from one IEP team supporting a student with ESN perceived decision-making within the context of the IEP meeting. While I initially proposed this as a descriptive, instrumental case study, through the guidance of my committee, I conducted my research using a qualitative interview approach. The following section explains my rationale for this method in my investigation.

Interview Research: A Qualitative Interview Approach

Aspiring to create meaning through conversation with others has been an essential aspect of human learning since the origins of human communication (Gubrium & Holstein, 2012; Platt, 2012; Saldaña, 2011). According to Saldaña (2011), the capacity to seek and share knowledge is a fundamental trait of humans, and qualitative interviewing has been a long-standing instrument of scientific inquiry dating back as far as ancient Greece (e.g., the Peloponnesian Wars). While this approach remains somewhat controversial as a stand-alone research methodology, Trainor (2013) argued that interviewing research has endured as a clear, distinguishable, and suitable overall framework for strategies and methods that may be used when conducting research in human and social sciences.

According to Lincoln and Guba (1985), an interview is a "conversation with a purpose" (p. 268). Through interviews, researchers investigate complex real-world

phenomena that are not easily separated from the contexts in which they occur (Gubrium & Holstein, 2012; Saldaña, 2011; Trainor, 2013). As this form of inquiry assists investigators in accessing and seeking to understand real-world phenomena, Gubrium and Holstein (2012) emphasized that the shift from passive to active subjectivity has changed the landscape of interview research, promoting an appreciation for "the narrative agency of the subjects behind the participants, of both respondents and interviewers" (p. 33). The authors maintained that through this agency, both the interviewers and respondents may take an active role in the construction of meaning from the experiences, perspectives, and stories that shape the way the participant reconstructs their story to the researcher's role in the study selection, design, and implementation.

In considering the study design, Johnson and Rowlands (2012) clarified that the researcher's choice of type of interview may enable or constrain the flow of information, as each type of interview process has its own "distinct style, method, advantages, and limitations" (p. 99). The authors specified that investigations seeking intimate or personal knowledge that may include disclosure of a participant's beliefs, values, or identity are best informed through the use of in-depth interviews. They further acknowledged that in-depth interviews are often utilized in conjunction with other data sources (e.g., observations, field notes); however, when the research question or questions seek to gather knowledge that is not readily discussed or information that may involve mental conflict (e.g., create a state of tension due to internal conflicting beliefs), this form of inquiry may be beneficial. Further, they noted that in-depth interviews are a worthwhile choice to pursue knowledge from multiple participants who engage in the same phenomenon. Through multiple, in-depth, semi-structured interviews, I sought in this

study to understand the unique perspectives of individual IEP team members about the

decision-making process when developing an IEP for a student with ESN.

Positionality

As the investigator for this research study, my many roles (e.g., mom, educator,

doctoral student) have forged the lens I used to design, implement, analyze, and report on

this research. Due to my extensive experiences in special education, including my

involvement on IEP teams as a special education teacher and parent, my positionality was

interwoven in the story that emerged from this data. While I continuously reflected

throughout the process on my decisions, thoughts, ideas, and final analysis, I understand

that my previous experiences colored my interpretation of the data as I engaged in this

work.

Personal Lens

My positive and successful experiences within the education system are valid to

this investigation as, from the onset of my education, they have shaped my expectations

of voice (e.g., my ability to advocate and be heard). These advantages are not of my own

making. As a white, English-speaking woman, my experiences can be linked to an

education aligned with my cultural development, learning styles, and language (Nieto &

Bode, 2012). As a first-generation college graduate from schools in the United States, I

have likely benefited from educational facilitators (e.g., opportunities and experiences

framed by my identity as a person of the dominant culture) in comparison to the

educational barriers (i.e., inequitable structures of power or privilege) that may have been

experienced by my culturally or linguistically diverse peers (Nieto & Bode, 2012).

Parent Lens

Becoming a parent of a child with a disability was the catalyst for my evolution

from a pre-law student to a special education teacher, and this experience of motherhood

has continued to shape the trajectory of my life. In my journey as a *parent-insider* in the

IEP process, I utilized my voice in the context of the IEP meeting and collaboration with

the IEP team. In these moments, I felt empowered, able to establish my role as a member

and equal at the table, and year after year, the IEP teams that I was a part of worked

together to develop educational programs that reflected that voice and allowed my child

access to and engagement in both the general education classroom and curriculum. While

I often attributed this success to my education and immersion in special education, I

reflected on the idea that my belonging to the dominant culture may have played a

profound role in my success in advocating for my daughter's needs (Sheehey, 2006).

In considering my position *inside* this research, I remained open to the idea that I

have perceived advocacy in education as a positive and successful endeavor, and I

acknowledged that my educational philosophies are grounded in mainstream society

(Sheehey, 2006). As a result of my social and educational history, as well as my

experiences as a parent of a child with a disability, my ideas regarding the purpose of

education and the IEP (e.g., goals of independence, education plans that are student-

centered, and interventions that are grounded in research) were developed and reinforced

by a system steeped in the values of the dominant culture (Sheehey, 2006). As a member

of the IEP team, I advocated for my daughter's rights within her educational programs as

I perceived them. I seldom "deferred decision-making to the professionals" (Sheehey,

2006, p. 4) on my daughter's various IEP teams.

As a parent-insider regarding IEP teaming, I believed that decisions were sometimes the result of collaboration; however, I felt that my voice as the parent and protector should hold more weight at the table. After all, this was my child, and I knew her better. She shared her dreams of the future with me. These included her fears of being held back (i.e., not being promoted to the next grade with her friends) or not graduating from high school, and I lived these experiences with her. Therefore, I have always viewed the parent's position and the presence of voice as critical in the IEP process.

Further, in addition to feeling comfortable as an IEP team member and advocate, I shared my beliefs and knowledge with my daughter to teach her self-advocacy. As a person who felt a part of the IEP process, I also felt comfortable with my daughter participating during IEPs, where school professionals discussed her support needs and how her disability impacted her access to the classroom and curriculum. Her participation was necessary, and I viewed her as the expert in identifying the supports needed to ensure her access to content and classroom.

Throughout this study, I reflected on my experiences. I considered how they shaped my view of the roles and responsibilities of a parent as a participant in the IEP process. In addition, I reflected on the idea that while some of my involvement has been that of a parent-insider, I lacked the experiences of other parents due to my education and access, which may be outside the norm of what is experienced by many families. As I entered into this research, I found myself genuinely curious to discover how a parent's personal history (e.g., culture, communication, advocacy, inclusion, collaboration) worked to shape their understanding of their roles in the decision-making process in constructing an IEP for their child with ESN. I hoped to discover how their reflection

before, during, and after the creation of this document may offer insight into this dynamic

and intimate practice.

Academic Lens

My experiences at the University of New Mexico in the Department of Special

Education have facilitated my knowledge and understanding of the benefits of inclusive

education as a novice teacher (Copeland, 2006; Gee et al., 2020; Keefe et al., 2006; Kurth

& Mastergeorge, 2010; Luckasson, 2006). I have been fortunate to learn in a professional

academic culture of strong female role models. These role models, whose influence

continues to this day, have inspired me to advance my knowledge of how to best support

and advocate for the educational and human rights of students with disabilities in public

education. These women have served as models of advocacy and activism that I hope to

emulate throughout my professional career, and they have inspired me to pursue action.

This study was initially conceptualized through my desire to take an active role in the

field of research and my wish to develop a deeper understanding of the IEP process.

In addition to these critical mentorship experiences, my coursework taught me

how to engage in my classroom as a highly qualified special educator while offering me

insight into the research and literature that supported my desire to advocate for my

families and the students in my classroom. My education program at the University of

New Mexico has been centered around the value of instruction in the LRE for all students

with disabilities. Additionally, my training has focused on how these educational settings

positively influenced the academic, social, and communication outcomes of students with

ESN (Copeland, 2006; Gee et al., 2020; Keefe et al., 2006; Luckasson, 2006). I have

participated in instruction that has taught the importance of ensuring that all students with

disabilities have access to enriching academic instruction (e.g., grade level and age-appropriate) as well as inclusive social experiences with their peers with and without disabilities (Brock, 2018; Copeland, 2006; Taub et al., 2017).

Throughout this study, my personal, parent, professional, and academic lenses combined to form my positionality as both an insider and an outsider. My personal narrative remained one of advocate with a strong propensity for social justice. As a professional, I found myself curious to know how IEP team members perceive their roles in the context of the IEP process and wondered how their views might differ from my own.

I have held the belief that most professionals are striving to provide a high quality education that offers equity in learning opportunities for students with disabilities; however, for students with ESN, the disparities are apparent (Gee et al., 2020; Jackson, 2014; Ryndak et al., 2014; Taub et al., 2017). These disparities can be seen within the current body of research that has investigated that despite the potential benefits of education in the LRE on the acquisition of academic and communication skills (Gee et al., 2020; Taub et al., 2017), IEP teams continue to make decisions that often place these students in the most restrictive educational settings (Agran et al., 2020; Jackson, 2014; Ryndak et al., 2014; Smith, 1990). In approaching this research, I hoped this study might offer insight into how team members describe and reflect on their roles and responsibilities in making instructional choices for students with ESN. In an attempt to fully explore this complex human phenomenon, I framed my investigation utilizing Vygotsky's sociocultural theory.

Theoretical Framework

Theory is not a concept that can be defined singularly, and according to Anfara and Mertz (2015), theory may be considered as a methodological viewpoint that attempts to explain or predict phenomena or a "shift in one's mental structure" (p. 2) to discover something new. Ravitch and Riggan (2017) proposed that theory is developed through careful and intentional investigations, and the authors further defined this concept within the idea of *structure*. They explicated the idea of a framework in terms of support and contended that the structure of formal theory is used to "illuminate some aspect of a researcher's conceptual framework" (Ravitch & Riggan, 2017, p. 12). Anfara and Mertz emphasized that conceptual and theoretical frameworks guide all aspects of research, establishing a purpose and helping direct how research is conducted.

Sociocultural Theory

Sociocultural theory was developed in response to perceived inadequacies in the predominate learning philosophies that fixated on the internal, subjective, or behavioral processes of human development subjugating the landscape of psychology in the 1900s (John-Steiner & Mahn, 1996; Vygotsky, 1934/2012; Wertsch, 1989). This theory conceptualized that learning and development resulted from social opportunities deeply entrenched in an individual's history and culture (Cobb & Yackel, 2011; Daniels, 2001; de Valenzuela et al., 2000; de Valenzuela, 2014; John-Steiner & Mahn, 1996; Vygotsky, 1934/2012; Wertsch, 1989; Wertsch, 1998; Wertsch & Tulviste, 1992). Vygotsky's work offered substantial contributions to the endeavor of understanding human development and learning (Daniels, 2001; de Valenzuela, 2014; Vygotsky 1934/2012), and Wertsch (1989) identified three main tenets associated with Vygotsky's theoretical vision. First,

the author stated that Vygotsky's work relied upon "a genetic, or developmental method" (p. 141). Additionally, Vygotsky believed that human development required both social and individual action (Wertsch, 1989). Lastly, the author stated that Vygotsky theorized that mental functioning, both individual (i.e., intra-psychological) and collective or group (i.e., inter-psychological), was mediated through technical tools (e.g., objects), as well as psychological tools and signs (e.g., language, mnemonics, numbers, writing; Wertsch, 1989; Wertsch, 1998).

   Sociocultural Lens. In addition to the study of mental functioning, Wertsch (1998) discussed that sociocultural analysis could be expanded to what the author referred to as its "proper focus: human action" (p. 23). Wertsch further emphasized that sociocultural analysis could be used to investigate the complex relationships that exist between human action and the setting or background (e.g., historical, cultural, or institutional contexts) in which the action occurs. In this way, the author defined human action as mediated action.

   While Wertsch (1998) emphasized that "most all human action is mediated action" (p. 24), he specified that when utilizing a sociocultural lens, investigators may wish to focus on the connections between individuals or groups and the cultural tools (i.e., mediational means) that may impact or shape the phenomena of study. Wertsch felt this relationship was the mechanism in which additional aspects of the experience (e.g., setting or purpose) might be naturally studied. The author further outlined ways in which mediated action might be characterized (e.g., tension or tie between individuals/groups and cultural tools, goals or purposes of persons involved in phenomena, barriers/facilitators that impact, and the effects of power and authority).

In this study, I investigated how individual IEP team members described their roles and responsibilities as decision-makers within the context of the IEP meeting. I aimed to discover the different mediational means (e.g., technical or psychological tools) that shaped each team member's perspective and unique understanding of how they were situated or positioned as a decision maker within the team. In order to understand better the IEP process and how team members view their responsibilities as decision-makers, I examined the phenomenon in the "flow of action" (Wertsch. 1998, p. 25). Moreover, Wertsch emphasized that human action and behavior could not be fully understood outside of the context in which it was embedded. To address this, I explored individual team members' perceptions of decision-making and investigated the different mediational means that guided their interaction, engagement, and discussion through interviews prior to and directly following an IEP meeting.

The IEP Team. Ruppar and Gaffney (2011) acknowledged that considering the experiences of "one IEP team for one student in one school district…[was a] modest exploration" (p. 26), but they also emphasized the value of this type of research. The investigators stated that examining the IEP process through the voices of individual team members allowed researchers to illuminate this collective human experience. The authors stated that IEPs for students with ESN offer a unique context in which to gain additional insight into the IEP team and IEP process. Additionally, they maintained that due to the fact that these IEP teams were often composed of more members with a host of different expertise, IEP teams supporting students with ESN had the potential to provide unique opportunities to extend the current understanding of this complex phenomenon. Furthermore, they identified a paucity of research on how teams work together in the

decision-making process.

Within this limited body of research, Ruppar and Gaffney (2011) investigated the discussion and discourse that occurred within an IEP meeting, and the researchers found that team members engaged in behaviors that were enabled or constrained by social and cultural boundaries (e.g., saving face, avoiding conflict, maintaining professional identity). Additionally, the researchers found that when IEP team facilitators used the document as an agenda, this practice created a cultural dynamic that negatively impacted a team's ability to effectively collaborate and make decisions in the context of the IEP meeting. Finally, they also noted that interactions between IEP team members were impacted by who attended, ran, and participated in the meeting (e.g., administrative presence).

For my study, I utilized a sociocultural framework to consider the many potential social and cultural factors that mediated how one IEP team perceived decision-making roles and their unique responsibilities in making educational choices for a student with ESN. In Chapter 2, I explored the existing body of research that has investigated IEP team members' perceptions of the IEP process in greater detail. I considered how these investigations have deepened my understanding of the IEP process and informed and guided my current research proposal.

Definitions/Terms

Assumption

The term "assumption," according to the American Psychological Association dictionary (2024), is defined as "the premise or supposition that something is factual or true; that is, the act of taking something for granted" (para 1).

Belief

The term "belief," according to the American Psychological Association dictionary (2024), is defined as "acceptance of the truth, reality, or validity of something (e.g., a phenomenon, a person's veracity), particularly in the absence of substantiation." (para 1).

Free and Appropriate Public Education (FAPE)

The term "free appropriate public education" means special education and related services that—

a. have been provided at public expense, under public supervision and direction, and without charge;

b. meet the standards of the State educational agency;

c. include an appropriate preschool, elementary school, or secondary school education in the State involved; and

d. are provided in conformity with the individualized education program required under section 1414(d) of this title (20 U.S.C. § 1401 (9)).

General Education Curriculum

General education curriculum can be defined as "the formal curriculum adopted by the state and local education agencies; a curriculum usually designed under the auspices of standards-based reform efforts" (Wehmeyer et al., 2001, p. 328)

Inclusive Education

"Inclusive education occurs when (1) students with disabilities are educated in classrooms and grouped together in natural proportions (e.g., what exists in the natural world); (2) the classroom culture is one of belonging and all students are active members;

(3) students share differentiated instructional experiences while working on individualized objectives; (4) individual students with disabilities are educated in classrooms that are frequented by peers without disabilities; and (5) the educational experiences are balanced to include academic, functional, and social experiences to allow students to develop a well-rounded set of skills" (Giangreco et al., 2000, p. 294).

Individualized Education Program (IEP)

The IEP is a "a written statement for each child with a disability that is developed, reviewed, and revised" (20 U.S.C. § 1414(d)(1)(A)(i)), and it is constructed by an IEP team (20 U.S.C. § 1414(d)(1)(B)).

Individualized Education Program Team (IEP Team)

The Individualized Education Program Team (IEP team) is a group of individuals consisting of key stakeholders that must include the parent of the child and the child when appropriate (Drasgow et al., 2001; Yell, 2019; Yell et al., 2020a) Additionally, the IEP should include, at a minimum, one general and special education teacher, and it is preferred that said teacher(s) have experience working with the student (Drasgow et al., 2001; Yell, 2019; Yell et al., 2020a). Further, this team must also have a district representative who is qualified and knowledgeable regarding the allocation of resources and supports for a student and a representative who can interpret testing results (Drasgow et al., 2001; Yell, 2019; Yell et al., 2020a). Finally, the district or parents can request additional individuals who have relevant knowledge of the child (Drasgow et al., 2001; Yell, 2019; Yell et al., 2020a).

Least Restrictive Environment (LRE)

Least restrictive environment (LRE) is defined as an educational environment that

ensures that students with disabilities are educated with their peers without disabilities (e.g., within the general education classroom) to the maximum extent appropriate, and that "removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily" (20 U.S.C. § 1412(a)(5)(A)(B)).

Related Service

The term "related services" refers to transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, school nurse services designed to enable a child with a disability to receive a free appropriate public education as described in the individualized education program of the child, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children (20 U.S.C. § 1401(26)(A)).

Special Education

The term special education means "specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including (A) instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and (B) instruction in physical education" (20 U.S.C. § 1401(29)(A-B)).

Students with Extensive Support Needs (ESN)

The term students with extensive support needs (ESN) may include individuals with autism spectrum disorder (ASD), intellectual disability (ID), multiple disabilities (MD), or deaf-blindness (McCabe et al., 2020; Taub et al., 2017). Additionally, students with ESN may require assistance and supports across multiple areas of their life (e.g., academic, social, communication, self-help; McCabe et al., 2020; Taub et al., 2017), and these individuals may qualify for alternative forms of assessment throughout their academic careers (Kurth et al., 2019; McCabe et al., 2020; Taub et al., 2017).

Supplementary Aids and Services (SAS)

The term "supplementary aids and services" means aids, services, and other supports that are provided in regular education classes or other education-related settings to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate in accordance with section 1412(a)(5) of this title. 20 U.S.C. § 1401 (33).

Chapter 2

In this chapter, I reviewed existing literature that has examined the perceptions

and experiences of individualized education program (IEP) team members and their role

in the decision-making process during the IEP meeting. Due to the paucity of research on

IEP teams supporting students with extensive support needs (ESN; Hartmann, 2016;

Ruppar & Gaffney, 2011), the purpose of my research study was to investigate individual

IEP team members' perception of theirs and others responsibilities and contributions to

the many educational decisions made to support a student with ESN when creating an

IEP. The following research questions guided my study:

- How do IEP team members conceptualize their responsibilities within their IEP

  team role in the decision-making process when developing an IEP for a student

  with ESN?

- How do IEP team members conceptualize their own and others' contributions to

  the decision-making process when developing an IEP for a student with ESN?

Method

In order to meet the objectives of this literature review, which was to explore the

research related to IEP team members supporting students with ESN, I began by

conducting a search for published studies that focused on the experiences of these team

members. Due to the limited number of investigations, I expanded the scope to include

investigations of IEP teams supporting students with autism (ASD) and intellectual

disability (ID) who were not identified as students with ESN (e.g., students with

disabilities who can participate in statewide standardized assessment). To guide my

research, I examined investigations that explored the perceptions and experiences of IEP

team members within the IEP process, including all original research that utilized

quantitative, qualitative, or mixed-method designs. Additionally, to deepen my

understanding of how these individuals perceive the decision-making process within the

context of an IEP team meeting, I searched for studies that allowed IEP team members to

give a voice to their experiences (i.e., inclusion and exclusion criteria are listed in detail

below).

Search Protocol

In an effort to locate the relevant research regarding IEP team members'

perceptions of their roles and responsibilities within the IEP process for students with

ASD, ID, multiple disabilities (MD), and deaf-blindness, I conducted a broad search

utilizing several academic databases: Academic Search Complete, APAPsycArticles,

APAPsycInfo, CINAHL Complete, Education Research Complete, and ERIC. These

databases were specifically chosen as they are commonly referenced for scholarly work

related to education.

In order to locate existing research, I created extensive search strings that utilized

present-day terminology (e.g., intellectual disability, student with a disability) as well as

outdated education terminology (e.g., mental retardation, handicapped) to locate any

studies that examined different IEP team members, their roles, engagement, experiences,

and participation in the educational decisions made in the creation of the IEP (See Table

1). Further, I slightly modified and repeated the search strings in an attempt to locate all

relevant research that investigated the perspective of IEP team participants supporting the

students identified above.

Table 1

The IEP Team: The Perception of Roles Search String

Keywords	Example Search Strings
Main search terms[a]	
IEP Team	"individual* education plan team" OR "individual* education program team" OR IEP TEAM
IEP	"individual* education plan" OR "individual* education program" OR "IEP"
Secondary search terms	
Student with disabilities	"significant* handicap*" OR "sever* handicap*" OR "profound* handicap*" OR "sever* disabil*" OR "SD" OR "profound* disabil*" OR "signifianct* disabil*" OR "significant support needs" OR "extensive support needs" OR "complex support needs" OR "multiple disabil*" OR "MD" OR "moderate autism" OR "severe autism" OR "significant autism" OR "profound autism" OR "ASD" OR "moderate intellectual disabil*" OR "severe intellectual disabil*" OR "significant intellectual disabil*" OR "profound intellectual disabil*" OR "moderate cognitive disabil*" OR "CD" OR "severe cognitive disabil*" OR "significant cognitive disabil*" OR "profound cognitive disabil*" OR "moderate mental retardation" OR "severe mental retardation" OR "significant mental retardation" OR "profound mental retardation" OR "MR" OR "deaf-blindness" OR "intellectual disability" OR "ID/IDD"
Roles and responsibilities	roles OR responsibilities OR duties OR jobs
Perceptions or experiences	perceptions OR attitudes OR opinion OR experience OR view OR reflection or beliefs OR understanding

Keywords	Example Search Strings
Collaboration or participation	articipation OR collaboration OR teamwork OR "group work" OR interdisciplinary OR communication
Contribution or involvement	engagement OR involvement OR experience OR contribu*
Decision-making	"decision making" or "decision-making" or "decision making process" or "decision-making process" or decision*

Note. Total articles found with duplicates removed N = 270

[a] Main search terms were paired individually with each secondary term across all

databases, duplicates were removed

Selection Protocol

Using the process described above, my initial search returned 270 total articles. I

reviewed their abstracts and searched for peer-reviewed, original studies that investigated

IEP teams supporting students identified with ASD (i.e., autism, Asperger's syndrome,

pervasive developmental disorder – not otherwise specified [PDD-NOS]), ID, Down

syndrome, MD (e.g., orthopedic impairment and ID; cerebral palsy and ID), and deaf-

blindness. Further, I searched for studies conducted in the United States. Additionally,

studies completed in public schools supporting students ranging from 3 to 21 years of age

were also included.

Investigations that studied IEP team members' perceptions and experiences in the

IEP meeting were examined, and within these studies, I specifically looked for research

that explored how team members described the decision-making process. I included

qualitative, quantitative, or mixed method research that surveyed, interviewed, or

observed IEP teams directly. Within the qualitative studies included, researchers also

analyzed field notes, documents, and artifacts obtained during IEP meetings, interviews,

or observations.

In seeking research that would help create a framework for my proposed investigation of examining the perceptions of IEP team members, I excluded research that focused solely on document review to determine IEP quality, compliance, or content. I also excluded studies that did not directly observe, interview, or survey IEP team participants regarding their perceptions or experiences within the IEP team meeting. For example, I did not include studies that examined students' roles within the IEP meeting through interviews or surveys completed by a parent, caregiver, service provider, or teacher. However, I did include studies in which researchers directly interviewed or surveyed students about their perceptions or experiences during the meeting.

Further, I excluded studies that did not examine or investigate teams within the context of the IEP meeting. For example, I excluded studies that focused on families and students working within a mock or simulated IEP framework. Additionally, I excluded intervention studies that did not investigate the perceptions or experiences of IEP team members in the context of the actual IEP meeting or the real-time process. For example, I excluded intervention studies that focused on teaching student self-determination skills embedded in their curriculum. However, I did include studies that considered student or family perspectives in pre/post interventions when examining the actual IEP meeting. Finally, I excluded research investigations outside the public school system (e.g., private schools, private charter schools, institutions, and home-school). A total of 15 published studies met the criteria. (See Table 2 for a description of the studies).

Initial Analysis

Overview

      First, I sorted qualifying studies by methodological approach (e.g., qualitative,

quantitative, mixed methods) and organized them by data collection method (e.g.,

interview, observation, survey). Studies were then categorized by participants (i.e.,

studies that examined the perceptions of multiple IEP team members, studies that focused

solely on parent perceptions, or studies that focused on solely student perceptions) and

the stated purpose of the investigation (i.e., I examined both the stated purpose and the

research question or questions). To guide my study, I also reviewed the studies' overall

outcomes, limitations, and implications for future research, as most of the research

located did not directly seek to ascertain how IEP team participants perceived their roles

and responsibilities in the decision-making processes within an IEP team meeting.

      Methodological Approach and Data Collection. Of the qualifying studies, the

majority (n=11) utilized a qualitative methodology (e.g., case study, interviews, focus

groups), three studies utilized quantitative measures (e.g., surveys or questionnaires), and

one group of researchers (Tucker & Schwartz, 2013) stated that they conducted a mixed

methods investigation, but only reported the quantitative results in their findings.

All eleven of the qualitative studies and the one mixed methods investigation used some

form of interview (i.e., semi-structured, informal, or focus groups; Bacon & Causton-

Theoharis, 2013; Childre & Chambers, 2005; Fish, 2006; Lusa, 2008; Miller et al., 2019;

Mueller & Buckley 2014a; Mueller & Buckley, 2014b; Ruppar & Gaffney, 2011;

Sheehey, 2006; Stoner & Angell, 2006; Stoner et al., 2005; Tucker & Schwartz, 2013). In

addition to interviews, three of these studies included observations in their data collection

and analysis (e.g., observations of IEP meetings or IEP team practices; Bacon & Causton-

Theoharis, 2013; Lusa, 2008; Ruppar & Gaffney, 2011). Two of the studies examined

artifacts or engaged in document review in addition to interviews (Bacon & Causton-

Theoharis, 2013; Ruppar & Gaffney, 2011). All of the quantitative studies and the one

mixed methods study utilized surveys or questionnaires.

     Participants. I separated studies into three groups based on the stated participants

(i.e., multiple IEP team members, parents, and students). Two studies were included

under the category of multiple IEP team members (Giangreco, 1990; Ruppar & Gaffney,

2011). Studies placed in this group documented the perceptions of multiple IEP team

members as the participants (e.g., related service providers, special education teachers,

and parents), and these participants ranged from IEP team members on a single team to

participants across multiple potentially unrelated IEP teams. Eleven of the fifteen studies

focused on the experiences of the parent as an IEP team member (Bacon & Causton-

Theoharis, 2013; Childre & Chambers, 2005; Fish, 2006; Lusa, 2008; Miller et al., 2019;

Mueller & Buckley, 2014a; Mueller & Buckley, 2014b; Sheehey, 2006; Stoner et al.,

2005; Stoner & Angell, 2006; Tucker & Schwartz, 2013). The final two studies that met

inclusion criteria investigated students' perceptions as IEP team members (Agran &

Hughes, 2008; Hughes et al., 2013). These studies focused on students' perceptions of

their roles within the IEP process (e.g., self-determination, advocacy).

     Research Purpose or Research Question. To ensure the studies located would

inform my research, I considered each investigation's purpose and proposed research

questions. Within the studies that met inclusion criteria, I concentrated on the purpose,

research questions, and findings that addressed how IEP team members experienced the

meeting, described participation, or navigated special education when linked to IEP team

Table 2

Overview of Articles

Author	Purpose	Participant/Setting	Design/Data Source	Results	Implications
Agran & Hughes, (2008)	Student perception of role in IEP process/access to self-determination curriculum and teaching advocacy skills.	Students (n = 17) with ID/high school Students (n = 56) with varied disabilities/junior high school	Pilot Study/ survey	Students reported having a limited role in IEP meetings and decision-making. 80% of students lacked the skills to lead IEP, only 24% understood, and 52% attended IEP	Insight regarding the extent to which students are taught self-determination in IEP
Bacon & Causton-Theoharis, (2013)	Examined the role of parents as partners in special education process	Parents (n = 17)/ pre-secondary	Interview/ discourse analysis	Described "parent-advocates" in IEP as battling, fighting, or waging war. Noted that school practices "undermined equity of participation"	Implementation of training to increase collaboration in IEP decision-making
Childre & Chambers, (2005)	Examined parental perceptions of IEP purpose and participation. Impact of intervention, SCIEP	Parents (n=6)/ secondary	Qualitative interviews	Limited parental role in IEP (e.g., 6:6 role = listening, 5:6 role = agree) Post intervention increase in active participation	Inclusion of parents through education, shift professional driven to shared learning focus

Author	Purpose	Participant/Setting	Design/Data Source	Results	Implications
Fish, (2006)	Investigate parental perceptions of IEP, view as a valued member	Parents (n = 17)/ primary to secondary	Qualitative interview	Parental perception of unequal treatment and devaluation of input.	Improve IEP process through the provision of education (e.g., parent rights, legal requirements)
Giangreco, (1990)	Examined perceived roles and criteria used in decision-making among IEP team participants	IEP team members (n = 312)/ public school	Quantitative questionnaire	Indicated that many SE teachers and related service professionals supported discipline-determined decision-making in the IEP	Support for consensus decision-making through staff development and training.
Hughes et al., (2013)	Investigated association between inclusive access and reported self-determination skill use	Students (n = 47)/ secondary	Quantitative/ survey	Significantly improved differences found related to self-determination skill use (e.g., self - advocacy) for students in more inclusive placements	Need to increase inclusive access and community experiences for individuals with ID
Lusa, (2008)	Investigated parent participation in the IEP for CLD families	Parents (n = 5)/ primary-secondary	Qualitative/ interviews, observations	Identified barriers to equitable access as partner in IEP (i.e., language barriers and parent input not welcomed or valued).	Improve access for parents through education and training. Support home language.

Author	Purpose	Participant/Setting	Design/Data Source	Results	Implications
Miller et al., (2019)	Investigated parental navigation of special education and inclusion	Parents (n=17)/ primary - secondary	Qualitative interview, focus group	Parents assumed different identities within the IEP process (i.e., victim, advocate, persevere, educator, broker/negotiator, and surrenderer.	Researchers should work to understand the experiences of parents and children with various support needs.
Mueller & Buckley, (2014a)	Explored how father's work and collaborate in the special education system	Fathers (n = 20)/ pre - secondary	Qualitative/ interview	Primary roles of father: partner, advocate, and student. Felt like the 'odd man out'	Create space in the system for fathers and put in "dad-friendly" practices to address biases
Muller & Buckley, (2014b)	Investigate father's perceptions when navigating special education and IEP	Fathers (n = 20)/ secondary	Qualitative/ interview	IEP participation defined as not collaborative, overwhelming, and associated with conflict	Improve effective collaboration through trust, partnership, honesty, and the ability to listen
Ruppar, & Gaffney, (2011)	Explored IEP team members' roles and impact of discourse on decision-making in IEP	IEP team members (n = 2)/primary	Case Study/ interview, document analysis	Few collaborative discussions occurred during IEP and prior communication may impact IEP decision-making	Examined discourse structures that may be considered in all IEP meetings
Sheehey, (2006)	Investigated CLD family experience of decision-making in special education	Parents (n = 3)/ primary - secondary	Case study/ interview document review	Cultural view of participation (e.g., presence, contributions, exchanges of informal information)	Finding common ground with mainstream values and home culture when working with diverse families

Author	Purpose	Participant/Setting	Design/Data Source	Results	Implications
Stoner et al., (2005)	Explored parental influence on interactions, experiences, roles, and relationships with education professionals.	Parents (n = 4)/ pre-primary	Qualitative/ Interview	The shift from IFSP to IEP difficult and complicated (i.e., traumatic) for families	Current practice impacts parents' ability to participate fully in initial IEPs. Work to equalize power dynamic with families
Stoner & Angell (2006)	Investigated parents roles in educational program development	Parents (n = 4)/ pre – primary	Qualitative/ interviews	Parents assumed the roles of negotiator, monitor, supporter, and advocate within the IEP process.	Role of trust in creating cohesive educational teams that work collaboratively to develop supports and services for students with ASD
Tucker & Schwarz, (2013)	Evaluated parental perceptions of collaboration and conflict in the IEP	Parents (n = 135)/ pre - secondary	Quantitative, Survey	IEP teams often failed to include parental contributions in the final IEP document, which impacted their ability to be viewed as valued members of the team.	IEP teams should work together in practical ways that allow for increased family input and voice in the process.

Note. ASD = autism spectrum disorder; CLD = culturally and linguistically diverse; CS = communication specialist, DB = deaf-blindness; ; ESN = extensive support needs; ID = intellectual disability; IEP = individualized education program; IFSP = individualized family service plan; OI = orthopedic impairment; OT = occupational therapist; pre = preschool; PT = physical therapist, SCIEP = student-centered individualized education planning, SLP = speech/language pathologist.

meeting experiences. For example, if a study had multiple research questions and one of

the questions did not investigate the IEP team process (e.g., perceptions or experiences of

the team meeting), I excluded that data from this review. Additionally, I focused only on

the results, findings, and discussions for participants that met my initial inclusion criteria.

For example, if a study focused on multiple participants (e.g., students with ESN and

students with learning disabilities), I extracted the data, findings, and discussions that

concentrated on the subset of students identified in my inclusion criteria above. A brief

summary of the studies is provided below.

   Perceptions and Experiences of Multiple IEP Team Members. Two studies

directly investigated the IEP team members' perceptions of the decision-making process

(Giangreco, 1990; Ruppar & Gaffney, 2011). First, Giangreco (1990) investigated the

self-reported perceptions of the roles (i.e., outcome enabling or discretionary) of related

service professionals (i.e., occupational therapists, physical therapists, or communication

specialists) from the perspectives of IEP team members (i.e., parents, special education

teachers, and related service support professionals). In addition, the author examined how

these IEP team members perceived seven criteria potentially utilized in the decision-

making process. They further studied how these team members perceived authority in

making related service support decisions when developing an IEP for a student with ESN.

In the second study, Ruppar and Gaffney (2011) explored the perspectives of IEP team

members during an initial IEP for a student identified with ESN, and the researchers

further focused on individual team members' perceptions of the decision-making process

within the context of the IEP meeting.

   Perceptions and Experiences of Parent Participation in the IEP Process. Eleven

studies investigated the perceptions and experiences of parents' participation in the IEP

process (Bacon & Causton-Theoharis, 2013; Childre & Chambers, 2005; Fish, 2006;

Mueller & Buckley, 2014a; Mueller & Buckley, 2014b; Lusa, 2008; Miller et al., 2019;

Sheehey, 2006; Stoner et al., 2005; Stoner & Angell, 2006; Tucker & Schwartz, 2013).

Further, ten of the eleven studies focused on parents' participation in the decision-making

process during IEP team meetings (Bacon & Causton-Theoharis, 2013; Fish, 2006; Lusa,

2008; Mueller & Buckley, 2014a; Mueller & Buckley, 2014b; Miller et al., 2019;

Sheehey, 2006; Stoner et al., 2005; Stoner & Angell, 2006; Tucker & Schwartz, 2013).

Among these ten studies examining parent participation, one focused on parents'

early experiences (e.g., the transition from early intervention to school-based support)

and examined how these families described their experiences within the IEP process

(Stoner et al., 2005). Additionally, three of the ten studies investigated parents' roles and

identities when engaging with education professionals during the IEP (Miller et al., 2019;

Mueller & Buckley, 2014a; Stoner & Angell, 2006). Further, six of the ten studies

examined the experiences of parents in the decision-making process (Bacon & Causton-

Theoharis, 2013; Fish, 2006; Lusa, 2008; Mueller & Buckley, 2014b; Sheehey, 2006;

Tucker & Schwartz, 2013). Within the six studies, two investigations also studied the

perceptions and experiences of culturally diverse families as IEP team participants (Lusa,

2008; Sheehey, 2006).

Perceptions and Experiences of Student Participation in the IEP Process. Two

studies investigated students' perspectives on their participation in the IEP process and

transition planning meetings (Agran & Hughes, 2008; Hughes et al., 2013). Agran and

Hughes (2008) conducted a pilot study in which they acquired preliminary data by

looking at students' perceptions of their roles within the IEP team process through direct interviews. Hughes et al. (2013) focused on associated levels of participation in connection to student engagement and participation in inclusive school and community activities.

Results

Perceptions and Experiences: Multiple IEP Team Members

In this section, I reviewed two studies that examined the decision-making processes from the perspective of multiple IEP team members supporting students with ESN. First, I discussed the quantitative findings regarding self-reported perceptions of related service provider roles, decision-making criteria utilized to determine the provision of related services, and decision-making authority within the development of the IEP. Second, I examined a qualitative case study that investigated the perceptions of multiple IEP team members (e.g., related service providers, special education teachers, and parents) in the decision-making process during an initial IEP meeting.

Team Decision-Making in the IEP

Giangreco (1990) conducted a quantitative study using survey research (i.e., questionnaire). The survey involved parents, special education teachers, and related service providers (i.e., occupational therapists, physical therapists, and communication specialists) from unrelated IEP teams. Additionally, it was sent to each participant through the postal service.

This investigation examined the IEP team participants' perceived roles, criteria used for the provision of related service support (i.e., speech/communication, fine/gross motor), and the expectations of decision authority when developing the IEP. Giangreco

(1990) adapted a questionnaire developed from previous research that used a 10-point,

Likert-like scale that allowed participants to indicate differing levels of agreement or

disagreement with role perceptions, decision-making criteria, authority to make

decisions, and a section to make narrative comments. The participants in this study

"included parents (n = 58), special education teachers (n = 100), occupational therapists

(n = 46), physical therapists (n = 37), and communication specialists (n = 71)"

(Giangreco, 1990, p. 23). Of the returned, 312 met criteria for analysis.

In considering the findings from this study as they aligned with my research, I

examined the researcher's conclusions regarding the decision-making processes in

determining the provision of related service supports for a student with ESN. First, I

examined the findings regarding different criteria used to make decisions regarding the

provision of related services (Giangreco, 1990). These criteria were grouped as essential

(i.e., benefit from the educational program, absence or overlap of services), discretionary

(i.e., age, the severity of impairment, history/prognosis for remediation), and

inappropriate (i.e., intelligence quotient, probability of parental involvement; Giangreco,

1990). When examining these criteria, Giangreco (1990) investigated participants' self-

reported agreement or conflict with the use of each measure to make decisions regarding

the provision of related services for students with ESN.

Giangreco (1990) analyzed data for differences in how participants agreed or

disagreed with role statements, the criteria used by different team members to determine

related services for students with ESN, and who had final decision authority in IEP

meetings (e.g., collaborative team decision, related service provider decision).

Statistically significant differences were found in how participants viewed some decision-

making criteria for related services (Giangreco, 1990). The use of essential criteria

showed the highest level of participant agreement, such as ensuring children with ESN

benefited from related services and examining overlaps or gaps in service provision

(Giangreco, 1990). Giangreco found differences regarding how team members (i.e.,

parents, special education teachers, and related service providers) viewed decision

authority for related service provision in IEPs, with related service providers agreeing

more often than parents and special educators on certain criteria. No significant

differences were found among participants who identified as related service providers

(i.e., outcome-enabling versus discretionary roles; Giangreco, 1990).

In addition to these descriptive findings, Giangreco (1990) found statistically

significant differences in the way that participants viewed two of the identified decision-

making criteria (i.e., the prognosis for remediation and perceived intelligence). First,

while IEP team participants considered the favorable history and prognosis for

remediation for students to determine related service supports, parents and special

education teachers held differing opinions or agreed less strongly than their related

service counterparts (Giangreco, 1990). Further, all team members rated perceived

intelligence (i.e., IQ score) lowest in the rank order of criteria to determine the provision

of related services. The author found statistically significant differences between rankings

by related service providers as a group, special education teachers, and parents. Related

service providers stated that it was "more important to provide services to students

identified with higher levels of intelligence" (Giangreco, 1990, p. 27). Conversely,

special education teachers and parents tended to agree less strongly or disagree with this

criteria statement (Giangreco, 1990).

While surveying the different beliefs IEP team members reported regarding decision-making criteria, Giangreco (1990) discovered that dissimilarities held practical significance for teams working to develop an IEP, and he indicated that these "differences regarding decision-making criteria highlight a foundational issue among groups in achieving team functioning" (p. 29). Additionally, the author indicated that the identification of criteria in decision-making remained a challenging barrier, and he emphasized that these differences in expectations often intensified conflict within the IEP team, resulting in the development of IEPs that contained gaps, overlaps, or inappropriate provision of services.

In addition to the criteria that IEP teams utilize to make educational decisions, Giangreco (1990) investigated how IEP team members viewed two different forms of decision-making (i.e., autocratic versus consensus). As before, the related service provider group agreed more strongly to professional retention of their autonomy in proposing related service supports (Giangreco, 1990). Overall, the author reported that, to some extent, professionals believed that they should have the ability to make decisions, while parents in this study tended to disagree with this form of authority (Giangreco, 1990).

In examining decision-making authority, Giangreco (1990) proposed that autocratic or democratic approaches to decision-making (i.e., majority rule) created inequity for parents. Moreover, he emphasized that both of these forms of decision-making may disincentivize a parent to voice their opinions on educational choices during IEP meetings, and he further acknowledged that these forms of decision-making fail to see the value a parent brings to the IEP table. The author emphasized the need for IEP

teams to invest in consensus decision-making, as this process could potentially allow all group members to be valued in the development of the IEP.

Through the use of an instrumental qualitative case study, Ruppar and Gaffney (2011) investigated the decision-making processes of one IEP team for a young student with ESN. The stated purposes of their study were to (1) consider how conversations (i.e., discourse within the IEP meeting) impacted educational decisions and (2) explore how different team members perceived both the decision-making process and the final outcomes established in the IEP.

This investigation took place at a rural school in the Midwest, and the participants included the IEP team for a five-year-old student transitioning into kindergarten (Ruppar & Gaffney, 2011). The members of the IEP team included the special education director, the school principal, the preschool teacher, the special education teacher (i.e., kindergarten), a psychologist, occupational therapist, physical therapist, two speech/language pathologists (i.e., current and receiving), and the parents (i.e., child's biological mother and father). Ruppar and Gaffney (2011) noted that of the 11 IEP team participants, one speech/language pathologist declined to participate. The data collected for this investigation included semi-structured interviews of IEP team participants, observation of the transition multidisciplinary team (MDT)/IEP team meeting, and document/artifact review (e.g., IEP; Ruppar & Gaffney, 2011).

Ruppar and Gaffney (2011) observed a 2-hour IEP meeting and collected data through audio recording and researcher field notes. Additionally, to capture turn-taking and discourse, investigators stated that they used momentary time sampling to evaluate how many times team members engaged in conversation throughout the IEP. In addition

to the observation, interviews were conducted in person or by telephone and ranged from

17 to approximately 33 minutes (Ruppar & Gaffney, 2011). All interviews were audio

recorded. The authors emphasized that participant interviews were conducted shortly

after the IEP meeting (i.e., less than 10 days) to help researchers capture all pertinent

information. The interviews were transcribed and analyzed to examine discussions that

occurred during the IEP team meeting and investigate how discourse may have impacted

how IEP team decisions were made. Additionally, investigators considered how IEP team

members perceived the decision-making process. The researchers initially coded the data

independently and later met multiple times in order to concur on all themes and findings.

For the purposes of this review, I focused on the data and findings regarding the

researcher's second aim: the team's perceptions of the decision-making process. During

individual interviews, Ruppar and Gaffney (2011) found that IEP team members reported

they held different opinions regarding the final decisions made for student placement and

student eligibility. For example, the authors reported that during the IEP meeting, the

preponderance of the discussion concerning eligibility (e.g., ID versus ASD) was led by

the psychologist and school principal, involving more limited discussion with the

student's mother. The authors stated that some team members (e.g., SLP) described that

the school psychologist's input limited other discussion that may have favored autism as

the child's eligibility. It was further noted by the authors that it was the school principal,

not the mother, who voiced the parental concerns and desire to have the student evaluated

for autism. Even with the discourse that occurred regarding this important educational

decision, the researchers found that despite the mother's firm disagreement during the

meeting, the parent did not directly oppose the team in the final decision to assign ID as

her child's primary eligibility.

In addition to the parent's silence, Ruppar and Gaffney (2011) found that school-based IEP team members also held differing opinions that were not offered during the meeting. For example, the authors stated that school-based team members were mixed (e.g., agreement, disagreement, neutral) on whether or not the child should be evaluated for autism. While some felt that assessing for autism would have been prudent, they did not offer additional support for this parental concern in the meeting (Ruppar & Gaffney, 2011). Despite divergent ideas, many team members elected to abstain from the eligibility discussion during the IEP meeting, and in examining this evidence, the researchers pondered that if the team had engaged in these potentially collaborative discussions, that specific discourse may have impacted IEP team decisions.

In addition to eligibility, Ruppar and Gaffney (2011) found that IEP team members held opposing or different thoughts regarding the child's placement. According to the authors, when the special education director suggested a percentage of inclusive educational opportunities (i.e., 30%), many IEP team members saw this as a directive. In considering how placement decisions occur within the IEP team, the researchers also discovered that several members of the team felt that the placement decisions should occur prior to determining student goals. In considering this revelation, the authors emphasized that this decision order was in direct conflict with the legal guidance from IDEA (Bateman, 2017; Yell, 2019), and further, the authors stated that the connections that should occur between what a student learns (i.e., curriculum) and where a student accesses their curriculum (i.e., educational context) were not clearly established in the decisions made during this IEP meeting.

Through these data, Ruppar and Gaffney (2011) found that the IEP team struggled to fully engage in the process of collaborative discussions and decision-making, and while team members discussed that they held different opinions that were not shared publicly in the IEP meeting, additional information regarding how team members specifically described or perceived their roles or responsibility in this process was not fully explored. In regard to team perceptions of their roles and responsibilities in the decision-making process, the authors maintained that team members indicated a high level of trust and respect for their colleagues. Additionally, they considered that team members may have remained silent in an effort to provide a united front during the IEP team meeting or to save face/reduce the risk of embarrassment (e.g., challenging a colleague in a public meeting) during the IEP.

Perceptions and Experiences: Parent Participation in the IEP Process

In this section, I reviewed eleven studies that solely addressed the perspective of parents as IEP team members. While the studies had larger overarching aims (e.g., investigating parental experiences within the special education process), I concentrated my exploration on data in each study that focused on parent experiences within the IEP team meeting. In this section, I reviewed the studies as they pertained to my research question regarding how IEP team members perceive their roles and responsibilities in the decision-making process when developing an IEP (i.e., early experiences, roles and identities, experiences as a team member).

The Purpose of the IEP Meeting: Perceived Expectations for Participation

Childre and Chambers (2005) utilized a qualitative research design to investigate the impact of student-centered individualized education planning (SCIEP) on family

members' and professionals' perceptions of participation and involvement in the IEP

process. Of the studies that considered parents' perspectives, this is the only intervention

study that met my inclusion criteria. I discuss the rationale and findings in detail below.

The author utilized semi-structured interviews to examine the family and school

perspectives, pre- and post-SCIEP intervention, and to investigate the parents' initial

perceptions of the purpose of the IEP. Additionally, the researchers investigated the

parents' expectations for participation (i.e., parent and child) in the IEP meeting and

evaluated the impact of SCIEP on the families' experiences and perceptions during the

IEP process. For this review, I focused primarily on data provided from the first research

question. This question addressed the family's perceptions of both the purpose of IEP

meetings and their experiences and thoughts regarding participation in the meeting (i.e.,

for both family and child).

Childre and Chambers (2005) utilized purposeful sampling and recruited

participant families of students with disabilities who were additionally identified as

students with orthopedic impairments. The student participants included (n = 5) students

with intellectual disability and orthopedic impairment and one student participant (n = 1)

with a learning disability and orthopedic impairment (Childre & Chambers, 2005). The

participant identified with a learning disability did not meet the inclusion criteria for this

review, so these data were excluded from my findings. In addition, the researchers

included the special education teachers (i.e., middle school IEP team facilitators), parents,

and other IEP team members (e.g., related service providers and elementary education

teachers; Childre & Chambers, 2005).

In their findings regarding the purpose of the IEP meeting, Childre and Chambers

(2005) stated that parents viewed the IEP meeting as a place where progress toward goals

and service/placement decisions were merely presented. The researchers emphasized that

parents never reached a level of true collaboration. Additionally, they found that team

discussions regarding IEP team decisions were doled out as information exchange or

reports rather than conversations (Childre & Chambers, 2005). The authors affirmed that

when parents were asked to define the purpose of their children's IEP team meetings, the

families talked mostly about having a meeting to listen to what school-based team

members had to say.

In addition to identifying how parents perceived the purpose of the IEP meeting,

Childre and Chambers (2005) also examined how parents described their participation in

the IEP meeting. The researchers indicated that most families perceived their

participation in the IEP process as non-collaborative. Despite the procedural requirements

outlined in IDEA that parents and families must be meaningful participants in the IEP

(Drasgow et al., 2001; Yell, 2019), parents in this study identified that their primary role

was to concur with the draft IEP, and the families further stated they often felt the schools

came to the table with a predetermined agenda and the expectation that parents were there

to sign the document (Childre & Chambers, 2005).

Early Experiences in the IEP Process

In considering parent roles in the decision-making process within the IEP, Stoner

et al. (2005) conducted a qualitative case study that examined the early experiences of

parents of children with ASD (n = 4) enrolled in public preschools or primary schools

and described the parents' perceptions of their interactions with schools. The families

participated in three semi-structured, individual interviews over the course of this study.

In interviewing the families, Stoner et al. (2005) examined what parents identified as facilitators or barriers to their interactions with school professionals and how these parents described their experiences. In this study, I focused on their findings related to their second research question, as this inquiry investigated how parents of children with ASD reported on their early experiences within the IEP process.

Stoner et al. (2005) found that parents described early involvement in the IEP process as both perplexing and distressing. They noted that as parents transitioned away from early intervention supports that were heavily focused on the family, these participants struggled as the IEP no longer incorporated concerns from the home. According to the authors, this shift of focus caused confusion, frustration, and concern among participants, and they further stated that these initial experiences had a negative impact on parental perceptions of the special education process.

Additionally, Stoner et al. (2005) identified professional practices within IEP processes (e.g., time constraints, formal meeting procedures) that impeded a parent's ability to participate fully in initial IEPs. In these first experiences, parents reported difficulty obtaining the needed support for their children, impacting the parents' perception of trust in their educational teams. In entering the IEP meetings, parents discussed that there was a general sense that schools would only provide support when forced. Researchers found that these experiences impacted future IEP meetings, and parents often entered meetings more diligently prepared to engage and be part of the process.

IEP Team Decision-Making: Roles and Identities of Parents as Team Members

Stoner and Angell (2006) conducted a qualitative case study that examined the

roles of parents and their perceptions of the IEP process. Utilizing the same sample of the

aforementioned study, Stoner and Angell investigated the experiences of four families

and their relationships with education professionals. The investigators examined the

parental roles (i.e., negotiator, monitor, supporter, and advocate) that formed over time

and through direct experiences with decision-making in the context of the IEP process,

support and advocacy for teachers, and ensuring the implementation of the IEP. For this

review, I focused on the data regarding the parent roles of *negotiator* and *monitor* (i.e.,

formal monitoring), as these roles were linked to parental engagement in the educational

decisions made during the IEP.

Stoner and Angell (2006) found that parents evolved into negotiators (i.e.,

individuals who facilitated desired outcomes through discussion and compromise) due to

their direct experiences as members of the IEP. The researchers emphasized that this role

was borne out of the belief that parents were required to negotiate in order to ensure a

free and appropriate public education (FAPE) for their children. Additionally, the

researchers clarified that as parents became more involved in this role within the IEP,

they prepped for team meetings, developed rationales to support their advocacy, and,

when needed, sought outside advocacy to achieve their goals within the IEP. In addition

to negotiating, parents also engaged in monitoring roles (Stoner & Angell, 2006). The

authors noted that formal monitoring (e.g., IEP meetings) aided parents in contributing to

goals, reviewing progress, and engaging as negotiators.

Similar to Stoner and Angell (2006), Miller et al. (2019) investigated the different

identities parents assumed when participating in educational decision-making regarding

their children's support and services (e.g., inclusive education and related services) during

IEP meetings. The authors maintained that the different identity characteristics that

parents assumed aided them in facilitating a more equitable partnership between

themselves and school professionals. This qualitative study aimed to consider the

different identities parents assumed and how a parent specifically utilized these roles to

facilitate collaborative decisions in developing their child's IEP.

This investigation recruited families through snowball sampling, and participants

(n = 17) included both biological and one foster parent (Miller et al., 2019). The families

had children ranging from six to twenty years of age, and all children received special

education support as students with intellectual disability or autism (Miller et al., 2019).

Data collection involved interviews and focus groups that occurred both in person

and over the telephone (Miller et al., 2019). Interviews or focus groups lasted

approximately two hours. The decision to engage in individual interviews or focus groups

was based on a respondent's availability (i.e., 14 parents engaged in focus groups, three

individual interviews; Miller et al., 2019).

Miller et al. (2019) focused the investigation on the different identities parents

engaged in while partnering with schools. They found that parents desired an active role

in the development of their child's IEP. Therefore, parents engaged in one or more

identified roles, including the *victim* (i.e., trauma caused by a lack of collaboration or

partnership from the school), *advocate* (i.e., battle for support and services for self or

others), *perseverer* (i.e., hope, resilience), *educator* (i.e., parent as a teacher of the child,

family, and school), *broker/negotiator* (i.e., facilitating partnership to increase success for

future needs), *surrenderer* (i.e., accepting others decisions), and *overlapping* (e.g.,

assuming multiple roles) when engaging with school professionals during IEP planning

and meetings (Miller et al., 2019). In my review of this study, I focused on how these

identities impacted the decision-making process for parents as IEP team members.

Miller et al. (2019) discussed that parents with the identity of victim often felt that

school professionals excluded them from decision-making. The investigators stated that

this victim identity evolved when the parent or caregiver focused on distressing or

overwhelming experiences. For example, parents stated that school professionals engaged

in pre-IEP meetings, and educational decisions were made outside of the formal IEP

(Miller et al., 2019). When this occurred, parents felt discounted and found the IEP

process intimidating (Miller et al., 2019).

In addition to the role of victim, Miller et al. (2019) noted that parents often

assumed the identities of negotiators and advocates in the IEP. Negotiators engaged in

brokering with the teachers (e.g., participation in class fundraisers) to obtain school

support for their children (e.g., related services; Miller et al., 2019). In addition to

negotiators, families assumed the role of advocates battling for inclusive support and

related services during the IEP meeting (Miller et al., 2019). This advocacy role over

time resulted in families developing *advocacy fatigue*; however, the families stated that

fighting for support was necessary when seeking equitable educational opportunities for

their children within the context of the IEP meeting (Miller et al., 2019).

Again, families utilized different identities that supported them when in conflict;

however, parents also developed identities related to more positive experiences (Miller et

al., 2019). One such identity was a perseverer (Miller et al., 2019). Miller et al. (2019)

noted that when parents assumed this identity, they found resilience in decision-making.

The authors found that families who experienced advocacy within the IEP process gained

important skills and knowledge that further supported them during decision-making in the meeting. This study highlighted that parents sought to develop many strategies to build effective family-school partnerships to foster reciprocal and intentional decision-making (Miller et al., 2019).

IEP Team Decision-Making: Roles and Identities of Fathers as Team Members. While mothers were frequently presented as IEP team participants in the majority of the research focused on parent experience, Mueller and Buckley (2014a) found a paucity of research investigating how fathers negotiate the IEP team meeting and the decision-making process within the special education landscape. To extend the current body of research on parental experience, the researchers conducted an exploratory qualitative study that investigated how fathers experience special education, the IEP process, and decision-making.

Mueller and Buckley (2014a) conducted interviews with 20 fathers identified as active team members with various levels of experience (i.e., one through 24 years). The researchers used open-ended interviews to collect data, and the individual interviews lasted between 45 and 60 minutes. In considering this study, I focused on findings that described how fathers accessed the IEP process, decision-making, and how they described their roles as IEP team members.

Similar to the parent participants in the previously mentioned studies, Mueller and Buckley (2014a) found that fathers sought to participate as active members of the IEP team, and they described their roles in the IEP process as *partners*, *advocates*, and *students*. However, despite their desire to engage, the fathers also experienced a disconnection from the IEP team (i.e., did not fit in; Mueller & Buckley, 2014a). The

fathers in this study stated that they felt overwhelmed by the team process (Mueller &

Buckley, 2014a).

Mueller and Buckley (2014a) found that within the role of partners, fathers stated

that they teamed with their spouse (i.e., the child's mother) and education professionals.

Additionally, fathers reported that within the context of the IEP meeting, they worked in

tandem with their wives to communicate their dreams and hopes for the future regarding

their child (Mueller & Buckley, 2014a). The authors noted that the participants

emphasized that having both parents present during IEP meetings allowed for a shared

responsibility to advocate and support each other in obtaining educational decisions that

reflected their child's needs from their perspective. Further, as a partner, the fathers

discussed their desire to problem-solve and collaborate with school professionals during

IEP meetings (Mueller & Buckley, 2014a). The researchers also found that fathers

described collaboration as more effective when engaging with teachers they described as

good (i.e., listened to and included families in the decision-making process during the

IEP team meeting; Mueller & Buckley, 2014a).

In addition to a partnering role, Mueller and Buckley (2014a) stated that fathers

felt responsible for advocating for their children's needs as members of the IEP team. In

this advocacy capacity, the authors identified that fathers assumed the role of protector.

In these experiences, educators often presented barriers or were resistant to the efforts of

the parent, which researchers noted had a negative emotional impact on the families.

Despite these struggles, researchers found that while fathers advocated strongly for the

needs of their children, dads tended to acknowledge the constraints of the school system

and remain engaged in negotiations to reach compromise (i.e., giving up some requests to

foster teamwork and collaboration).

Finally, Mueller and Buckley (2014a) found that fathers additionally assumed the role of a student within the IEP process. Despite their levels of education, the authors stated that fathers in this study found the IEP process overwhelming. Additionally, the fathers indicated that the school districts failed to provide accessible information regarding the legal rights of the families concerning decision-making and the IEP (Mueller & Buckley, 2014a). They discovered that the fathers in this study sought resources (e.g., online instruction, conferences, Dad's only group) to enhance their knowledge regarding special education (e.g., process, parent and student rights) to adequately support their child as a member of the IEP team.

IEP Team Decision-Making: Parent Experiences as IEP Team Members

Tucker and Schwartz (2013) conducted a mixed-method study investigating (a) how the parents of students with ASD perceived IEP team collaboration, (b) how attempts to work together with school professionals colored the parents' understanding of themselves as members of the IEP team, and (c) what parents identified as barriers or facilitators to collaboration within the IEP process. In this investigation, the researchers utilized an internet survey to impact a larger geographic region and expand participant diversity. Parents were the focus of this study, and a total of 135 surveys qualified for analysis (Tucker & Schwartz, 2013). While the researchers collected both qualitative and quantitative data, the published study examined the quantitative findings. For this review, I examined the data considering parent descriptions of IEP team member participation, and I examined both the barriers and facilitators described during team decision-making.

Overall, this study found that parents desired involvement and equity in the IEP

process, and the parents surveyed reported high levels of involvement (i.e., 71%) in the development of the IEP (Tucker & Schwartz, 2013). However, despite seeing themselves as highly involved, parents also described barriers that impacted collaboration and involvement in decision-making (Tucker & Schwartz, 2013). The results from this study are detailed below.

Parents stated that breakdowns in communication and fundamental disagreements regarding support, services, and where a student would be educated (i.e., placement decisions) impeded a parent's ability to feel valued as a contributor during the IEP (Tucker & Schwartz, 2013). Of the families surveyed, Tucker and Schwartz (2013) stated that 66% of participants were able to recall times that they felt excluded from collaboration and the planning of their child's IEP. When asked what resulted in these feelings of exclusion, parents described that their contributions, positions, or viewpoints were not incorporated into the IEP, the IEP was drafted without parental input, or a valued outsider's opinion was not considered during the IEP meeting (Tucker & Schwartz, 2013). These barriers to parent participation as an IEP team member generated conflict that interfered with meaningful collaboration in the IEP process, and investigators found that the majority (i.e., 83%) of families in this study experienced some form of conflict in their role as IEP team members.

Similar to the previous study, Fish (2006) utilized a qualitative research design (i.e., case study) to examine how parents of students with ASD perceived or described IEP team meetings, conducting semi-structured interviews with individual parents. Further, the researcher looked at how families perceived being valued by school professionals within this process. Participants in this study were parents of children with

autism who attended primary or secondary public schools (Fish, 2006). All families were

associated with a parental support group, and all parents had experience attending their

child's IEP team meeting (Fish, 2006).

Data collection consisted of semi-structured interviews that were recorded and

transcribed verbatim (Fish, 2006). The purposes of the study were to (1) investigate how

parents perceived or described IEP team meetings and (2) how parents identified as being

valued or not valued as members of the IEP team (Fish, 2006).

Similar to the results found in Tucker and Schwartz (2013), Fish (2006) identified

that parents often had fundamental disagreements in the decision-making process during

the IEP, and the participants often felt that they were not treated as equal team members

in meetings. For example, the author stated that most of the participants had experienced

conflict with school professionals when decisions were made during the IEP. Researchers

stated that the conflict existed between what the families felt would have positively

impacted their child's education and the school's disregard for parental input. The author

highlighted that families reported experiencing negative treatment during IEP meetings

when attempting to engage in decision-making.

Despite these negative experiences, Fish (2006) found that parents sought an

active role in the IEP process, wanted to be on a level playing field with other IEP team

members, and wanted to contribute to decision-making. Additionally, they stated that the

parents in this study did not perceive the school-to-parent relationship as equitable.

Further, the author maintained that participants discussed that the IEP appeared to be no

more than a formal paper process.

Bacon and Causton-Theoharis (2013) conducted a qualitative study that utilized

interviews to investigate how parents engaged (i.e., perceived facilitators) or were

excluded (i.e., perceived barriers) as partners and advocates in the IEP process. This

study recruited parents (n = 17) through a parent advocacy group that families had

utilized as support to petition for more inclusive educational opportunities for their

children (Bacon & Causton-Theoharis, 2013). The results from this study are described in

detail below.

Bacon and Causton-Theoharis (2013) stated that participants in this study had

children with more complex support needs (e.g., students with low-incidence disabilities)

who often did not attend the majority of observed IEPs. The researchers discussed that

the lack of student participation suggested a potential negative trend for student

involvement in planning their education programs. For this investigation, data collection

involved individual open-ended interviews (i.e., 90-120 minutes in length), observations

(i.e., IEP meetings), and artifact/document reviews (i.e., IEP documents, evaluation

reports, work samples, and parent testimonials).

Similar to the previous findings, Bacon and Causton-Theoharis (2013) found that

parents experienced inequity in the decision-making process in IEP meetings. The

families in this study specifically advocated for inclusive educational supports and related

services for their children during IEP meetings. Despite engaging in discourse (e.g.,

reciting parts of the law on the least restrictive environment [LRE] to the IEP team)

during IEP meetings, the families in this study maintained that they often did not have

success in translating their desire for LRE and related services into tangible support or

student placement (Bacon & Causton-Theoharis, 2013).

In the process of advocating for support during IEP team meetings, Bacon and

Causton-Theoharis (2013) identified a variety of professional practices (e.g., medical discourse focused on deficits, the use of professional jargon in meetings/documents, school policies, and bureaucratic structures) that impeded the families' ability to engage as equals in the educational decisions that occurred during the IEP meeting. In considering this desire for engagement and involvement in the development of the IEP, researchers found that parents named several specific meeting practices (e.g., use of electronic IEP writing programs, scheduling meetings with limited time) that created barriers for families trying to engage collaboratively in the development of the IEP for their children (Bacon & Causton-Theoharis, 2013).

In opposition to the barriers experienced by parents as decision-makers in the IEP, Bacon and Causton-Theoharis (2013) discovered that parent advocacy (e.g., personal, professional advocacy, and networking) and family self-education (e.g., parent and student rights, education discourse) facilitated parental involvement in the decision-making process during the IEP meeting. The authors further emphasized that parent advocacy (e.g., becoming an advocate, bringing an advocate, networking with other families) and education (e.g., self-education of legislative rights) were effective supports in countering the dominance of school systems in advocating for inclusive supports for their children. They also stated that advocacy alone often did not effectively counter a school's position of power and legitimacy in the special education process. In addition, the authors emphasized that the parents in this study had to fully immerse themselves in "the dominant discourse of the school" (p. 695) in order to advocate effectively for the development of their child's education program.

IEP Team Decision-Making: Fathers' Experiences as IEP Team Members.

Mueller and Buckley (2014b) conducted a qualitative study utilizing open-ended

interviews that further examined the unique experiences of fathers (n = 20) as IEP team

members. For this study, interviews occurred over the telephone, and the authors noted

that the open-ended interviews lasted from 19 to 70 minutes. Due to the nature of their

protocol, interviews were conducted as conversations designed to find out how fathers

experienced the IEP process when working to support their children (Mueller & Buckley,

2014b).

In this study, Mueller and Buckley (2014b) found themes surrounding the fathers'

participation across the many different aspects of the special education system (e.g., IEP,

collaboration with educators, communication, and relationship building). In this review, I

focused on themes and data that examined how fathers participated in the decision-

making process within the context of the IEP meeting.

First, Muller and Buckley (2014b) found that fathers described the IEP meeting as

overwhelming (e.g., confusing, uncomfortable, painful), and the participants noted that

their level of access and participation in the IEP meeting was often disconnected (e.g.,

school meeting procedures) from what they felt was legally supported as a parental right.

The participants identified that using educational jargon and meeting protocols (e.g.,

time/pace for meeting) impeded their ability to engage as members of the IEP team

(Mueller & Buckley, 2014b). In addition, the authors found that participants referred to

the IEP meeting as a process that was often insufficient, and they felt that the IEP

generally failed to capture and document parent concerns regarding supports and

services. Further, the participants referred to the IEP meeting as an arbitrary paper

process (e.g., paperwork for the sake of paperwork) that resulted in IEP meetings that

were not accessible to families or person-centered for their child (Mueller & Buckley, 2014b).

Mueller and Buckley (2014b) discovered that fathers identified the IEP team meeting as the place where they had the most involvement with school professionals. The authors further noted that the success or failure of collaboration within these meetings was linked to the relationships established between families and educators. Three main ideas were identified regarding how fathers collaborated with educators during IEP meetings (Mueller & Buckley, 2014b). According to the authors, fathers identified a need to build strong relationships by establishing open and honest communication. While many participants identified communication as a critical component of collaboration in the IEP, they maintained that it was not always easy to be heard during IEP meetings (Mueller & Buckley, 2014b).

As noted in the previous studies, the fathers' emphasized that they experienced conflict when trying to partner in educational decision-making (Mueller & Buckley, 2014b). Within their role in the decision-making process, fathers experienced inequity when conflict or disagreement occurred between what parents wanted and what schools were willing to provide (Mueller & Buckley, 2014b). This power imbalance resulted in fathers stating that they had to battle to be heard, and they further referred to educators and schools as the gatekeepers of support and services (Mueller & Buckley, 2014b).

IEP Team Decision-Making: The Experiences of Culturally and Linguistically Diverse Parents as IEP Team Members. Lusa (2008) conducted a 2-year, longitudinal qualitative investigation that explored Chinese families' level of participation in IEP meetings. During the 2-year investigation, Lusa observed 15 IEP

team meetings, recorded details of the meetings using field notes, and interviewed families directly following each IEP meeting attended. The researcher stated that all interviews occurred in the family's primary home language (i.e., Cantonese).

Lusa (2008) recruited five participant families through collaboration with a non-profit community organization; these included: Parent (1) a father with three children who were identified with disabilities (i.e., daughter with Rett syndrome, two sons with autism, Parent (2) a mother with a 7-year-old daughter diagnosed with cerebral palsy, Parent (3) a mother with an 18-year-old daughter diagnosed with cerebral palsy, Parent (4) a mother with a son diagnosed with severe Hunter syndrome, and Parent (5) a mother with a son and daughter both diagnosed with autism. The second and third parents identified in the study did not meet the inclusion criteria for my review of literature; therefore, specific data from these parents were excluded from my findings. For the review, I considered data regarding how Chinese families described their experiences as IEP meeting participants.

In considering these families' participation in the IEP meeting, Lusa (2008) found that their ability to engage as equal partners in the IEP process was negatively impacted by language barriers, parental input seen as not valued, and families feeling disrespected in formal meetings by school professionals. Further, Lusa found that these barriers to participation and collaboration colored how these families viewed the purpose of the IEP meeting. I review the findings in detail below.

First, Lusa (2008) reported that language barriers (e.g., not using an interpreter, inappropriate/untrained staff working with interpreters) impacted the families in this study, limiting their ability to participate fully in meetings. For example, Parent 1 opted

not to use an interpreter due to his proficiency in English; however, Lusa explained that

despite this father's aptitude in English, the parent struggled with the educational jargon

used in many of the formal evaluations, impacting his ability to participate in decision-

making and advocate for his son. For the remaining families (i.e., Parent 4 and Parent 5),

while interpreters were present at all meetings, staff did not engage in discourse in a way

that allowed information to be appropriately explained (Lusa, 2008). The author noted

that staff often presented information in large chunks, making accurate interpretation

impossible. This resulted in interpreters summarizing information for families rather than

verbatim interpretation (Lusa, 2008). Lusa emphasized that these failures to correctly

interpret evaluation data potentially resulted in a loss of valuable information regarding a

child's educational program, impacting the families' ability to engage in collaborative

decision-making.

　　　　In observing how families participated in the IEP meeting, Lusa (2008)

emphasized that while Parent 1 brought an outline of discussion points to the IEP team

meetings, the other families in this study expressed that they were often not informed as

to the purpose of the meeting (e.g., did not know it was an annual IEP). Since families

were unsure as to the purpose of the meeting, Lusa maintained that they could not prepare

adequately, which may have impacted their ability to participate. Further, the researcher

discovered that Chinese families engaged minimally in collaborative discussions (e.g.,

limited initiation of conversation or did not engage in questioning) with school-based IEP

team members during observed meetings. Due to these factors, the author reported that

Chinese families considered the IEP a meeting designed for school professionals, and the

function of the meeting was to report information to families.

In addition to limited input, Lusa (2008) also reported that families in this study often felt disrespected and not valued. For example, in most observed IEP meetings where families requested services, the IEP teams declined to add support to the student's IEP. In one documented case, Parent 4 requested a one-on-one paraprofessional for medical and safety concerns to be added to her son's IEP. The author stated that the school refused services due to a lack of resources and dismissed the mother as overly protective. Due to the many barriers experienced by these families, the researcher concluded that the families felt that schools did not see them as equal contributors in the decision-making process in the development of their child's IEP.

Sheehey (2006) investigated how parents (n = 3) perceived the formal setting of the IEP meeting. For this qualitative case study, participants were selected based on whether they had a child supported by special education services, identified as Hawaiian or part-Hawaiian, and lived in Hawaii. The study included three participants who had supported their children in the recent past or were currently supporting their children in a public-school setting.

Data were collected through informal interviews. Sheehey (2006) stated a preference for this method as it closely resembled the Hawaiian cultural practice of oral history. In addition to interviews, Sheehey reviewed IEPs, requests for re-evaluation, and other artifacts (e.g., person-centered planning, charts, and action plans). For one participant, Kona, the family did not have school records, and therefore, the investigator included an additional interview with a former educator who had remained in contact with the family.

Sheehey (2006) disclosed that because he was not of Hawaiian descent, data were

analyzed with the support of a respondent (i.e., participant-researcher) to help eliminate

any bias. Themes were developed by participants, and three primary findings were

discussed.

  First, Sheehey (2006) found that the legal definition of involvement in the

decision-making process was different from how parents expressed engagement. For

example, one of the participants who worked at her child's school felt that her presence

on the campus was a form of involvement in the decision-making process (Sheehey,

2006). This parent noted that her regular involvement allowed her to shape and

implement interventions, which resulted in her ability to contribute to goal setting as a

member of the educational team. Overall, the author noted that parents did not see

involvement in educational decisions as contributions made during one annual meeting,

but rather, they saw the incremental daily exchanges of information as the path to their

involvement in educational decision-making for their children. Further, these parents did

not feel that a formal IEP meeting was the context for decision-making discussions or

conflict (Sheehey, 2006).

  Second, according to Sheehey (2006), parents discussed that education and

advocacy, as facilitators, were linked to parents' ability to be involved equitably in the

decision-making process. Parents in this study referenced the need to fully understand

their rights in order to be advocates for their children (Sheehey, 2006). According to the

author, participants emphasized that as they gained knowledge regarding the unique

education process, they were better equipped to advocate for what their children required

to be successful.

  Lastly, Sheehey (2006) found that parents expressed discomfort when trying to

advocate in the face of a completed draft IEP. The author stated that parents were often

disinclined to share their thoughts or ideas in moments when the IEP was complete.

However, it was important for Sheehey to note that despite their reluctance to advocate in

these situations, parents did not accept that school professionals would be the sole or

primary decision-makers for their children. Instead, these families made more informal

contact with teachers, reviewed documents offsite, or drafted their thoughts prior to

meetings to ensure their voices were heard. Similar to the above research, this study also

highlighted the active role that parents wish to hold in the development of their children's

IEP.

Perceptions and Experiences of Student Participation in the IEP Process

In this section, I reviewed two studies that examined student perceptions of their

level of engagement and participation in educational decisions made at their IEP

meetings. Additionally, both studies investigated student self-determination skills. Each

study is discussed in more detail below.

IEP Team Decision-Making: Student Experiences as IEP Team Members

Agran and Hughes (2008) conducted a quantitative study to pilot a new

investigative tool (i.e., an interview survey) that sought to provide insight from students

with disabilities regarding their perceptions of participation in the IEP process.

Additionally, the researchers wanted to learn about the educational opportunities

presented to students with complex or extensive support needs to learn about and practice

self-determination skills. The participants in this study were separated by two sample

populations (i.e., high school and junior high, Agran & Hughes, 2008). The high school

students (n = 17) were identified as students with moderate to extensive support needs

who had a diagnosis of intellectual disability. The junior high students (n=56) included a diverse population of individuals identified with disabilities that bridged across the various eligibility categories supported under IDEA (e.g., learning disability, speech/language impairment, emotional disturbance; Agran & Hughes, 2008). The junior high participants contained a majority (i.e., 62%) of students who did not meet inclusion criteria, and therefore, I excluded these data from my findings. The researchers stated that the high school participants attended an urban high school in a high-poverty area and spent more than 80% of their day outside of the general education classroom.

This study utilized a survey instrument that included 19 forced-choice questions, which a graduate student administered using a script to participants (Agran & Hughes, 2008). Agran and Hughes (2008) affirmed that this pilot investigation was the first study to seek direct student input for individuals identified with moderate to extensive support needs on their level of instruction and understanding regarding the IEP process. The authors emphasized that the majority of research on student perception has been obtained through surveys of parents, teachers, or caregivers.

Of the high school students sampled (n = 17), 13 students were not able to demonstrate knowledge of the IEP, and only slightly more than half of the sample (i.e., 53%) stated that they had ever attended an IEP meeting (Agran & Hughes, 2008). Agran and Hughes (2008) found that 80% of students had never been instructed on how to run an IEP, and further, 80% of the students had never read their own document. Additionally, the majority (i.e., 67%) were not aware of their IEP goals. Based on this investigation, the authors maintained that the students sampled were not positioned to take an active role in the development of their IEP.

In an exploratory study, Hughes et al. (2013), investigated the association between students identified with moderate to extensive support needs (n = 47) "levels of participation in inclusive school and community activities, and [their] reported self-determination skills" (p. 5). Additionally, the researchers intended to investigate these phenomena in schools from lower socioeconomic areas, as well as middle-income education institutions, and the researchers compared the impact of self-determination on students' level of participation in the development of their IEP across settings. Students in this study were given a survey that consisted of 18, forced-choice items (Hughes et al., 2013). The students were also asked to provide an example, and they answered open-ended questions regarding their involvement in the IEP process, self-determination behaviors, and post-school goals (Hughes et al., 2013). The interviews were administered by a graduate student in a quiet area in the participant's classroom (Hughes et al., 2013). In my review, I examined the evidence obtained from student interviews regarding their perceptions of access and participation as an IEP team member.

Hughes et al. (2013) found no significant differences in the level of student participation in the IEP regardless of location (i.e., economically challenged versus middle income), and further, they discovered that students at all the high schools reported infrequent attendance at their IEP meetings. Additionally, researchers found that less than half of the students surveyed could define or describe what the IEP represented, and when students were questioned about IEP participation (i.e., what do you do at the IEP?), students' responses included: "I sit in them."; "They talk about my reading skills, math skills, and what I will do after graduation " (Hughes et al., 2013, p. 8). The authors emphasized that even when students attended the IEP meeting, they did not actively

engage in collaboration, self-advocacy, or educational decision-making. In addition to this evidence, few students (n = 5) reported leading their IEPs, and the majority of participants stated that they had never read the contents of their education plan (Hughes et al., 2013).

Discussion

This review examined research investigating IEP team members' perceptions of decision-making and experiences participating in the IEP team meeting. While my research is focused on IEP teams supporting students with ESN, due to a paucity of research, I expanded this review to include teams working with individuals with ESN, ID, ASD, Down syndrome, MD, and deaf-blindness. My findings discovered three main concepts that explained the experiences of IEP team members: (1) the conflicts experienced by parents, students, and teams in the development of and participation in the IEP team meeting, (2) the perception of IEP team participants regarding current decision-making processes during the IEP, (3) the barriers or facilitators that impact effective collaboration in the IEP.

Conflict is defined as a long-lasting disagreement, incompatibility, or incongruity with an idea, belief, interest, or finding (Merriam-Webster, n.d.). In this review, as IEP team participants engaged in and experienced conflict, their feelings of value as contributing members diminished. Additionally, these divisive meetings often resulted in teams' inability to connect with each other (Giangreco, 1990).

Conflict was found in studies that considered both parent and IEP team views; however, there were differences in the way that conflict was presented and discussed. For example, Ruppar and Gaffney (2011) noted that when school-based team members talked

about differences or conflicts, they described situations where they held an opposing

thought to a colleague's recommendation. In these moments, school team members

elected to remain silent. In contrast, when parents discussed conflict in the IEP, they

often felt silenced (e.g., Bacon & Causton-Theoharis, 2013; Fish, 2006; Lusa, 2008). In

these cases, families maintained that conflict often resulted from parent requests or

recommendations for services or supports during the IEP team meeting (e.g., Bacon &

Causton-Theoharis, 2013; Fish, 2006; Lusa, 2008). Both the reluctance to speak up (e.g.,

school-based team members) and to be silenced (e.g., parents) significantly impacted

decision-making (Fish, 2006; Lusa, 2008; Ruppar & Gaffney, 2011).

  The second concept from this review involved the IEP team's experiences and

expectations regarding decision-making during the IEP team meeting. Despite the legal

guidance that IEP teams should endeavor to collaborate until consensus can be reached

among all team members when making decisions (64 Fed. Reg. 12473; 64 Fed. Reg.

12474), this review found that current IEP practices (1) did not result in collaborative,

consensus-like decision-making and (2) resulted in inequitable experiences for the

parents (Bacon & Causton-Theoharis, 2013; Childre & Chambers, 2005; Fish, 2006;

Hughes et al., 2013; Mueller & Buckley, 2014a; Mueller & Buckley, 2014b; Lusa, 2008;

Miller et al., 2019; Sheehey, 2006; Stoner et al., 2005; Stoner & Angell, 2006; Tucker &

Schwartz, 2013). In considering these inequitable structures and aligning with the

findings in the area of conflict, parents discussed feeling excluded and, at times,

profoundly discouraged from providing input on the many critical decisions (e.g.,

placement, supplementary aids and services (SAS), or the provision of related services)

made during the IEP meetings (Bacon & Causton-Theoharis, 2013; Fish, 2006). Further,

similar to the experiences of parents, students also stated that their participation in the decision-making process as an IEP team member was severely limited, identifying their roles on the team as passive (e.g., listener; Agran & Hughes, 2008; Hughes et al., 2013; Thoma et al., 2001).

The final concept discussed in the research identified barriers and facilitators to equitable access for IEP team members and focused on the views of parents. These facilitators and/or barriers impacted IEP team participants and parent's ability to fully engage in the decision-making process (Bacon & Causton-Theoharis, 2013; Childre & Chambers, 2005; Fish, 2006; Lusa, 2008; Mueller & Buckley, 2014a; Mueller & Buckley, 2014b; Sheehey, 2006; Stoner et al., 2005; Stoner & Angell, 2006; Tucker & Schwartz, 2013).

The barriers identified in this review included (1) language (e.g., failing to present information in a family's home language, educational jargon) and (2) current, formal meeting practices (e.g., scheduling meetings, the use of IEP as an agenda, interpretation of policy and the law, and drafting the IEP ahead of the meeting). Two concepts were identified as impacting factors in the studies that discussed language barriers. First, parents discussed the impact of educational jargon, and participants stated that the use of jargon during IEP meetings resulted in the exclusion and isolation of families (Bacon & Causton-Theoharis, 2013; Lusa, 2008; Mueller & Buckley, 2014a; Mueller & Buckley, 2014b). Jargon was an impacting factor for families from the dominant culture and culturally or linguistically diverse parents (Lusa, 2008). In addition to jargon, families whose first language was not English identified that barriers to collaborative input revolved around illegal or inappropriate practices (e.g., missing interpreter, interpreter not

trained; Lusa, 2008). Lusa (2008) noted that IEP team members did not present data in the IEP effectively (i.e., pausing for interpreters to share information periodically with the family), resulting in interpreters being forced to summarize data. It was noted that this practice could lead to the loss of valuable information.

The facilitators identified in this review included (1) advocacy, (2) education, (3) communication, and (4) networking (Bacon & Causton-Theoharis, 2013; Miller et al., 2019; Mueller & Buckley, 2014a; Muller & Buckley, 2014b; Stoner & Angell, 2006). Parents identified that when they brought an advocate with them to the IEP meeting, the team was more receptive to the ideas, thoughts, and desires they presented (Bacon & Causton-Theoharis, 2013; Miller et al., 2019; Mueller & Buckley, 2014a; Muller & Buckley, 2014b; Stoner & Angell, 2006). In addition to advocacy, parents reflected that education (e.g., self-directed instruction on legal rights) positively impacted parental access to the decision-making process. In both cases, teams stated that they were treated differently (e.g., positive access; Bacon & Causton-Theoharis, 2013; Mueller & Buckley, 2014a; Muller & Buckley, 2014b). Finally, parents stated that communication (e.g., frequent, honest, open) with professionals and networking with other parents increased families' knowledge, confidence, and understanding of their rights to ensure more equitable access to the decision-making process.

Conclusion

This literature review focused on the experiences and perceptions of IEP team members and their lived experiences as they navigated the IEP process. The IEP remains a central tenet that drives the education and instruction of students with disabilities (Bateman, 2017). Within the culture of an IEP, the team may guide or dictate who is in

charge, who holds influence, who is able to communicate, and who has the power to make decisions (Fish, 2006; Ruppar & Gaffney, 2006). In considering these findings, factors that negatively affect the IEP team's ability to successfully engage in the IEP process may have far-reaching consequences as IEP teams approach the meeting, especially if there are differing expectations (e.g., roles, criteria, or decision-making authority; Giangreco, 1990) If a collaborative process cannot be established, IEP teams may find themselves working in opposition to the expectations of IDEA, creating an IEP that would not meet a child's educational needs and fail to provide FAPE (Giangreco, 1990). Due to the significance of this process and the existing paucity of research, my study examined how individual IEP team members perceive their roles in the decision-making process when creating an IEP for students with ESN. In the following chapter, I discuss the method used to conduct this qualitative research study.

Chapter 3

In order to provide student access a free and appropriate public education (FAPE), at a minimum, the individualized education program (IEP) team supporting students with disabilities is required to (a) meet annually, (b) utilize data to make educational decisions, and (c) work collaboratively as a team (e.g., school, family, and student when appropriate) to develop an individualized program that considers the unique educational needs of each student identified with a disability under Individuals with Disabilities Education Act (IDEA; e.g., Yell, 2019). A brief review of the research literature in Chapter 1 revealed that a disconnect exists between policy (e.g., predetermination, decisions based on existing programs rather than student needs; Morningstar et al., 2017) and practice (e.g., parent input not always included; Fish, 2006) when teams worked together to develop the IEP. Additionally, research has emphasized that these disconnects between the intention of IDEA and its implementation may often lead professionals and parents to view the IEP process as a mere paperwork exercise with little actual impact on improving outcomes for students with disabilities (e.g., Brock, 2018; Fish, 2006; Ryndak et al., 2014; Smith, 1990).

In Chapter Two, the literature review found a paucity of research investigating IEP teams supporting a student with extensive support needs (ESN). Researchers in these studies (e.g., Ruppar & Gaffney, 2011) found that the voices of school-based IEP team members (e.g., speech language pathologist [SLP], occupational therapist [OT]) are significantly underrepresented in current scholarship in this area. Further, the existing research noted that examining IEP team members' perceptions of their roles within this intricate phenomenon may provide vital information about team cohesion and

collaboration, involvement of parents and students, and procedural and substantive

concerns that may affect the IEP process and the resulting document (Giangreco, 1990;

Ruppar & Gaffney, 2011; Smith, 1990). Therefore, ongoing research, with its potential to

shed light on the intricacies of the IEP process, may be necessary in order to better

understand how the individual members of IEP teams perceive their and others' roles and

responsibilities in the decision-making process (Giangreco, 1990; Ruppar & Gaffney,

2011). Additionally, continued investigation may yield important findings to support

current practices and enable practitioners to move away from the current culture of

minimal compliance, which, according to Smith (1990), has been in place for too long.

Purpose of the Study

The purpose of this study was to investigate the individual IEP team member's

understanding of their and others' roles and responsibilities regarding the many

educational decisions made to support a student with ESN when creating an IEP.

Research Questions

My study was guided by the following research questions:

- How do IEP team members conceptualize their responsibilities within their IEP

  team role in the decision-making process when developing an IEP for a student

  with ESN?

- How do IEP team members conceptualize their own and others' contributions to

  the decision-making process when developing an IEP for a student with ESN?

Theoretical Framework

In Chapter One, I proposed a sociocultural theoretical framework to guide this

study (Vygotsky, 1934/2012; Wertsch, 1998), and to address my research questions

through this theoretical lens, I was guided by the work of Wertsch (1989, 1998), as well

as Wertsch and Tulviste (1992). Wertsch (1998) emphasized that sociocultural analysis

allowed a researcher to consider that human action is not a separate or independent

construct from the context in which it occurs. Therefore, the author maintained that

intricate social experiences can only be fully understood when the unit of analysis

includes both the individual and the social context. In other words, he maintained that

researchers must seek to examine both human action and the mediational means (e.g.,

tools or signs) that constrain or enable different elements (e.g., acts, situations, purpose)

within the historical, cultural, and institutional context in which they are embedded.

Additionally, in purporting that almost "all human action is mediated action" (Wertsch,

1998, p. 24), the author developed 10 key properties:

1. Mediated action as characterized by an irreducible tension between agent and
   mediational means.

2. Mediational means are material.

3. Mediated action typically has multiple simultaneous goals.

4. Mediated action is situated on one or more developmental paths.

5. Mediational means constrain as well as enable action.

6. New mediational means transform mediated action.

7. The relationship of agents toward mediational means can be characterized in
   terms of mastery.

8. The relationship of agents toward mediational means can be characterized in
   terms of appropriation.

9. Mediational means are often produced for reasons other than to facilitate

mediated action.

10. Mediational means are associated with power and authority.

For my study, I aspired to investigate how individual IEP team members supporting a student with ESN described or perceived their responsibilities and contributions as decision-makers. Through the lens of the 10 properties of mediated action (Wertsch, 1998), I gathered individual stories from one team supporting a student with ESN attending a rural public middle school in the United States. In applying this framework to my study, the individual IEP team members who participated were asked to reflect on several aspects of this complex phenomenon within the context of an upcoming annual IEP team meeting. Additionally, in using this scaffold, participants were asked to reflect upon the purpose of the IEP meeting and to describe experiences or perceptions regarding their association with the school district, their co-workers, the family, and the student they were supporting. Further, individuals from the IEP team were queried about their practices (e.g., preparation, participation in the development of the IEP), learning (e.g., how team members came to understand these practices), and understanding (e.g., perception of what and how decisions are made). In addition to their own practice, school staff and the family were asked to consider how other team members engaged in decision-making when developing the IEP.

In applying these guiding properties to my analysis, I considered the elements as the scaffold or framework that shaped my understanding and interpretation of participant interviews. For example, during my exploration of the data, I considered how IEP team members described the complex and fluid relationships between team members as "*agents*" and the many tools (e.g., language, IEP document, student assessments, meeting

procedures) that guided their decision-making process (Wertsch, 1998). Additionally, I

reflected on how the team members described mediational tools and/or means that

enabled or constrained team recommendations (e.g., district resources, formal/informal

policies or procedures; Wertsch, 1998). Further, I examined how team members

discussed various objectives or goals as well as the team's history for both the

development of the IEP and team meetings, and I examined how these affected team

collaborations and the development of the IEP (Wertsch, 1998). I also considered how

IEP team members described their learning within this process (Wertsch, 1998). In

applying this theoretical lens, I worked to give voice to each participant in order to

develop a comprehensive understanding of how this team conceptualized decision-

making for a student with ESN during an annual team meeting.

Method

Research Design

I selected a qualitative interview study design for my study (Bogdan & Biklen,

2007; Gubrium & Holstein, 2012; Lincoln & Guba, 1985; Platt, 2012; Saldaña, 2011;

Trainor, 2013). Through qualitative interviewing, I sought to gain a *deep understanding*

of IEP team decision-making through the lived experiences related to participant

practices as active members of the IEP team (Johnson & Rowlands, 2012). Johnson and

Rowlands (2012) defined this level of understanding as the researcher's capacity to

capture the authentic perspectives of participants within the context of an event, activity,

or location. Second, the authors stated that this method allowed researchers to move

beyond basic reasoning to seek explanations that revealed ideas that were often obscured

from view. Third, they defined deep understanding as the ability to move through

superficial explanations to examine underlying factors that may influence the

perceptions, assumptions, and behaviors of a participant within the activity or event.

Lastly, the researchers stated that in-depth interviewing allowed an investigator to seek a

deep level of knowledge from multiple perspectives in order to comprehend the larger

phenomenon and the team's practices situated within it.

I sought to gain a deeper understanding of how one IEP team envisioned the

decision-making process when developing an annual IEP for a student with ESN through

individual interviews with each member (Johnson & Rowlands, 2012). In addition, I

endeavored to include how each member perceived their fellow team members' actions,

contributions, and responsibilities (Johnson & Rowlands, 2012). Through the use of in-

depth interviews, I aspired to gain information from participants that moved beyond the

standard responses regarding this process, and in these discussions, I acknowledged that

the information I sought might involve topics that were either sensitive or difficult to

openly talk about (Johnson & Rowlands, 2012). For example, it was possible that IEP

team members might experience dissonance when discussing their assumptions, values,

or personal identity as a school professional or parent within the decision-making

process, and the convergence of these thoughts might have required participants to talk

about concepts that created a state of mental conflict (Johnson & Rowlands, 2012).

Johnson and Rowlands (2012) identified that conducting in-depth interviews was an

established and even preferred method for investigations of this nature.

In this study, I conducted individual interviews surrounding one team's scheduled

annual IEP for a student with ESN. Additionally, I observed the IEP meeting and

obtained meeting paperwork (e.g., draft IEP, BIP) from the team to provide context for

participant responses during interviews. Below, I describe this study in more detail.

Informing Study

Merriam (1998) stated that previous research might be utilized to guide and inform the design of new investigations. The author further stated that existing studies might help justify the necessity of further scholarship on important issues in the field. For my study, I was guided by Ruppar and Gaffney (2011).

First, the Ruppar and Gaffney (2011) considered the perspectives of a variety of IEP team members (e.g., special education teacher, related service professionals, administration, school psychologist, parents) supporting a student with ESN during a transition IEP meeting (i.e., preschool to kindergarten). Additionally, the researchers identified two main areas of focus: (a) to consider how conversations (i.e., discourse within the IEP meeting) impacted educational decisions and (b) to explore different team members' perceptions of the decision-making process and the final outcomes established in the IEP. It was the author's secondary research aim that provided the inspiration for my study.

Ruppar and Gaffney (2011) used observation, field notes, and interviews for their instrumental case study design. The authors found that the IEP team members struggled to engage in the process of collaborative discussions and decision-making (i.e., held silent, opposing opinions) while in the IEP team meeting. Further, they stated that the IEP team's informal communication (i.e., communication that occurred outside of the IEP team meeting) resulted in the school-based team presenting a completed draft IEP in the meeting which significantly impacted participation in the meeting (e.g., creating tension and/or discomfort). Another important finding from this study was the impact of the IEP

document on meeting procedures. The researchers discussed that the IEP was utilized as a meeting agenda for this team which resulted in a turn-taking approach to team interaction during the IEP. They also found that this type of discourse limited collaborative conversation during the student's IEP meeting. Lastly, they emphasized that the team's placement decisions did not involve reflective consideration of the student's current needs or goals but rather resulted from an arbitrary percentage of time (i.e., 30%) that the student would access the regular education classroom stated by the administrator during the IEP meeting.

Ruppar and Gaffney's (2011) study design also served as a model for my study design. They utilized the framework of an instrumental case study. They used multiple sources of data to examine perceptions of IEP team members regarding decision making and the final outcomes of the IEP process (e.g., observation of the IEP meeting, field notes, participant interviews). Their choice of data sources influenced my decisions about data collection methods for my study. I selected the participant interviews as the main source of data to examine how IEP team participants perceived their participation in the IEP team meeting and the decision-making process.

Additionally, Ruppar and Gaffney's (2011) primary research question was consideration of the discourse within an IEP meeting to investigate how conversations in the team meeting impacted decision-making. Their secondary aim, team members' perceptions of decision-making , offered insight and sparked my desire to extend this area of research to another IEP team supporting a student with ESN during an annual IEP. I extended this area of focus in several ways. First, I extended this research by examining individual IEP team members 'conceptualization of the decision-making process. I did

this by exploring how they identified their and others' responsibilities and contributions to the development of an IEP for a student with ESN. Additionally, while Ruppar and Gaffney focused on a transition IEP, I chose to investigate one team preparing for an annual IEP. I selected this because this type of IEP occurs most frequently across a student's academic career. My reasoning behind this choice was that I identified the annual IEP as the most frequent and consistently occurring IEP for students with disabilities and requires the entire team to convene. As I contemplated this, I considered that the annual IEP potentially represented the type of IEP (e.g., initial, annual, transition) where the largest culmination of educational decisions may exist. For these reasons, I sought to recruit one IEP team working on developing an annual IEP for a student with ESN.

Finally, Ruppar and Gaffney's (2011) methods provided insight into my data collection and analysis. For example, like those researchers, I worked to conduct my interviews as close to the IEP team meeting as possible (i.e., seven to 14 days) to ensure that the context of the IEP was fresh in the minds of the participants. Additionally, I examined how Ruppar and Gaffney (2011) analyzed the data they collected (e.g., transcribing interviews and thematic coding) in designing the data analysis methods used in my study, as detailed below.

Context/Setting

Statistical data used to describe the school where I conducted my study were pulled from the National Education Statistics (NCES), the *State* Public Education Department (PED) Report, and/or the *School's* District Special Education Report 2019-2022. Because of the possibility that the data or its sources could inadvertently disclose

the location of the school and the district, I did not reference some information and its

source. I did this to protect the privacy of the IEP team who participated in this study.

Additionally, I did not disclose the region of the United States in which the school is

located due to the unique demographic information of the participating school and

surrounding communities that could lead to inadvertent violation of participants' privacy.

The IEP team that I recruited worked in a public middle/high school in a district

located in a fringe rural area (i.e., < 5 miles from an urbanized area) in the United States.

This school district served approximately 16,000 residents and consisted of five schools

(e.g., elementary and a combination middle and high school [MSHS]) that supported a

large geographic area that was comprised of 12 small communities bound within a

common county. All teachers in the school district were certified (i.e., 100%), and most

(i.e., >90%) averaged 3 or more years of experience. The number of students enrolled in

this district approached 1,500 students, of which approximately 260 (17.3%) were

identified as students supported by special education.

Of the students supported with IEPs within the district, students identified with a

specific learning disability (29.9%) and students with a speech-language impairment

(20.8%) comprised the largest number of students. Students identified with autism

(14.4%), other health impairments (14.4%), and emotional disturbance (10.6%) were the

next largest group of students supported under special education. Students with

intellectual disability (ID) were the smallest group of students (6.4%). The school did not

report having any students in attendance across the district with deaf-blindness, hearing

impairment, visual impairment, multiple disabilities, traumatic brain injury, or orthopedic

impairments. The district reported high graduation rates (> 90%) overall, with an average

of 89.4% of students with disabilities graduating. Additionally, the student body was

identified as White (95.8%), Multiracial (1.5%), Black (0.9%), and Hispanic/Latino

(0.9%). The gender breakdown reported showed an approximately even split between

males (51.75%) and females (48.25%), with males being slightly higher.

Historically, the district had an improvement plan (i.e., 2019-2022) in place to

increase general education access for students with disabilities. For the 2021-2022 school

year (the most recent data available), approximately 65.0% of students identified with

disabilities spent 80% or more of their day in general education, while 12.4% of students

were served inside regular education classrooms less than 40% of the day. The district

met its target for the state performance plan (SPP) of including students 80% or more of

the day in general education settings, but it failed to meet the target of decreasing the

number of students who were educated in general education settings less than 40% of the

school day.

Sampling Method

Merriam (1998) identified many different forms of purposeful sampling: typical

(i.e., representative of the average person), unique (i.e., has the rare attributes linked to

the phenomena of interest), maximum variation (i.e., small sample with diversity),

convenience sampling (i.e., chosen for location, time, money, or availability), snowball

(i.e., chain or networking for participants), and theoretical (i.e., based on research

design). For my study, I used purposeful convenience sampling. I utilized a non-

probability sampling method (i.e., purposeful, Merriam, 1998). Using purposeful

sampling allowed me to invite participants who had the necessary experience and

expertise to provide a deeper understanding of decision-making within the context of the

IEP team meeting.

Participants

Individuals who agreed to participate in the study were selected as participants if they met the following inclusion criteria: (a) identified as an IEP team member required under IDEA to participate in the development of the IEP, (b) worked to develop the annual IEP for a student with ESN, (c) worked in a public education institution (i.e., public school, state or district public charter school) or were a parent of a child with ESN served by a public education institution), and (d) was an IEP team member supporting a student enrolled in grade levels ranging between kindergarten through eighth grade. To this end, only IEP teams supporting students with ESN between the ages of five (i.e., preschool) through 13 years of age were included. The participants for this study were all IEP team members who provided data on the student's IEP development.

The IEP team recruited for this study worked for the district combination middle/high school (MSHS). The MSHS served approximately 842 students in grades sixth through twelfth. The special education teacher identified that the IEP team consisted of eight individuals (i.e., district special education director [SED], general education [GE] teacher, occupational therapist [OT], parent 1 [child's mother], parent 2 [child's father], physical therapist [PT], special education [SE] teacher, and speech-language pathologist [SLP]). The student was not identified as part of the IEP team by either the parent or the SE teacher. Of the eight IEP team members, six voluntarily agreed to participate (i.e., the GE teacher and the child's father elected to not participate).

Four of the six participants (i.e., SED, SE teacher, SLP, OT) were employees of the district, and one member (PT) was a contracted employee (see Table 3 for participant

demographics). The majority of IEP team members had a history of working with Nicole
(i.e., student pseudonym) and the family. The SED, OT, and PT identified that they had
been supporting the student for over six years. Two members were new to Nicole's IEP
team (e.g., SE teacher, SLP). Of those two members, the SE teacher had worked for the
district for approximately three years, and she was familiar with several team members
(i.e., SED, OT, PT) through shared student responsibilities. The SLP was new to both the
district and the IEP team. All school-based team members were female. Again, as noted
above, in order to protect the identity of IEP team participants, additional identifying
characteristics or demographics were not collected or reported for this IEP team.

Table 3

Participant Demographics

Participants	Gender	IEP Role	Years of Experience		
			Professional	District	Student
Minnie	Female	SE teacher	8	3	< 1
Karlee	Female	SLP	1	1	< 1
Oleda	Female	OT	6	6	6
Wendy	Female	PT	11	6	6
Meghan	Female	SED	26[a]	16	6
Norah	Female	Parent	-	-	-

Note. SE = special education, SLP = speech-language pathologist, OT = occupational
therapist, PT = physical therapist, SED = special education director, Professional = total
years in the field. District = total years in the district in the current IEP team role, Student
= total number of years working with the student with ESN.

[a] Reflects the total number of years the SED has worked for the district. First ten years
were as a classroom teacher.

Recruitment

Ethical Considerations

This study conducted research that involved human subjects. I sent the proposed study through the University of New Mexico's Institutional Review Board (IRB) process prior to initiating any study activities. Upon receiving approval, I began recruitment activities.

Mertens (2012) discussed that any studies involving human subjects require a researcher to engage in ethical considerations. The author specifically highlighted the need to demonstrate how investigators intended to protect participants. To ensure that I conducted my study in an ethical manner, I upheld the principles of the Belmont Report (i.e., respect for persons, justice, and beneficence; Mertens, 2012). My research posed minimal risk as it was conducted through voluntary interviews, observation of one IEP meeting, and document review. Additionally, effective data security protocols (e.g., storage, de-identification of data, safe destruction of data post-study, Mertens, 2012) were developed and are discussed in more detail in the sections below.

Recruitment Procedures

Upon receipt of my institutional review board (IRB) approval in April of 2023, I began the process of recruiting an IEP team (see Appendix A for a complete timeline of events). Due to the hierarchal nature of schools and specific districts, I reached out to the superintendents of 14 different public school districts in the United States. In my initial contact with the school districts, I emailed the school superintendents the IRB-approved recruitment email (see Appendix B). An approval of recruitment was received (i.e., May 2023) from the superintendent of one of the 14 contacted sites. In their email, they included a district contact (i.e., special education director [SED]) and provided an email.

I established communication with the SED, Meghan, but due to the time of year (i.e., the end of the spring semester), an interested family and eligible IEP team were not located until late summer 2023, heading into the fall semester. Through Meghan, in July 2023, I was given a contact name (i.e., Norah), email, and phone number for an interested parent. Following the IRB protocol, I emailed the mother the recruitment information (i.e., July 2023; see Appendix C). In July, Norah noted that she would be preoccupied with work-related activities, and she requested that I get back in touch with her at the beginning of the school year. Therefore, I had follow-up telephone conversations (i.e., August, September) with Norah to answer questions (e.g., how would interviews occur, how long would they take) regarding the research study. In September, she gave verbal permission to reach out to the remaining IEP team to inquire if enough team members would be willing to participate in order to move forward with the research. At this time, I emailed Norah the informed consent (see Appendix D), which was signed and sent back to me within 24 hours. The form was uploaded to OneDrive for secure storage. Additionally, linked to her email, I included the list of interview questions for her review.

After receiving the signed consent from the parent, I reached out to the head special education teacher, Minnie. Minnie provided me with the names and email contact information of the student's (Nicole, pseudonym) IEP team members. Additionally, Minnie emailed school professionals in order to clarify who I was, establish that I had parental permission to contact them, and inform them that I would be emailing them information regarding a potential research opportunity. To prevent coercion (e.g., pressure to participate), I made sure to contact each IEP team member separately, and no team members were notified of who agreed or did not agree to participate.

At this time, each IEP team member was sent both the recruitment email (see Appendix E) and the informed consent for school professionals (see Appendix F). Similar to the parent, at the time of scheduling each interview, participants were sent a link to the interview questions for their review. Of the eight potential IEP team members, six volunteered to participate.

Prior to conducting each individual interview, I received informed consent documents (e.g., emailed before the meeting, signed at the onset of initial interviews). Any forms signed prior to a participant interview were emailed to researchers directly following the ZOOM meeting. Once received, forms were uploaded to the OneDrive secure folder, which will be retained for three years per the IRB protocol.

Compensation

Time in education is a precious commodity. To compensate all members of the IEP team who agreed to participate in this research study, each member was given a $10.00 Amazon gift card. Following the second interview, all IEP team members were mailed or given their gift cards for participation.

Data Sources

Johnson and Rowlands (2012) highlighted that qualitative interviewing, as an inductive approach to research, presents many diverse methods for conducting interviews. Additionally, they explained that each unique interviewing style may have different methodological advantages and limitations, with no inherent value on its own; instead, it is crucial for the researchers to carefully consider selecting the most appropriate approach based on their research objective.

I conducted two semi-structured individual interviews (e.g., pre-and post-IEP

meetings) with each participant to understand their perceptions of their and others' roles

and responsibilities regarding the many educational decisions made to support a student

with ESN when creating an IEP. These served as the primary sources for data analysis. In

addition, I observed the annual IEP meeting for the student and obtained documents

related to the IEP (e.g., draft IEP, behavior intervention plan). It should be noted that my

observation, the documents, and my field notes were used to deepen my understanding of

participant interviews. While highly valuable to my analytic process, they were not

treated as primary data sources.

Participant Interviews

All interviews were conducted using ZOOM per participant preference.

Participants were interviewed within four days before the scheduled annual IEP meeting,

and all team members were able to meet for the post-interview within the week that

followed the IEP meeting. The average length of the pre-IEP interviews was

approximately 50 minutes, with a range of 28 (i.e., Norah) to 91 minutes (i.e., Minnie).

Post-IEP interviews were slightly longer (M = 54 minutes), with a range of 45.2 (i.e.,

Wendy) to 63.2 (i.e., Meghan; see Table 4 for detailed information).

Table 4

Participant Interviews

Participant	IEP Role	Total time in minutes	
		Pre-IEP	Post-IEP
Minnie	SE teacher	91	53
Karlee	SLP	47	47
Oleda	OT	53	64
Wendy	PT	32	45
Meghan	SED	48	63
Norah	Parent	28	55

Note. SLP = speech-language pathologist, OT = occupational therapist, PT = physical
therapist, SED = special education director

I recorded interviews via my University of New Mexico ZOOM account and on

two digital audio devices for backup purposes to ensure data collection was successful.

Following

each ZOOM interview, the video, audio, and ZOOM transcript were uploaded to a secure

file on my UNM OneDrive. The audio and video files were immediately skimmed to

ensure that the file transfer was successful. I utilized my protocol as a framework for

participant interviews to guide the conversational inquiry (Johnson & Rowlands, 2012). I

worked to establish rapport with each participant, beginning all interviews with "*friendly*

questions" prior to asking descriptive (e.g., grand tour) questions that addressed the heart

of my investigation (Johnson & Rowlands, 2012; Spradley, 1979/2016). While having a

framework for the interview (see Table 5 for interview questions), I was prepared to

adapt as needed and follow each participant's lead. During these moments, I took

handwritten field notes to ensure I was able to ask pertinent follow-up questions to

enhance my understanding of how they viewed decision-making within the IEP team

meeting. Handwritten notes were typed and uploaded into One Drive.

Table 5

Participant Interview Questions

Interview Questions
Pre-IEP Meeting

1. Tell me about being part of [Name of School]?

   1a. Tell me about [Student Name]?

2. Can you talk a little bit about why you are meeting on [meeting date]?

3. You have an IEP team meeting coming up. When you are getting ready for an IEP,
    how do you prepare?

   a. Are you doing anything different for this IEP?

4. If I was on the IEP team, how would I participate in the meeting as the [role]?

   a. Where did you learn to do that?

5. I would like you to imagine yourself in the shoes of the other IEP team members…Can you tell me about how they might participate in the upcoming IEP for [student]?

6. What types of decisions are made during the IEP?

   a. In regard to decision-making, there are a lot of possible decisions being made at the meeting. Can you talk about what you see as your contribution to the decision-making process?

   b. In thinking about IEP teams, team members come to the meeting with a variety of experiences and expertise. Can you talk a little bit about how teams work together to develop the IEP?

   c. Can you talk about how IEP teams that you have been on work together when there is a difference of opinion?

7. You've probably had some very interesting experiences with IEPs. Can you tell me about them?

   a. Is there anything that I should have asked that I didn't ask?

   b. Is there anything more you would like to add?

<div align="center">Post-IEP Meeting</div>

1. You attended/*supplied information for the IEP meeting for [student] on [date]. Can you tell me a bit more about why the IEP meeting was held?

2. Last time, we talked about preparation for the meeting, can you tell me if you were able to participate in [student's name]'s meeting in the way you prepared?

3. Last time, I asked you to put yourself in the shoes of the other team members, when you think of the other members, did everyone participate in the way you expected?

4. Could you talk a little about the decisions that were made at this meeting?

   a. How did you contribute to those decisions?

   b. How did you see the other IEP team members contributing to those decisions?

   c. When you think about the different decisions, who contributed to the final decisions?

5. Before we talked about how IEP team members come into IEP meetings with different expertise and experiences, can you tell me how the team members worked together in developing [student's] IEP?

a. Can you share your thoughts about how the IEP team worked through any differences of opinion when developing the IEP for [student]?

b. In thinking about that, did you have anything in this IEP that you wanted to contribute during the meeting that you didn't?

6. As the [role], did anything happen that surprised you?

7. You have shared so much about being a [role] in the IEP meeting. What advice would you give to other IEP team members about developing an IEP for a student with ESN?

8. Is there anything that I should have asked that I didn't ask?

a. Is there anything more you would like to add?

Note. IEP = individualized education program, ESN = extensive support needs participate in the study.

Other Data Sources to Understand Context. In addition to individual interviews, I also attended Nicole's IEP meeting in person as a complete observer. I did not interact with anyone during the meeting, and my field notes served only to provide additional context for analysis of participant interviews. In addition to observing the meeting, the parent and school-based IEP team members provided me with a draft IEP before the meeting and Nicole's behavioral intervention plan. Finally, as noted above, I took field notes during participant interviews, and I took more extensive observational notes during the IEP meeting. Again, these items were used only to further my understanding during the analysis of participant interviews.

Data Security: Mitigating Risk

Mertens (2012) emphasized the researcher's responsibility in developing a data collection plan that would cover how all types of evidence would be obtained while also

creating a protocol that ensured the protection of confidentiality for all study participants. For this investigation, I collected data (e.g., video and audio files, written transcripts, documents) that included identifiable information. In preparing for this study, I developed a comprehensive data security plan under the guidance of my advisor, Dr. Susan Copeland.

To mitigate risk for the participants, all electronic forms of data (e.g., video and audio files, transcripts) were stored on my UNM OneDrive under my university log-in. Hard copy data (e.g., draft IEP, behavior intervention plan, written notes/research journal) were stored in a locked, fireproof cabinet in my home office. Per IRB protocol, identifiable data, a linking document (e.g., an Excel sheet with participant names, participant numbers, and pseudonyms), and de-identified data were all stored in separate folders on OneDrive. For this project, only Dr. Susan Copeland (i.e., principal investigator) and I had access to the secure data folders. Additionally, for further data processing (e.g., first cycle coding), these data (i.e., de-identified) were uploaded to Dedoose or downloaded to an Excel spreadsheet (e.g., codebook) and stored on OneDrive.

Per the IRB protocol, professional transcription services (e.g., graduate student associated with UNM linguistics, Rev.com) were used to transcribe all audio interviews. For the UNM linguistics department professional transcription service, individual transcripts were placed in a separate folder on OneDrive and shared with the transcriptionist. Files were not allowed to be transferred or downloaded, and all transcription work occurred on and was saved to OneDrive. Two pre-IEP participant interviews (i.e., PT, SE teacher) were transcribed in this manner. Due to time

requirements, I had all remaining interviews transcribed using Rev.com, which employs

encryption of data (i.e., uploaded and/or downloaded) through an HTTPS and Transport

Layer Security 1.2 server. All remaining audio files (i.e., 10) were transcribed using

Rev.com AI transcription and then verified, formatted, and de-identified by the student

researcher. Once verified, files were uploaded directly to OneDrive, and all Rev.com files

were deleted. Rev.com does not store any residual file records; all information was

verified as deleted by the student researcher. Further, per IRB protocol, once all

transcripts were fully formatted and de-identified, all video files were deleted from

OneDrive.

By following these protocols approved through UNM's IRB, I ensured that all

data were safely stored and handled from the initial collection through the dissemination

of this dissertation. Finally, upon successful completion of my dissertation study, all

identifying data (e.g., audio files and transcripts with identifiable information) will be

destroyed. Participant informed consent will be maintained on OneDrive for three years

and then will be destroyed by the student researcher.

Assigning Pseudonyms. Heaton (2022) stated that utilizing pseudonyms when

de-identifying participant data allowed researchers to protect the confidentiality of

individuals without losing the human aspect of their experiences and stories. However, in

selecting a name to represent a participant, Heaton cautioned that researchers must

consider how a chosen name(s) may or may not resonate or represent a given participant.

Heaton further explained that an individual's name holds "personal, social, and

symbolic" (p. 128) significance. To address this issue, in order to select pseudonyms, the

author stated that past researchers have utilized different approaches, some systematic

and others somewhat more personal. She stated that some researchers have used random name generators, while other investigators allowed the participants to select a pseudonym of their choosing.

In allowing participants to choose their pseudonyms, Allen and Wiles (2016) found that participants identified this process as meaningful, and they stated that individuals exhibited care when choosing a name with which they could connect. Further, the authors stated that the use of pseudonyms may positively impact the way participants engage and take ownership of their data. Therefore, Allen and Wiles encouraged researchers to take the time to work with participants in determining a pseudonym that represented them as a person while maintaining participant confidentiality.

For this study, all participants were asked to select a pseudonym to represent their data (Allen & Wiles, 2016). Following the post-IEP interview, I talked to all participants about selecting a potential pseudonym. I explained the information noted from the above research and asked participants if they would prefer to select a name, have me choose a name using a random name generator, and/or if they would like to think of a name and email it to me at a later time. Two participants (i.e., OT and SE teacher) selected pseudonyms at the time of the post-interview. The parent requested that I choose two random female names for her and her daughter using a random name generator. The SLP and SED stated that they would email a name following our meeting; however, the participants did not select a name to use. Therefore, per our conversation during the post-IEP interviews, I used a random name generator to select the pseudonyms for the SLP and SED.

Data Analysis

I collected data for this investigation through in-depth, semi-structured interviews with each IEP team member. In addition, as noted above, I observed the annual IEP and collected related documents (i.e., draft IEP, behavior intervention plan) to support my understanding of participant responses. When identifying categories, developing themes, and discovering meaning, I endeavored to be organized, resilient, flexible, creative, and ethical (Saldaña, 2021). For my analysis of these data, I utilized the heuristic qualitative coding method described in the following sections (Saldaña, 2021).

Pre-Coding and Coding Cycle One

Pre-Coding

As noted above, all participant interviews were professionally transcribed verbatim following the established protocol from de Valenzuela (2018; see Appendix G). Once transcribed, I began immersing myself in the data, as I first listened to the parent's audio without restriction (Saldaña, 2021). During or directly following this auditory exercise, I made note of any overall impressions or initial thoughts regarding the contents (Saldaña, 2021). Once I had listened to the full interview, I began the process of listening, checking for accuracy, formatting, and removing all identifiable information. In addition, I reflected on these sessions in my research journal (e.g., thoughts/impressions, routines, rules, roles, relationships; Saldaña, 2021). The work of verifying the first transcript created multiple opportunities for me to read the content and listen to the participant's words, reflecting upon the data (Saldaña, 2021). I followed this process for all six pre-IEP transcripts as I shifted into coding cycle one. As I moved into the initial cycle of coding, I continued this process with the remaining six post-IEP transcripts.

Coding Cycle One

Once de-identified, I began my first cycle of coding. Initially, I uploaded all de-identified transcripts into Dedoose (i.e., web-based data analysis platform). Before starting my first cycle of coding in this platform, I created a Word document of the parent transcript that included the de-identified text on the left side of the document and an open text box on the right (Saldaña, 2021). Again, as in the pre-coding sessions, I started by listening to and reading along with the audio without highlighting the text (Saldaña, 2021). Following this activity, as I listened again to the audio while reading the text, I began highlighting words or phrases that stood out to me (Saldaña, 2021). I paused periodically while doing this and made notes regarding my thoughts or impressions, and as I moved through the document, I utilized a variety of colors for concepts that appeared to be distinctly different to me and began looking for patterns within the text. For example, I highlighted all text in teal blue if the parent mentioned her role in decision-making during the IEP team meeting, and I highlighted text in bright pink if she discussed the role of another team member in that same context. As I completed this exploration of the data, I created an initial codebook in Excel. Using an in vivo approach, I identified initial codes, created operational definitions for those codes, and selected an excerpt from the text as an exemplar (Saldaña, 2021). This process resulted in 79 initial in vivo codes that I examined for patterns. As I considered the excerpts and the forming patterns, I found that the parent often identified *actions* (e.g., preparing, participating) and *conceptual actions* (e.g., learning) related to the IEP and team meeting (Saldaña, 2021). Therefore, as the code structure began to take shape, I used a combination of both in vivo (i.e., verbatim) and process (i.e., action and interaction) coding to capture how

participants expressed their roles and responsibilities in decision-making during the IEP

(Saldaña, 2021).

When organizing my initial codes (Saldaña, 2021), I began my coding process

using Dedoose. As I examined the transcript in this platform, using my initial codebook

and my growing familiarity with the data, I identified the parent's words or phrases that

had risen to the level of code, isolated the text, and created the operational definitions for

each excerpt in Dedoose. This process allowed me to accurately locate and apply an

existing code to new words or phrases (Saldaña, 2021). As I discovered new words or

phrases that did not match an existing code, new codes or child codes were created and

defined in a similar manner.

Throughout this process, similar to the pre-coding sessions, I kept notes in my

research journal, documenting my observations and reflections on the data (Saldaña,

2021). I followed these procedures for all remaining transcripts. Data saturation was

achieved during my analysis of post-IEP transcripts (e.g., no new codes appeared during

my analysis of the physical therapist [transcript 11] or SED [transcript 12] post-IEP

interviews).

I maintained an external codebook in Excel, stored on OneDrive, where I

documented all identified codes. Each week, I had a meeting with Dr. Copeland, acting as

a critical friend (Herr & Anderson, 2015), to review the codes and refine their definitions,

ensuring alignment among the codes, definitions, and excerpts. After completing the

initial cycle of coding, I reviewed all codes, definitions, and excerpts to ensure all data

were captured and made necessary refinements to definitions (Saldaña, 2021). The code

structure was continually adapted to incorporate new understandings of participant

meaning until both researchers (e.g., student researcher and faculty advisor) established

that consistency between codes, definitions, and exemplars had been achieved (Saldaña,

2021).

Second Coding Cycle

At the beginning of my second cycle of coding, I synthesized the codes into

broader conceptual units or categories (Saldaña, 2021). This involved printing out all

codes, including child codes, along with their definitions and excerpts. I then utilized a

tabletop approach to sort and re-code the data into larger categories, beginning the

process of categorizing codes based on shared concepts (Saldaña, 2021). From these

initial clusters, I proceeded to use code mapping to create an electronic representation

(e.g., PowerPoint) of potential categories, defining overarching concepts that emerged

from the data (Saldaña, 2021). As I cycled through iterations of the data, I created

broader, more inclusive categories by identifying patterns or relationships (Saldaña,

2014, 2021).

Upon completion of this cycle of coding, I again reviewed all excerpts in each

category to ensure that all data were represented appropriately. Similar to the procedures

in the first cycle of coding, I continued to meet weekly with Dr. Copeland (Herr &

Anderson, 2015). During this process, we reviewed and refined the definitions, shifting

from segmentation to integration and conceptualization of data into five distinct

categories (see Table 6; Saldaña, 2021).

Themes

In establishing themes within the data, I examined categories to see how different

aspects were conceptually similar and constructed visual models to connect these

concepts using participants' words (Saldaña, 2021). Through this process, four main themes and six subthemes emerged from these data. These are described and discussed in detail in Chapter Four.

Table 6

Second Cycle Coding: Categories

Categories	Related Codes	Definition
Formal Policy	8	Formal policies that may be written that instruct IEP team members how to prepare for the IEP team meeting (e.g., develop the draft IEP) and/or participate in the recommendations/decisions made during the development of the IEP and during the IEP team meeting.
Informal Practices	31	Informal policies or practices that may be unwritten that guide/teach (or have previously taught) IEP team members on how to prepare for the IEP team meeting (e.g., develop the draft IEP) and/or participate in the recommendations/decisions made during the development of the IEP and during the IEP team meeting.
Avoiding Conflict	10	Behaviors, actions, or events that IEP team members engage in to ensure that conflict is avoided at the IEP team meeting
Team Professional Knowledge and Beliefs	4	Professional knowledge and beliefs (e.g., views regarding role on the IEP team, policy/practice, professional knowledge, data/criteria) that impact decision-making in the development of the IEP

Categories	Related Codes	Definition
		(e.g., preparation) and participation in the IEP team meeting
IEP Team Personal Assumptions	8	Personal assumptions and/or their feelings about the process (e.g., views about student, family, disability) that may impact decision-making in the development of the IEP (e.g., preparation) and participation in the IEP team meeting

Note. IEP = individualized education program

Principles of Data Collection: Quality and Rigor

Leavy (2011) stated that establishing trustworthiness within forms of qualitative research may be accomplished through (a) explicitness, (b) thoroughness and congruence, and (c) ethical practice. In addition, Trainor (2013) identified methodological touchstones to guide study design to ensure quality and rigor: (a) use of purposeful sampling, (b) identifying data saturation is reached, (c) conducting multiple interviews across participants, (d) positionality that aides in the interpretation of data. Finally, to ensure this method of research establishes trustworthiness, Merriam (1998) stated that investigators should include member checks (i.e., verification that findings align with participant data).

In implementing this study, I worked to ensure I followed all the principles discussed

above. Specifically, I ensured a transparent, truthful, and ethical portrayal of this research, including the rationale for the study, the logic behind the research design, the sampling approach, data collection, and analysis methods (Leavy, 2011). Moreover, I demonstrated that the study's research questions were thoroughly addressed through various participants, such as multiple members from an IEP team. By conducting two

interviews related to the IEP team meeting, I gathered sufficient data to achieve data

saturation (Leavy, 2011). Additionally, my roles as an educator, a parent of a child with a

disability, and a doctoral candidate focusing on the IEP process equipped me to analyze

and interpret participant findings effectively.

Member Checks

Merriam (1998) emphasized the importance of member checks in qualitative

research, which involve verifying with participants that initial findings accurately reflect

their perspectives. To ensure the trustworthiness of this research, I conducted member

checks with all participants. In doing this, I sent an email to each individual participant,

outlining the main themes and subthemes derived from my analysis and containing

excerpts from their individual interviews that exemplified that theme or subtheme. I

asked them to review the definition of each theme along with their exemplar response to

confirm alignment between the theme and their excerpt. Participants were requested to

reply via email, and a deadline was set for responses (e.g., within 5 business days). In the

email, I explained that if they did not wish to respond, non-response by the deadline

would signify that they felt comfortable with the presented excerpts and definitions.

Of the six IEP team members who participated in this study, three responded (i.e.,

Nicole's parent, SE teacher, and SED). The parent and SE teacher confirmed that their

excerpts aligned with all presented themes. The SED sought clarification on how her

excerpts might be presented if used as an exemplar in the publication of the dissertation.

In particular, she requested that filler words be removed (e.g., so, um). I responded to her

email, confirming the removal of filler words and provided examples for her review. No

additional responses for other participants were received.

Conclusion

This study considered processes surrounding one IEP team and one IEP meeting, and therefore, the findings cannot be generalized beyond the context of this research, but as Compton-Lily (2013) emphasized, the value of qualitative research is in the individualized narratives that may provide a particular illustration that speaks to or resonates with a reader on a personal or intimate level. This inductive inquiry offered an opportunity to fully explore the interconnected influences and interactions of this complex and dynamic process, generating a rich representation of each IEP team member's experience (Yin, 2018). Through this study, I explored the unique perspectives that link both person and practice to policies that influence or impact individuals (e.g., school professionals and families). As referenced above, the four themes and six subthemes that resulted from this analysis are presented in more detail in the following chapter.

Chapter 4

For my research study, I utilized a qualitative interview approach to explore two primary questions: (1) How do IEP team members conceptualize their responsibilities within their IEP team role in the decision-making process when developing an IEP for a student with ESN? (2) How do IEP team members conceptualize their own and others' contributions to the decision-making process when developing an IEP for a student with ESN? Each participant shared their experiences in this process through two in-depth, semi-structured individual interviews, which occurred directly before and following (i.e., less than one week) the student's annual IEP meeting. Additionally, I attended the student's meeting and obtained a draft of the IEP and the student's behavior plan to provide additional context for participant responses.

The analysis, guided by a sociocultural framework discussed in Chapter One and Chapter Three, drew upon Wertsch's (1998) ten properties of mediated action. Wertsch's framework emphasized that human actions are inherently linked to the historical, cultural, and institutional contexts in which they occur. By examining an IEP team supporting a student with ESN in a fringe rural district, this lens allowed me to explore data with the unit of analysis being both human action and the role of mediational means (e.g., tools, signs, and symbols) that shaped acts, situations, and purposes within the context of an annual IEP meeting. Further, this framework scaffolded my understanding of how this dynamic relationship influenced IEP team members conceptualization of the decision-making process.

Thematic Analysis

My investigation gathered insider knowledge from six of eight IEP team members who participated in the many decisions required to develop an IEP for a student with ESN. These participants offered their intimate views of IEP decision-making and how they each perceived their and other team member's roles, responsibilities, and contributions to this process within the context of the team meeting. Interviews ranged from approximately 30 minutes to 1 ½ hours. Interviews were then transcribed verbatim.

After the interviews were transcribed, I immersed myself in the data by repeatedly listening to, reading, and formatting each transcript. Once verified, transcripts were uploaded in Dedoose for further analysis, as outlined in detail in the previous chapter. As I moved through my analysis and began the transition into my second cycle of coding, I utilized two methods (i.e., tabletop and code mapping) to reorganize and re-code the data into five categories (Saldaña, 2021). From these categories, four main themes and six subthemes emerged (see Table 7). In the following sections, I describe my findings in detail, including themes, subthemes, and definitions structured around a sociocultural framework.

"So…it has worked for us.": Unspoken Norms

Theme one was defined as the unwritten or unspoken policies or practices that mediated, guided, or instructed how IEP team members worked to develop the IEP, prepare for, or participate in the IEP team meeting. This theme was identified as IEP team members discussed the many informal practices, procedures, or routines they engaged in to prepare for the meeting (e.g., leadership roles, informal team collaboration) and how they perceived and described their participation during the IEP team meeting

Table 7

Themes and Subthemes

Theme/Subtheme	Definition
Theme one	
"So…it has worked for us.": Unspoken Norms	Unwritten or unspoken policies or practices that mediate, guide, or instruct how team members work to develop the IEP, prepare for, or participate in the team meeting.
Sub-theme	
"They had refused services.": A Team's History	How this team's previous engagement and decisions related to this student affect preparation and participation in the development of the IEP and decision-making before, during, and following the team meeting.
Sub-theme:	
"...she stays at [Home School], she's gonna have to take the {state test}. [Student Name] needs to be at [School Name] so she doesn't have to take the [state test]. She can take this alternative test.": Policy, Practice, Procedure, and Power	The IEP team's interpretation of formal (e.g., legislation, district policies, written school handbook/procedures), and use of informal policy and/or practices to guide the development of the IEP.
Theme two	
"It's our job to recommend that, but as a team we all have to agree.": Privileging Professional Knowledge	The push and pull (i.e., irreducible tension; Wertsch, 1998) that is not easily reduced or eliminated between professional expertise and parental involvement in the decision-making process when developing the IEP.
Sub-theme	
"Your expertise matters.": Leveraging Social and Cultural Capital	How relationships, professional expertise, and institutional knowledge impact decision-making in developing the IEP for a student with ESN

Theme/Subtheme	Definition
Sub-theme	
"Mom always brings up about her riding a bike. It's been like a theme for the past three years.": Lack of Social and/or Cultural Capital	How the IEP team addressed parental concerns over time.
Theme three	
"No one wants to go into a meeting with conflict": Avoiding Conflict and Responding to Disagreements.	The use of mediated tools (e.g., draft document, email communication) to avoid conflict among the IEP team members when developing the IEP, preparing for, or participating in the team meeting.
Sub-theme	
"…there wasn't that disconnect anymore. We were ALL in agreement. We were all on the same page.": Responding to Disagreement	How the IEP team responds to and resolves disagreements in the development of the IEP (e.g., prior to, during, or following the IEP team meeting).
Theme four	
"When it comes to these IEPs, I- I think our role is mostly just, listen and learn": Identifying Your Place at the Table	How IEP team members perceive their and others decision-making role(s) within the IEP team.
Sub-theme	
"I think like the biggest, decision which really didn't seem like a decision, even though it is. Um: keeping her in that life skills room": Contributing to Decisions at the IEP Meeting	How individual IEP team members participated within their roles in the IEP meeting, as well as when, where, and how decisions occurred.

Note. IEP = individualized education program; ESN = extensive support needs

(e.g., running the IEP, turn-taking).

Situated within a fringe rural district, the IEP team appeared to operate under a set of implicit norms and practices that shaped their interactions and the decision-making process. Additionally, the unique interactions and relationships within the IEP team members (e.g., school-based team members, family team members) influenced how unwritten rules and practices were implemented. School-based team members interpreted formal policies and IDEA guidelines through the lens of their own assumptions about disability and their perception of district resources. Their interpretations manifested in a broader school culture that significantly constraining the types of supports and decisions offered by the professional IEP team members associated with the school. These seemingly innocuous practices and informal policies discussed by team members served as an undercurrent that carried this team along, shaping the decisions they made along the way.

As participants discussed and described these tacit conventions, they identified unique experiences with various cultural tools (e.g., informal practices and routines) that informed their actions in the development of the IEP (Wertsch, 1998). All participants discussed or had some knowledge of many of the unspoken rules that guided the development of the IEP and team decisions in this particular district (i.e., evidence of this appeared in all data sources), even though two of the members were new to the team this year and one (i.e., Karlee) was new to the district.

When asked how team members knew how to prepare or what to do to participate in the development of the IEP or the IEP team meeting, most participants described learning through informal experiences (e.g., observations, attending an IEP meeting).

Meghan, for example, answered that she learned to participate through: "Baptism by fire." She then spoke about her experiences as "a special ed teacher" who at "one time…had…a classroom…for students with multiple disabilities." Through these experiences, she had worked with a "variety of other directors" and "paid attention to how they [other directors] ran their meetings." Although Meghan did mention formal education in the IEP process (e.g., coursework and professional training), she emphasized that her "learning" came from "years of experience." In addition to experience, the school-based team members talked about relying on both their co-workers and formal and informal mentors to "emulate" what was successful, "incorporating that into…practice." Through these examples, school-based participants illustrated how they achieved mastery and appropriated these informal procedures, integrating them into their professional practice as members of Nicole's IEP team.

In considering how these informal practices mediated IEP development, I examined how team members described the different leadership practices (i.e., mediated agency) that shaped team dynamics (e.g., policies that shaped the distribution of power and team members' interaction/collaboration) and either enabled or constrained how IEP team members engaged in or were excluded from the development of the IEP (Wertsch, 1998). In connection to these informal practices, all school-based team members, including the special education director (SED), identified the leader or facilitator of the IEP team process as the special education (SE) teacher, Minnie. All but one IEP team participant (Norah) described in detail the many duties required within this task, ranging from administrative responsibilities (e.g., coordination of the meeting, making photocopies, coordinating team communication, ensuring all forms, assessments, and

reports were completed), primary authorship of the IEP (e.g., incorporating information

from members, revision and refinement of information, ensuring completion of the draft

IEP document), and moderator of the IEP meeting (e.g., facilitating the IEP, guiding

discussions). By "invoking the appropriate cultural tools" (Wertsch, 1998, p. 72), Minnie

was able to exercise power and authority within the IEP process, illustrating her mediated

agency. This was further explained by Wendy (PT), who stated, "there's a lot of

confidence in the case manager kind of running the meeting," and through similar

statements made by the SED, Meghan, who "look[ed] at…[Minnie] as…the captain of

the…ship."

As school-based participants described how Minnie's leadership responsibilities

influenced the development of the IEP, two main processes emerged: time (e.g., the

establishment of a timeline for team obligations) and participant access (e.g., the

opportunity to review and input information into the draft IEP). As described by the

school-based team members, these collaborative procedures influenced participant

responsibilities when preparing for the IEP team meeting. When school-based team

members spoke about time, they described having access to the draft document weeks

prior to the scheduled IEP team meeting and being able to review the input from other

team members, including input from collaborations that occurred between primary (i.e.,

legally defined IEP team members) and non-primary team members (i.e., other school-

based staff working with Nicole). In addition, school professionals talked about having

time to enter their own information into the IEP several weeks before the expected

meeting date.

These unwritten leadership practices set the team's preparation processes into

motion. The timing of the notice to school-based IEP team members appeared as

something fundamental and linked explicitly to the development of the IEP document.

When Minnie advised the team that the meeting was scheduled and opened the document

in IEP writer, this signaled each school-based team member to begin their consultations,

data collection, and drafting of the IEP. All team members talked about how this

notification facilitated their access to the preparation process. Wendy, the physical

therapist (PT), illustrated this concept when she stated that knowing "who is involved in

the case and making sure everyone is included, and then giving us ample time to prepare

and be present" impacted team member's abilities to collaborate effectively, collect data,

develop goals, and make decisions as a member of the IEP team.

Through my analysis, I found a significant disparity in the time given to school-

based team members to prepare for the IEP meeting in comparison to the family. For

example, Minnie explained that while this school-based team was contacted "about the

second week of school," a parent had to first request the document, and if they did so, she

would provide it "a' hundred percent...at least 24 hours" in advance of the meeting. The

unwritten practice of notifying school-based members but not the parent well ahead of

the meeting created a team dynamic of inequity that limited the involvement of the

parent.

The impact of this inequity was two-fold for Norah. First, as noted, she was only

granted access to the IEP document after requesting it and then only 24 hours prior to the

scheduled IEP meeting to read through it. This disparity in the amount of time to prepare

restricted Norah's participation in the development of the IEP. She had very limited time

to review the draft, and because much of the decision-making took place in the

preparation phase prior to the meeting, this significantly impacted her power to influence

team decisions. While Norah did not directly acknowledge this as a differential in the

distribution of power among the team (e.g., school-based team members had more

control and influence on the development of the document), she did feel that the IEP team

changed their actions through her advocacy. She explained,

> "The last thing I want [is] somebody to do is gimme a document that thick and
>
> expect me to comprehend, read over it, and not hold the whole...entire meeting up
>
> while I'm reading it...So then after the first few times of that, I requested they be
>
> sent to me ahead of time...So now, Minnie, without even me saying anything...is
>
> gonna be sending it home."

In this way, Norah gave voice to her frustration of not being integrated more fully into

the development of the IEP. Additionally, she described being "a little bit disappointed"

by the special education teachers' "oversight" being "presented with the IEP at the

meeting" for the first time. It appeared that her inability to review this document before

the IEP resulted in her feeling overwhelmed during the meeting. Additionally, Norah also

talked about feeling anxious (e.g., to meet a new team to hear their decisions).

Furthermore, she described the importance of this unofficial procedure (e.g., sending the

draft prior to the meeting) to her as a member of the IEP team: "They had a chance to

read it and review it. They WROTE it, but I did not. So, I think the biggest thing for

parents is having everybody there. Having the document ahead of time."

When considering how unspoken norms guided how this team operated and

developed the IEP, participants also described three unwritten guiding frameworks that

shaped the decision-making process (i.e., informal communication, whose responsibility

is it, and school-based team recommendations). First, all school-based members

discussed the importance of ensuring that "you communicate with every team member"

(Oleda) when preparing for the IEP meeting. When school-based team members defined

who "every member" should include, they talked about "consult[ing]with the classroom

teacher" (Karlee), "the paraprofessionals" (Oleda), and " the other services" (Karlee).

The missing IEP team member within this communication framework was the parent.

This inequity was described by Norah: "I don't really talk to them [school-based team

members] at all before the IEP is written."

In addition to communication, team members also highlighted whose

responsibility it was to draft the IEP document within these guiding practices. Minnie, as

well as her school-based colleagues, stated that she was the "primary author" of the IEP,

while the general education teacher had no authorship. The related services staff

described their responsibilities within this scaffolded process as linked to their individual

disciplines. Karlee stated that "for other team members, I see that they're able to come up

with their own decisions, sort of like, me as a speech therapist with all their data and um,

coming to that, WHOLE recommendation."

The frame that guided how the IEP was drafted also informed this team's view on

school-based recommendations. At times, all team members referred to their suggestions

and input into the IEP as a recommendation; however, they also frequently described that

"recommendation" meant school-based decision. Oleda illustrated how their informal

communication prior to the IEP meeting contributed to decision-making and impacted the

development of the IEP. She stated, "for the IEP team at SCHOOL...I think most of the

DECISIONS...we try to prepare that...be on the same page before the meeting." As with

the disparity in time provided to prepare for the IEP meeting, it appeared that these guiding frameworks also failed to include the parent as a valued and participating member of this aspect of the decision-making process.

"They had refused services.": A team's history. This sub-theme considered how this team's engagement and decisions related to this student in a previous IEP meeting affected preparation and participation in the development of the IEP and decision-making before, during, and following the IEP team meeting. As found within the larger theme of unspoken norms, this team's history affected their current practice aligning with several of the properties of mediated action identified by Wertsch (1998). First, through a sociocultural lens, I examined how past interactions (e.g., IEP team meetings, decision-making, team disagreement) acted as a developmental path (Wertsch, 1998) that mediated informal practices, routines, and policies. Additionally, the influence of power and authority evident in these historical practices continued to shape the current decision-making practices of Nicole's IEP team.

As participants disclosed their past experiences as IEP team members (e.g., perceived challenges or successes), one participant noted that "it's not always been sunshine and rainbows with this" (Oleda). Events surrounding prior IEP team meetings highlighted a myriad of different and negatively perceived incidents that influenced this team's current practice and norms in how they viewed Nicole's parents (e.g., "stubborn," "involved," "intense"), perceived Nicole (e.g., unable to be "in a regular ed room all day long. It just wasn't appropriate for her") and worked together to develop the IEP and make decisions. Four of the six participants who volunteered for this study (i.e., Norah, Meghan, Oleda, and Wendy) discussed various aspects of the team's history (i.e., view of

the parent and student). Two school team members (i.e., Meghan and Oleda) disclosed detailed information about how Nicole's parent's advocacy and disagreement between her and the school in the past continued to influence how this team operates when developing Nicole's IEP.

The school-based team's view of Norah's previous advocacy for her daughter continued to shape IEP team behaviors in preparation and participation in the development of the IEP and the team meeting. School-based professionals talked about Norah's attempted engagement in decision-making and advocacy for Nicole to be supported in the general education classroom at her home school as divisive. Oleda stated,

> " I don't wanna say what was best for [Nicole], but mom was being stubborn. She wanted supports at [Nicole's home school] for all the kids, and it's just not feasible for the district. So, at [Nicole's] expense, she had kindergarten, first, and second grade, at [her home school] where she had TERRIBLE behaviors because she wasn't getting the help she needed or the supports."

As school-based team members viewed Nicole's family through this lens of parental action, the team's guiding practices described above were reinforced, as illustrated by Meghan's desire for the school-based team to "have [their] ducks in a row…Be prepared because they are going to challenge us."

Additionally, due to past conflicts, this team ensured that all members, including the administration, were aware of any potential changes (e.g., reductions in related services) that could result in conflict. Meghan, the SED, talked about "definitely [wanting]...the heads up…what's happening, so they know. I want the heads up before we

walk in….Don't let me be surprised walking into the IEP meeting, especially if you think it's gonna be a conflict." In addition to notifying the SED, school-based team members would "call [parents] beforehand so they're not so off guard...And give them time to process" recommendations or decisions that the team perceived as potential struggles.

Furthermore, this team's past history of conflict influenced their current collaboration and recommendations between seasoned members of the team and new school-based staff. This was illustrated by the school-based professionals' desire to share knowledge about the family's history of conflict and the student's struggles with behavior (e.g., refusal) with new school team members. The effort to prevent reverting to a state of team conflict was further emphasized in conversations involving Oleda and Karlee, the new IEP team member. Because of the previous conflicts that existed between the school and family regarding IEP team decisions, new team members were discouraged from making changes in their initial interactions with families. Oleda shared the advice given to Karlee by Nicole's previous SLP. She said, "it's your first meeting with mom and dad…maybe see [Nicole] for another year. You know, have a good relationship with them and then go from there".

"...She stays at [her home school], she's gonna have to take the [state test]. Nicole needs to be at [the other school] so she doesn't have to take the [state test]. She can take this alternative test.": Policy, Practice, Procedure, and Power. The second sub-theme is defined as the IEP team's interpretation of formal (e.g., legislation, district policies, school handbook) and use of informal policies and/or practices (e.g., unwritten rules or procedures) that guided the development of the IEP. The sub-theme surfaced from participant discussions regarding how Nicole's IEP team interpreted or

misinterpreted federal legislation (i.e., IDEA) and formal district policies when making

decisions in the development of the IEP. These interpretations and misinterpretations

served as cultural tools that guided how decisions were made.

As noted above, this IEP team engaged in many informal policies and practices

that mediated, guided, and informed how this team engaged in decision-making. School-

based IEP team members discussed their interpretation of federal, district, and school

policies, particularly surrounding where special education supports and services were

offered in the district, the use of supplementary aids and services (SAS) to support

students in the least restrictive environment ([LRE]; e.g., use of one-on-one

paraprofessionals, itinerant special education teachers), and restrictions on the types of

supports considered to be appropriate for school. How the team chose to interpret IDEA

and district requirements was often in direct conflict with the actual district policies

and/or the federal legislation. Oleda talked about a misinterpretation of federal legislation

related to testing accommodations that influenced how the team made decisions. In this

case, she identified that Norah was coerced to shift Nicole to the district's *school of

choice* (i.e., the school that offered special education academic supports) so that Nicole

would be eligible to "take...[the] alternative test." Oleda clarified that Meghan (SED) had

gone "back and forth...even outside the meeting...being able to...convince mom...[if]

she...stays at [her home school] she's gonna have to take the {state test}."

Regarding where special education supports were offered to students, both the

SED and the OT discussed the district's practice of shifting students with special

education services away from their home school. Meghan emphasized that due to the size

of and resources available within the district, they didn't "offer, special education

services in... [the] three outlying elementary schools," and she stated that when they,

"looked at it [offering special education services at outlying schools], we did not feel it

was beneficial." These hidden policies (e.g., accommodations for testing) and restrictions

(e.g., where supports were available) are two examples of how misinterpretation of

district policies and federal legislation influenced how school-based IEP team members

made decisions when developing the IEP.

In examining further examples, both the OT and SED discussed that if students

did not attend the school of choice, students were not provided itinerant teaching or

behavior supports. In cases of this nature, the SED stated that when parents refused to

move their child to the school of choice where services were offered, teams documented

this as a refusal of services. In Nicole's case, this unspoken practice had been invoked as

illustrated by Meghan, "They [Nicole's family] had refused services. They accepted

services for speech and OT and PT. And they were done in the outlying buildings. But

they refused the life skills learning support services."

Misinterpretation of policy and legislation also appeared in the areas of how SAS

supports were considered (e.g., use of one-on-one paraprofessionals) to support students

with complex or behavioral needs. Further, their interpretation of policies surrounding

where and how special education supports defined "*special education supports as a*

place." Consequently, school-based team members often described the continuum of

services offered to students in terms of classrooms (e.g., learning support, life skills)

rather than levels of support. School professionals acknowledged their practice that

students were placed into specific types of classrooms based on the perceived level of

student need/ability or student eligibility (e.g., learning disability, emotional disturbance).

Oleda labeled this interpretation of LRE as the "just-right-challenge." Minnie illustrated this interpretation of IDEA in her assumption that students should, "have as much access, to a lesser restrictive environment, as they can handle and that they are ready and prepared for."

Through my analysis, it became apparent that these unvoiced expectations of where and how special education services offered were supported by the district administration. Meghan talked about the benefit of having the students in a "supportive classroom." This is illustrated by her comments,

> "And then when the kids come here [school where special education supports were available], they're often like, I mean it sounds terrible but, "I'm not the stupid one in the class anymore. I'm with kids that learn like I do."

Ultimately, the practices of school-based team members, shaped by their individual understanding of formal policies, IDEA guidelines, and perceived district resources, significantly restricted the range of supports and decisions accessible to professional IEP team members associated with the school.

"It's OUR job to recommend that, but as a team we all have to agree.": Privileging Professional Knowledge

The second theme that emerged from the analysis examined the push and pull (i.e., irreducible tension; Wertsch, 1998) that is not easily reduced or eliminated between professional expertise and parental involvement in the decision-making process when developing the IEP. Wertsch's (1998) properties of mediated action, such as the use of cultural tools (e.g., expertise, certifications, education, language) and how the IEP team members honored each other's expertise, provided a framework to understand team

dynamics when privileging professional knowledge when developing the IEP. As participants talked about the development of the IEP and how school-based team members established criteria, collected data, and reviewed and constructed Nicole's present skill levels in order to determine appropriate recommendations, team members also acknowledged a persistent struggle in the incorporation of parent input. In these cases, professional knowledge and parental input mediated the decision-making process, influencing how school-based team members prioritized, integrated, or failed to integrate information when developing Nicole's IEP. These conflicts appeared tenacious at times as school-based team members reasoned or justified the marginalization of the perspectives of parents in the development of the IEP (e.g., goal setting, service delivery). This tension, felt by many school-based team members, was illustrated by Wendy as she talked about Norah's previous concerns that Nicole had one side of her body that was weaker.

> "And…sometimes parents are like, "But this side's weaker." I respect that. And I'm not saying it's not weaker, but that weaker side doesn't impact their ability to access their school environment. They're able to independently walk around. They're able to carry their, you know, their lunch tray. They're able to do everything they need to do, so."

In this example, the PT experienced tension between her awareness of the parent's concern for her child and her own conviction as a professional that skills addressed in the IEP must be linked to a need to increase educational access. In establishing that Nicole could navigate her educational setting, she dismissed the parent's concern about her daughter's motor support needs. However, the tension remained, and this skill continued

to be an area of concern for the parent that she discussed in every annual IEP for the past three years.

As school-based professionals discussed marginalization of parental concerns, they cited two factors that justified a school-based team member's privileging their professional knowledge: authority and trust. In all of the school-based team member's interviews, they referenced or acknowledged each other's areas of expertise, and each member also presented the idea that particular professional *"lanes"* existed in the development of the IEP in which every member was expected to stay. This belief in not challenging other professionals' expertise or authority was mentioned by all six participants and is expressed by Minnie:

"Um, just like for an example, if it was something, very…PT related and if I really had no input, I would trust the judgment of somebody who has been, you know, certified and specialized in that area, because I honestly wouldn't have…the educational background to know…the difference between X and Y. And it's…like, well, I...know that you know this student, and I trust that you…will use your best judgment to help the student improve...I...trust what you are saying because I know that you are the expert in that field."

Both school-based participants and the parent presented example after example of how school-based IEP team members utilized their professional authority and expertise (e.g., education, professional certification) as members of the dominant school culture to make decision recommendations. In addition, school-based team members talked about expectations of peer support (e.g., having their colleagues to back them up), which was often associated with the importance of maintaining a good working relationship (e.g.,

being respected as a professional). Within the context of the IEP meeting, IEP team members leveraged their cultural and social capital to influence the decision-making process prior to and during IEP team meetings. I describe how team members use cultural capital and social capital in decision-making in the following subthemes.

      "Your expertise matters.": Leveraging social and cultural capital. This subtheme is defined as how relationships, professional expertise, and institutional knowledge impact decision-making in developing the IEP for a student with ESN. Professional expertise and institutional knowledge, as cultural tools, mediated the decision-making process, guiding how IEP team members worked to develop Nicole's IEP. For this analysis, I identified the school as the dominant culture in which the IEP team is embedded. The concept of cultural capital was defined as the knowledge (e.g., formal education), skills (e.g., certification), language (e.g., school jargon), and dress (e.g., school badge, clothing with school logo, professional dress) of individuals that may leverage authority or power within the dominant group (Bourdieu, 1986; McNeal, 1999; Trainor, 2016; Wilson, 2015). Further, I defined social capital as the existing networks (e.g., special education/head teachers, related service providers, district directors) and social connections (e.g., staff meetings, informal and formal professional learning communities, formal and informal social activities) that provided opportunity and access to resources or supports for individuals within the dominant group (Bourdieu, 1986; McNeal, 1999; Trainor, 2016; Wilson, 2015).

      Throughout multiple interviews, all IEP team member participants talked about the importance of "relay[ing]...what you as a professional have seen" (Karlee). All team members acknowledged the existence and relative importance of professional knowledge

in the development of the draft document, decision-making, and team participation in the IEP meeting. Professional knowledge was given more weight across all participants in decision-making and was examined through the many forms of social and cultural capital leveraged by professional team members.

Due to this district's size and location, many of the related service professionals were hired as outside consultants. Regardless of employee versus consultant status, school-based IEP team members described the district as close-knit, positive, and respectful. They perceived that their recommendations and authority as experts were valued. Wendy noted, "Fortunately, in the [district]...I feel like I'm viewed as a respectable member of the team...and my professional judgment is well taken."

While school professionals identified smaller social networks by professional communities (e.g., related services, special education teachers, district directors), all participants described social connections that were associated with employees of the school district. While Wendy was considered a consultant for the district, she had over six years of experience with the school and many team members, and she had an established working relationship with Minnie. Wendy articulated how her access and relationships were a benefit and resource in developing Nicole's IEP. "I'm familiar with the teacher. So I was asking questions" (Wendy). Through this example, having a relationship with the teacher or other service providers allowed school-based team members to collaborate on the development of the IEP, coordinating their efforts together to address concerns, develop goals, and make recommendations.

Although Minnie was a new member of Nicole's IEP team, she was an established employee in the district. Karlee, who was new to the team, appeared to have

been immediately adopted into the social network of professionals as an IEP team

member, and further, she was granted full access to the resources and opportunities that

were enjoyed by her colleagues. As a result, Karlee had social capital within the team,

and she leveraged this in order to prepare for the IEP. Karlee illustrated this when she

talked about being new to the district. "This is my first year with them...I actually...just

started here...in August. So...I haven't been here super long, but...in my time being

here...it's been great. Like the support." Additionally, she described that she was able to

readily utilize the social resources within the school when she talked about her

integration into the team, "we're able to share our IDEAS and...comments...we

all...collaborate as a unit."

In addition to consulting with the paraprofessionals and SE teacher, Karlee talked

about "being able to...collaborate with the other services OT and PT...to see if...some of

our things sort of intertwine...as far as like...our goals or even that positive behavior

plan." Karlee was able to contribute to the decisions made in the development of Nicole's

IEP through her access to the social networks and resources (e.g., the extension of

cultural and social capital), which was granted to her based on (a) her education (i.e.,

formal education and training), (b) her relationship status in the district (i.e.,

employee/school-based IEP team member), and (c) her institutional knowledge (e.g.,

navigating the IEP process, special education).

In further exploring how cultural and social capital impacted IEP development, I

found that professional certification was discussed as a means of demonstrating expertise

and knowledge in given areas among school-based team members. In some instances,

professional status constrained currency between school-based members on the basis of

who held the expertise. For example, Wendy, Oleda, Minnie, Karlee, and Meghan all expressed apprehension in making suggestions, offering opposing thoughts or opinions, or correcting another professional whose expertise differed from their own. "I...wouldn't question another therapist. Like, if they wanted to decrease her...I trust their judgment" (Oleda). And Meghan clarified, "So I would consider like the OT, the expert of OT. So, I really just sit back, and I let her make her suggestions." In these cases, professional IEP team members elected not to speak up or contradict the decision-making of their colleagues.

While these team members would not contradict each other, their elevated status as school-based professionals enabled them to leverage currency when contradictions existed between insiders (e.g., school-based team members) and outsiders (e.g., parents). To illustrate the difference, Oleda said,

> "I think it's important too...having...your coworker's...backs, as well. Like if
> Wendy's trying to reduce to consult and mom's...really questioning her, I can pop
> in and I'll say, "I've...been in...the PT session[s]. She is doing great." And
> that...kind of helps too. You get the other person's perspective."

In decision-making situations such as these, school-based participants stated that while they would not leverage their social capital to contradict a colleague, they would actively engage it to support them. In the following sub-theme, I explore how privileging professional knowledge has impacted the development of the IEP and the incorporation of parental concerns over time.

"Mom always brings up about her riding a bike. It's been like a theme for the past three years.": Lack of Social and/or Cultural Capital. All participants

discussed Norah's engagement and participation in the IEP process over time. Within this

sub-theme, participant stories emphasized the lack of social and cultural capital as it

mediated the marginalization of parental concerns (i.e., professional expertise dominated

the decision-making process). My analysis of the data illuminated an understanding

between the IEP team members, and as they shared their stories, they described the

imbalance of cultural and social capital between school-based professionals (i.e., had

authority and influence over the development of the IEP) and the parent (i.e., did not have

the leverage to make change). Through their interviews, all participants brought up

disparities that privileged professional knowledge and expertise while systematically

negating parental concerns, perspectives, values, and contributions.

As school-based professionals recalled and reflected on parental concerns in their

interviews, some of the stories highlighted constraints related to the interpretation of

federal legislation and district policies (e.g., qualifying for hearing supports), but overall,

the marginalization of the parental concerns that emerged from these data (i.e., accessing

regular education, learning to ride a bike, articulation of /th/, the behavior intervention

plan) appeared to be more directly linked to this parent's lack of cultural and social

capital.

In these cases, participant interviews unveiled a tapestry of unheeded parental

concerns that started from the beginning of Nicole's kindergarten year (e.g., seeking

inclusive educational placement). In addition, across this team's history noted above, the

parent sought educational support to teach Nicole how to ride a two-wheel bike. Oleda

specifically stated that "it's been like a theme for the past three years." The parent's

request for her daughter to have services to teach her this skill had not been honored. The

rationale for the specific dismissal of this parent request involved both district constraints (i.e., where special education and behavior services were offered, lack of equipment), as well as privileging of professional knowledge (i.e., "mom knows it's not school appropriate," Oleda). In these instances, the SED, OT, and PT leveraged their cultural capital (e.g., formal education/certification, their place embedded within the school-based team) and their social capital (e.g., having each other's backs) to disregard the views of the parent.

Additionally, in the current IEP team meeting, school-based team members highlighted Norah's concern regarding Nicole's hearing loss. While these viewpoints were not discussed directly by the parent, both Wendy and Meghan brought up the team's previous history and current collaborations and discussions regarding this issue. "Possibly a year or two ago, mom brought up the hearing loss" (Meghan). Meghan mentioned that the IEP team acknowledged the parent's perspective and conducted an evaluation, but, per the evaluation report, Nicole did not qualify for services. The parents had then pursed an outside audiology evaluation and based on that evaluation; Nicole had received hearing aids from the outside audiologist.

For the current IEP, despite the fact that Nicole was wearing hearing aids and had a microphone provided by the outside professional, rather than working to incorporate the findings and recommendations from the outside evaluation, the SED noted that the school would have to determine (a) if there was enough evidence that the school needed to re-evaluate and (b) if the school re-evaluation identified a large enough deficit to qualify for support through the IEP. In this case, Norah's concern was invalidated, and no school professional appeared to inform the parent of her procedural safeguards related to the

school's requirement to consider the outside evaluation. Further, Wendy described an email received from the parent stating that while her daughter had the equipment, Norah did not intend to send it to school if it was not needed.

The most recent example of the pattern of dismissal of parental feedback and perspectives appeared in Nicole's current annual IEP meeting. During the meeting, Norah "mentioned Nicole...was having trouble with her "th" sounds at home" (Karlee). In this instance, when the parent expressed her concerns that Nicole was misarticulating /th/ in her words at home, the school-based professionals banded together and quickly dismissed this concern as a home behavioral issue. By this they meant that Nicole intentionally misarticulated the sounds to obtain something from the parent (e.g., attention). Karlee referenced this event in her individual interview: "Whether that's a BEHAVIOR or not...we're not sure yet, but I know, like I said during the meeting during OUR sessions, I hadn't noticed anything."

In dismissing the parent concerns, the team regularly offered the parent strategies to use at home as a substitute for not incorporating the parent's requests for a service or her feedback into the IEP. This is illustrated by Karlee, who explained that she would "provide mom with some strategies if she's noticing that [Nicole's misarticulation of the /th/ sound] more at home...to give her so that...she can work on some things there."

Finally, one of the last threads within this tapestry surrounded Nicole's behavior intervention plan (BIP). Norah expressed discomfort, "as much as I don't like it, Nicole has to have a behavior plan, in case." While Norah did offer input about the behavior concerns and plan, she did not talk about her ideas as if they would be guaranteed to be included in the IEP. "I think, I mean, I added some changes to the IEP and the behavior

plan." Further, while the school-based team discussed collaboration and the development

of the behavior plan for several weeks prior to the meeting, Norah stated that she was

only included in these discussions at the IEP team meeting. "Any problems with behavior

or...anything that just needs added in general, is done at that time."

It is interesting that all school-based members of the IEP team expressed some

form of social currency for Norah, describing her as being involved and present in the

IEP meeting. Due to her consistent attendance over the years, it is likely that Norah had

established some social capital within the team (McNeal, 1999). While this team had an

extensive history of discounting parental concerns, they did provide one example of

acknowledging a parent concern that resulted in a change to the current IEP. Oleda

discussed that she and other primary and non-primary members of the school team had

reported that Nicole was struggling with opening and accessing food items at lunch.

During this discussion, Norah addressed her concern with Nicole's ability to cut food. As

this concern aligned with the goal, Oleda changed her goal to include Norah's concern. "I

actually had to go back, after the meeting, and put that mom was concerned with her

ability to cut food to an appropriate size. And that mom would like that addressed, and

then add in that goal."

Despite Norah's limited success in adding to the OT goal, when she talked about

her input in decision-making and the IEP team's history of potential disagreements, she

frequently made statements that illustrated her state of inequity among the team. The

parent's lack of social and cultural capital reflected an imbalance of power and authority

(Wertsch, 1998) that constrained her ability to influence the development of Nicole's

IEP, and this further highlighted how cultural tools and historical context mediated

decision-making when developing the IEP. For example, when Norah talked about how

she contributed to the decision-making, she said "there again, I don't feel like: too many

decisions are MADE on my part...for the IEP. I think it's more on them." This was

contrasted with how school-based team members defined Norah as an IEP team member

(e.g., involved, intense). This disconnect in perceptions about the parent's role over time

in the decision-making process was further illustrated through a comparison between

Meghan's comments about parent participation and a strong example of Norah's

perspective of the IEP team's past history. Meghan noted that, "Mom is, is ALWAYS

great about coming in." "they're...an intense, very involved family." (Meghan). This

appeared very different from Norah's comments when asked if she could talk about any

disagreements among the team. She responded, "But...overall...this meeting and past

meeting *I could not think of any differences of opinion that caused a change*...Yeah"

(Norah).

"No one wants to go into a meeting with CONFLICT": Avoiding Conflict and Responding to Disagreements

All participants expressed a desire to avoid conflict in the IEP team meeting.

Avoiding conflict and responding to disagreements was evident in several parts of the

IEP process (e.g., when and how the IEP was drafted and team communication).

Participants identified their strong desire to prevent disagreements prior to, during, or

following the IEP team meeting. They mentioned several strategies taken by the school

team that minimized potential disputes in the meeting: preparation (e.g., communication,

creating a draft of the IEP), the use of data (e.g., providing evidence for

recommendations), ensuring parental voice during the meeting (i.e., questions are heard

and answered), and relationships (e.g., leveraging their social capital). These professional strategies mediated the IEP team's actions in order to avoid conflict and ensure smooth and predictable engagement during IEP team meetings.

All school-based members discussed different communication initiatives they employed to avoid potential conflicts or disagreements during IEP preparation. For the school-based team, sending the draft IEP home was a means to inform the parent of all team recommendations in advance "so there's no surprises during the meeting" (Wendy). Additionally, the parent expressed several reasons why she asked for the IEP in advance: reviewing the document to be aware of its content prior to the meeting (i.e., to avoid surprises), making notes, and writing questions or concerns regarding the information in the IEP. Norah shared that receiving the IEP in advance helped reduce tension. Further, she disclosed that receiving the draft the night before the IEP allowed her to be less overwhelmed and anxious during the team meeting. She also mentioned that receiving a lengthy 20-page document during the meeting made her uncomfortable, and she often felt like she was slowing down the meeting while trying to access "the IEP [because it] is filled with numbers and percentages, and it's quite overwhelming." The last reason Norah discussed receiving the document in advance was to ensure its correctness. "And...I think Minnie just forgot to...pull out some of the areas that were prepopulated...And then there was some pronouns in there...from somebody else's IEP. So just so it's, correct" (Norah).

In addition to the initiatives this team took to avoid strife with the family, they also collaborated proactively to prevent conflict among team members associated with the school. In these instances, the team talked about being "on the same page." Oleda mentioned, "I would talk to...other team members and see if they felt the same before the

meeting even happened. So, it's not like a clash. 'Cause that's not professional." Being on

the same page was mentioned by Oleda, Wendy, Karlee, and Minnie during their

interviews, and the team viewed establishing agreement prior to the meeting as essential

to ensuring a "smooth" encounter without "surprises that caught anybody off guard"

(Minnie). Further, Oleda mentioned that "the IEP team at school that's, I think most of

the…decisions...like decreasing her [she implied], we try to prepare that, and all be on the

same page before the meeting? That way, it doesn't happen during the meeting." Karlee

also talked about how the unity of the team allowed them to "have an ease" with the

family and served as an example that the school-based team was "a team as well."

 Another measure used by the school-based team to avoid conflict was to prioritize

parental questions during the IEP meeting. The importance of allowing the parent to ask

questions and have them answered during the meeting was something discussed by all

participants. Minnie stated,

> "I was very happy that [mom] had led...to focus on, go ahead go over this part,
>
> this part. These are my questions. I wanna talk about them so that way then all of
>
> her questions were answered before she had to leave. Which is really
>
> honestly...one of the most important things, 'cause she is her mom."

Further, as previously noted, all members of the team understood this to be the parent's

main form of engagement in the development of the IEP.

 Another effort the team took to avoid confrontations in the IEP team meeting

involved using data. All IEP team members mentioned the importance of providing

progress monitoring data in the development of the IEP. Karlee emphasized that

reviewing student data and how data would be collected helped IEP teams avoid conflict

as it allowed "the parent [to] know...where the data's coming from. And it's not just

something we're pulling out of thin air."

Finally, the SED frequently discussed her efforts to establish relationships with

the family as a means to avoid disputes. The SED explained the importance of

"build[ing] that trust" between the school team and the parents as a means to ensure that

families were "more... responsive" to potential changes in service. In this way, the SED

exercised her cultural capital (e.g., school-based IEP team member), as well as her social

capital (e.g., social network) to establish confidence in the school team's

recommendations. This concept was illustrated by Meghan:

> "I wanna be the garage that you'll take your car to and not think that someone's
>
> gonna take advantage of you. I do think that helps...build...that trust...I want that
>
> relationship that I'm a professional and I...keep your child's best interest in
>
> mind...I just want them...to trust me that I'm making the right decisions for their
>
> child. That I'm...the expert at school to help navigate and give them the options
>
> that I think would be appropriate."

In the following sub-theme, I examined how IEP team members who were experiencing

conflicts responded to those disagreements in an effort to establish team agreement.

"There wasn't that disconnect anymore. We were all in agreement. We were

all on the same page.: Responding to Disagreement. This subtheme is defined as how

the IEP team responds to and resolves disagreements or conflicts in the development of

the IEP (e.g., prior to, during, or following the IEP team meeting). Despite this team's

tireless efforts to avoid disharmony, members of the school-based team acknowledged

that divergence is "not avoidable at all costs" (Oleda). As school-based team members

talked about various experiences with resolving disputes, they mentioned the various

cultural tools utilized across these situations that often occurred between the family and

the school rather than among the professional IEP team members. In addressing these

disagreements, four main avenues/tools to resolution were discussed: having open

discussions (e.g., talking in the meeting), validation (e.g., reassurance and education),

compromise (e.g., education and keeping school recommendations), and administration

(e.g., authority).

When IEP team members talked about the use of open discussions in the meeting,

it was described as "conversations," "we talk," "we discuss," "share their thoughts,"

"voices are heard equally," or "put it out to the parents." Through the various school-

based team members' descriptions of the IEP meeting, they talked about open discussions

in the context of a harmonious meeting, as well as a meeting with conflict. Additionally,

open discussions were regularly based on pre-existing school team recommendations,

which were likely constrained by the meeting format (e.g., turn-taking, following the

document). Minnie stated that despite the fact that she "will propose the goals...a lot of

times we talk about them. Um, I'm very open in my discussions." Another example of

open discussion, as described above, was when Oleda and Norah talked about the OT

goal change.

The parent's perspective on open discussions offered a different view of these

conversations. Norah talked about them as conversations where the team "make[s] some

suggestions or elaborating on what...or having an open discussion on what we can maybe

do at home." However, she immediately corrected herself, saying, "They don't...usually

mention anything like that...You know, that's usually me asking."

Another strategy for responding to dissent included validating others' concerns as a means to diffuse conflict during the IEP meeting. For example, offering some form of acknowledgment to the parents to ensure that they felt validated when they presented their concerns helped reduce or resolve the dispute. Oleda said, "But just giving you know, validating her concerns and then giving her the resources to try...to help and cover her concerns." In connection to validating that a parent's concerns were meaningful, both Oleda and Wendy talked about the need to educate and inform parents. Wendy specifically stated, "It's a very important to...educate on you know, there's a very distinct difference between the school model and the medical model." She further stated that often school professionals and parents did not understand what Wendy described as the ethics behind her decisions. She discussed "kinda advocating for my profession. The ethics behind that. What I, what my ROLE TRULY is. And you know, continuing to educate on that." Oleda shared similar sentiments on the need to educate others and explain her profession. It appeared that in this case, both related service professionals felt that education would lead to an understanding of the decision or recommendation resolving the potential conflict. Within these examples, IEP team members associated with the school continued to leverage their collective professional expertise and authority within the decision-making process, while often working to pacify parents by addressing concerns through "sending home...ideas" rather than incorporating concerns into the final document.

IEP team members also mentioned compromise. Similar to validating parental concerns, compromise was also often associated with a need to educate the family to help them accept the school team member's decision. Specifically, in cases where team

members talked about compromise, it often appeared that the school-based

recommendation would hold rather than making a change to the IEP that incorporated the

ideas of the parent. Wendy illustrated this as she spoke about,

> "recommending reduction in service...A lot of times I'll just educate...and like I
> said, a lot of the times I will compromise if...there's a concern and in most cases, I
> will say it's: reservations of the parents. So I'll be like, okay, well let's
> compromise and, reduce down. See how it goes. If we see a regression, if we see
> an issue arise, we can always revise."

Additionally, Oleda said,

> "when I told her about decreasing the one time a cycle. Well, and then mom
> brought up, you know, if she, if she is regressing or not making progress, can we
> bump her back up? And yes, of course. Not that that was necessarily a
> compromise, but just knowing like that's still an option."

The examples illustrated that while it was called a compromise, it appeared to be more

parent education, reassurance, and the promise that the service can be returned if the

student experiences academic failure.

Finally, IEP team participants discussed that responding to disagreements

sometimes involved seeking support from district administrators. Minnie illustrated this

when she said, "I mean that's why she gets paid the big bucks. She's our special education

director. And just to help, I guess solve- see- um, since she is the, DIRECTOR to see how

SHE would like it written or incorporated."

Meghan also acknowledged her role in conflict resolution, but she specifically

talked about her neutrality in listening to the conflict and making final decisions. "I have,

and at times I will side with, the therapist… And there have been times when, I'll

disagree. I'll side with the parent" (Meghan) In addition, it was noted that the SED often

worked to establish compromise in the face of conflict. Wendy stated, "So I will offer

like a COMPROMISE, and then usually the [SED] is the one that's kind of, HELPING

come up with that compromise." While compromise was mentioned by several school-

based professionals, it was not always clear if compromise equated to deciding to do

what the school wanted in the first place and tracking data to ensure it was a good choice.

These examples provided evidence of how the historical patterns of conflict and

resolution continued to influence how the team approached and attempted to resolve

disagreements.

 "When it comes to these IEPs, I think our role is mostly just, listen and learn":
Identifying Your Place at the Table

All IEP participants discussed their place *"at the table."* This theme incorporated

Nicole's IEP team members' descriptions of their individual responsibilities and

contributions to decision-making within the IEP team and their perceptions of other team

members' roles. Each member of the IEP team provided information on how they viewed

themselves at the IEP table. When asked to discuss their teammates' roles, most members

expressed a lack of knowledge or expertise to fully describe their colleagues' behaviors or

responsibilities to prepare or participate in the IEP team meeting. As team members

described their and others' roles in decision-making within the context of the IEP, four

main identities emerged: contributor, mediator, conductor, and listener. The development

of roles within the IEP team mediated team members' actions and interactions, shaping

how individuals contributed to and participated in the decision-making process.

The role of contributor appeared to be tied to the school-based members' professional discipline. Contributor was a role frequently described by OT, PT, and SLP IEP team members. When related service providers talked about their responsibilities in this process, they all disclosed that they often prepared and participated similarly to other related service support providers. Wendy, when describing how she engaged in the IEP team meeting and the decision-making process, stated, "I mean, really, I'm, I'm there: as a contributor." In the role of contributor, Wendy talked about her responsibility to

> "review my information and then just discuss the team, what I, what she's done, how she's doing...The things that I focus on when I'm discussing my information are the functionality of it, her access to her school environment, and her ability to participate in school."

An additional role that was identified was mediator. In this role, participation was described as "I would just listen to both sides." Meghan, the SED, frequently stated that her role involved sitting back, listening to what IEP team members were discussing, observe all members of the team for confusion or disagreement, and only become involved if necessary. "I guess, is this my, kinda my opinion. 'Cause...I feel like when I go into these meetings...I really try to sit back and just take in what everybody's saying."

The SE teacher described her role as the IEP team facilitator as "the conductor, of like a train." Further, Minnie talked about her leadership responsibilities as a case manager (e.g., schedule the meeting, notify the team, direct the completion of the draft IEP) and educator requirements (e.g., collect data, set goals). Minnie's role was unique in comparison to all other IEP team members. Oleda emphasized the extensive responsibilities for Minnie, "I would not wanna do her job. ((laughs)). God bless her, it's

just a lot."

The final role discussed was Norah's feeling that her role was to "mostly listen." The parent often mentioned professional expertise as the currency that allowed school-based team members to assume a more active role in the development of the IEP. Norah said, I...think our role is mostly just, listen and learn." Further, she stated that the IEP meeting was similar to "a parent-teacher conference. You know, I'm kind of just there to hear what's going on and then ask questions." This misconception regarding the IEP process might have directly impacted how Norah saw her place at the table.

While team members expressed differing levels of challenge explaining or describing the responsibilities of other IEP team members, when they did discuss how they prepared and participated, school-based team members appeared to have extensive insider knowledge. There was an increased level of discomfort when attempting to talk about what an IEP team member outside of their own discipline did to prepare or participate. For example, Wendy did not feel comfortable speculating about what Minnie or Meghan had done to prepare for the IEP team meeting. While team members frequently struggled to discuss preparation, they were all more at ease in talking about behaviors engaged in during the IEP meeting.

In the pre-IEP interview, the parent struggled more than the school-based team members to articulate how she and others prepared and participated in the meeting. Following the IEP team meeting, Norah, with the format and context fresh in her mind, was able to identify more elements within the decision-making process but maintained limited view of the overall describing it as "kinda like a parent-teacher conference. You know, I'm kind of just there to hear what's going on and then ask questions."

"I think like the biggest, decision which really didn't seem like a decision, even though it IS. Um:, keeping her in that life skills room": Contributing to Decisions at the IEP Meeting. This final subtheme is defined as how individual IEP team members participated within their roles in the IEP meeting, as well as when, where, and how decisions occurred. This sub-theme highlighted how predetermination, shaped by the roles and perceptions of school-based IEP team members, constrained the influence parents had in the decision-making process reducing the IEP team meeting to a mere formality and emerged as participants talked about how decisions were made in the IEP team meeting. Based on my analysis, all participants revealed that decisions for the development of the IEP were often predetermined (e.g., the recommendations made by school-based team members equated to decisions made outside of the IEP team meeting and without the input of the parents). Further, they described the meeting as the mechanism used to review these decisions.

In considering predetermination and team member recommendations, viewed through their roles as contributors, mediators, and conductors, school-based team members identified that

> "we [school-based IEP team members] usually ALL agree with one another. We don't...come into the meeting in a disagreement. We try to all make sure we're all on the same page ((slight laughter in voice)) before we go into the meeting." (Oleda)

When school-based team members discussed the different types of decisions made outside of the IEP team meeting, decisions included "the goals," time (i.e., "[related service professionals] time...calculated [as]...time of special education" and the

"percentage of time…spen[t in]...general education" classrooms), as well as student

placement (e.g., life skills classroom). For example, Minnie (i.e., conductor) stated that

the decision for the amount of time students spent in the general education setting was

"written and proposed ahead of time." Further, Karlee illustrated team member's roles as

contributors to predetermination by stating that, "We [school-based team members] all

sort of—kind of agreed...beforehand on what was being done." As all school-based team

members discussed engaging in the practice of predetermination, they illustrated the roles

in decision-making roles (e.g., contributor/ mediator [school-based], or listener [parent])

assumed during the IEP. These findings permeated all of the above themes, and strongly

illustrated how team members (i.e., agents) acted in decision-making within the team

meeting and how actions were mediated through this team's decision-making history.

     First, all IEP team members held a belief that the roles of school-based team

members (e.g., mediator, contributor, conductor) held more weight in the decision-

making process (e.g., recommendations equated to decisions) both prior to and within the

IEP team meeting. This belief was emphasized by Norah who said, "everybody just

comes [to the meeting] prepared in... this is what we realistically think we could do for

Nicole." Further, she clarified these roles as she said she did not "remember a WHOLE

lot of decisions that were made [at the meeting] that weren't just already spelled out in the

IEP." Additionally, as Norah identified school-based team member roles within the IEP

meeting, she also defined her role (e.g., listener), "we listen 'cause I feel like they know

her best about, that's their area of expertise."

     When further examining how team member roles were defined within the cultural

practices of this IEP team, school-based members talked about how they predetermined

decisions during preparation, and they further described the IEP meeting as a place to just

"go over" their information, recommendations, service delivery, and student placement.

For example, school-based IEP team members, as active decision-makers, stated that the

meeting was a place to "put that out [recommendations/decisions] to the parent" (Karlee),

and when describing the parent role during the meeting, Minnie identified her

expectations of the parent's role in the meeting stating, "after each different person talks,

I always make sure to pause and ask the parents if they have any questions." Participants'

stories illustrated that the parent's role as listener was one not likely to impact "the actual

development" of the final IEP. This is clarified by Norah,

> "I don't feel like too many decisions are MADE on my part...for the IEP. I think
>
> it's more on THEM. This is more, I think of a document prepared by them n'
>
> displayed out for US...I feel like, it doesn't ((sigh)), I don't wanna say it doesn't
>
> APPLY to me ((higher pitch)). Um, but I think...the bigger ROLE is
>
> on...everybody who's writing it ((laugh))."

Conclusion

In the following chapter, I discuss the findings of my research and connected

these findings to the relevant literature. Additionally, I address potential implications for

IEP teams that support students with ESN and provided practical solutions for IEP teams

to improve their decision-making practice. Lastly, I describe the limitations of this study

and suggested ideas for further research.

Chapter 5

Discussion

The purpose of this qualitative interview study was to gain a deeper understanding of the decision-making process of individualized education program (IEP) teams when preparing an IEP for a student with extensive support needs (ESN). Through in-depth, semi-structured interviews, I examined how individual IEP team members situated within a fringe rural district conceptualized the decision-making process when developing an annual IEP. This study revealed that unspoken norms and unwritten policies, along with individual IEP team members' assumptions about the construct of disability, heavily mediated IEP team members' actions in the decision-making process. These hidden practices (i.e., cultural tools) led to school professionals often predetermining decisions before the IEP team meeting, which limited authentic collaboration between school-based team members and the family. This resulted in an imbalance of power that heavily favored agents of the school district while marginalizing the parents as members of the IEP team.

Overview

In Chapter 4, I examined my findings utilizing a sociocultural lens focusing on Wertsch's (1998) properties of mediated action. Human action, as mediated action, acknowledges the complex relationships that exist between individuals, their actions, and the setting or background (e.g., historical, cultural, or institutional contexts) in which the actions occur. Therefore, the primary unit of analysis for this study considered the '*agent*' acting with mediational means (Wertsch, 1998).

Findings from this study described how IEP team members conceptualized

decision-making by exploring the dynamic interaction between IEP team members (i.e.,

agents), within a rural district and school, and their use of mediational means when

preparing for and participating in the development of an annual IEP for a student with

ESN. Mediational means included but were not limited to tools and artifacts (e.g., draft

IEP, pre-meeting correspondence, evaluation or data collection, official district policies),

cognitive tools (e.g., team member assumptions regarding disability), practices and

processes (e.g., unspoken norms, unwritten rules; Wertsch, 1998). Additionally, their

experiences and backgrounds (i.e., individual and group) demonstrated how mediated

actions developed, were appropriated, internalized, and mastered over time (Wertsch,

1998).

In addressing the first research question, *How do IEP team members*

conceptualize their responsibilities within their IEP team role in the decision-making

process when developing an IEP for a student with ESN?, decision-making practices

were influenced by the dynamic confluence of various factors. As noted above, these

factors included team member experiences (e.g., team history, professional knowledge),

team member assumptions regarding the construct of disability, and unspoken norms and

unwritten practices (Wertsch, 1998) that shaped how they viewed and engaged in

decision-making responsibilities.

Findings also revealed that these unacknowledged practices and norms often

deviated from both district policy and legislation and were heavily influenced by the

team's understandings, perceptions, and implicit assumptions concerning the concept of

disability. Moreover, team members' assumptions regarding disability played a critical

role in influencing their misinterpretation of legal guidance that then became part of the

unspoken and unwritten practices associated with the development of the IEP.

Furthermore, their assumptions shaped their view of special education as a physical

location rather than a service. The data analysis revealed the dynamic and reciprocal

relationship between hidden policies and how these shaped the experiences and practices

of IEP team members. This process involved the internalization of practices, and their

mastery of cultural tools, which influenced the decision-making process and subsequently

how the team worked to develop the IEP.

Findings related to the second research question, *How do IEP team members

conceptualize their own and others' contributions to the decision-making process when

developing an IEP for a student with ESN?,* revealed another dynamic and reciprocal

relationship: that this team's history (i.e., developmental path) shaped the team's strong

preference to avoid conflict. This history influenced their preparation and participation in

the development of the IEP. The conflict avoidance strategies team members described

(i.e., mediational means) were explained through participant stories regarding how they

approached decision-making with the family, as the "school-based IEP team", and within

different school professionals' respective disciplines.

Finally, addressing both research questions, participants discussed how they

conceptualized their unique roles in the decision-making process. Findings illuminated

how mediational means shaped and influenced both responsibility and contribution to

decision-making within participant identified roles. Differences were found for school-

based IEP team members who assumed leading and active roles (e.g., mediator,

contributor, conductor) in decision-making and development of the IEP versus the parent

who identified her role as a "listener." In the sections below, I explore how these findings

deviated from, aligned with, or extended existing research on IEP team decision-making

for teams supporting students with ESN.

Unspoken Practices and Legal Procedures in IEP Decision Making: A Team's

Perspective

Existing research has found significant variations in how educational personnel

interpret and apply the legal guidance from the Individuals with Disabilities Education

Act (IDEA) that can potentially affect team decision-making (Ryndak et al., 2008/2009).

Bacon and Causton-Theoharis (2013), for example, found stark contrasts between formal

legislative policies and IEP team practice at the state and local levels. The team

responsible for developing Nicole's annual IEP also engaged in practices and procedures

that deviated from the requirements set by IDEA that affected the manner in which they

made IEP-related decisions. Their unspoken practices also contradicted the written

guidance within district policies, as the outward-facing materials were written to comply

with federal legislation. These deviations in practice influenced how team members made

IEP decisions.

All Does Not Mean All

Prior research regarding parent participation has found that school-based

procedures (i.e., unspoken norms) frequently hinder parents' equitable participation in

IEP development and decision-making (e.g., Bacon & Causton-Theoharis, 2013; Fish,

2006; Love et al., 2017). Findings from the current study align with these prior

investigations and provide additional details on how the decision-making process in IEP

teams may exclude input from families. This exclusion occurred in several ways: school-

based team members' use of the draft IEP and pre-meeting communications between

school-based team members to establish district decisions (i.e., recommendations),

discounting or dismissing family input, limiting families' access to IEP documents, and

completing the IEP prior to the team meeting.

Calling 'All' IEP Team Members

The unspoken norms and unwritten policies of the school surrounding time for

review of a draft IEP, access to pre-IEP meeting collaborations between school-based

members, and the school-based IEP writing software program influenced who and how

members of Nicole's team participated in decision-making and the development of the

IEP. The school-based members of Nicole's IEP team engaged in team correspondence

that occurred prior to the meeting that resulted in pre-meeting decisions regarding goals,

services (e.g., retention, reduction, dismissal from related services), and student

placement. This process resulted in the exclusion of the parent in important IEP

decisions. The school-based team members reported that they had a substantial amount of

time prior to the IEP meeting to prepare. They felt that their communications with each

other and access to the draft IEP document were determining factors in their ability to

effectively participate as decision-making members of the team. They described the time

before the meeting as an opportunity for 'all IEP team members' (i.e., school-based IEP

members) to access and review the document (e.g., view student present levels of

performance, evaluation reports) while providing additional chances for them to consult

informally and formally, identify and share academic and functional concerns,

collaborate on goal development, and establish their recommendations.

Activities that take place among team members before the IEP also have a

significant influence on the decision-making within the IEP meeting (e.g., Love et al.,

2017; Ruppar & Gaffney, 2011). Love et al. (2017) examined parent perceptions of IEP team decision-making and found that school IEP team members engaging in pre-meeting collaborations often resulted in the exclusion of parents from the decision-making process when developing the IEP. Findings from the current study found that the parent was excluded from these activities (e.g., pre-IEP correspondence). The school-based members talked about consulting with all IEP team members to develop goals, identify areas of concern, or establish decisions to increase, decrease, or dismiss services. However, there was a notable oversight in recognizing parents, who are legal members of the IEP team, as collaborators in these processes.

The way that IEP team members view each other's areas of expertise also influences how decisions are made (e.g., Childre & Chambers, 2005; Giangreco, 1990; Macleod et al., 2017). Macleod et al. (2017) found that parents identified themselves as experts due to their significant time investment in their children's care. If other IEP team members do not see parents as experts, however, they may privilege other team members' role in decision-making above that of parents. This was illustrated in my study, where this criterion of expertise, based on time spent with the student, was not applied to parents as the primary caregivers. Instead, school-based members justified the inclusion of non-primary school staff (e.g., paraprofessionals who had extensive interactions with or spent time with the student) in pre-meeting discussions because of their belief that these professionals' thoughts, opinions, and concerns were valuable since they spent extensive time with the student.

It's Just a Draft: Predetermination of a Not-So Individualized Education Program

Creating a fully formed draft ahead of an IEP meeting can create barriers to the

full participation of each member in the IEP decision-making process (e.g., Mueller &

Buckley, 2014b; Ruppar & Gaffney, 2011). The findings of this study showed that this

discrepancy from the intent of IDEA regulations influenced who participated in team

decisions. The unspoken practice of creating a draft IEP influenced how this team

engaged in decision-making in two ways. First, the team limited parental access to the

draft IEP to less than 24 hours prior to the team meeting. Secondly, the IEP document

that was sent home to the parent was not a genuine draft but, in effect, a completed

document.

Although IDEA does not prohibit public agencies from creating a draft IEP prior

to the team meeting, the Department of Education ([DOE]; 2006) discouraged this

practice if, as a procedure, it limited the parent's ability to collaborate and provide input

effectively (71 Fed. Reg. 46678). Further, legal guidance clarified that school

professionals choosing to draft the IEP should send the document to parents before the

meeting to allow them sufficient time to review school-team recommendations "to

engage in full discussion of the proposals" (71 Fed. Reg. 46678). Moreover, it was

expressly stated that the presentation of a completed IEP (i.e., making IEP decisions

outside of the team meeting) was prohibited (71 Fed. Reg. 46678).

Despite the legal guidance from the DOE, in this investigation, school-based team

members emphasized that they did not regularly send a draft IEP home for parent review

(i.e., only occurred upon parental request), and none appeared aware of DOE

recommendations of the school team's responsibility for sending the document home in

advance of the meeting. However, due to Norah's past experiences with her daughter's

IEP (e.g., frustrations with receiving the full IEP for review at the onset of the meeting),

she advocated for the school to send the document home in advance. In addition, aligning

with the intention of legislative guidance, Norah stated that parents should receive the

document "days" in advance in order to adequately prepare for IEP team meetings, but

unfortunately, the school's interpretation of this practice resulted in the completed IEP

being sent to parents the night before the meeting.

 As noted above, the school-based team members acknowledged that time to work

on the IEP ahead of the meeting was a necessary feature for them to fully engage in

decision-making. They failed to recognize that while they were afforded weeks for

preparation, the parents were given the document only the evening prior to the meeting.

Based on the school team members' criteria for involvement in decision-making (e.g.,

adequate time to prepare), sending the IEP home the night before the meeting would not

have provided the parents adequate time to engage in the development of this document.

 Furthermore, procedural errors on the part of Nicole's IEP team created an

inequitable experience for her parents as IEP team members. Despite legal guidance

prohibiting teams from presenting a finalized document, school professionals in this

study stated that in addition to the many parts of the document that might typically be

completed (e.g., school-based staff members' input on students' present levels of

performance and tentative goals), Nicole's completed IEP also contained a finalized

service schedule (e.g., amount of time for all related services), identification of student

placement (i.e., life skills classroom), the calculation for the percentage of time the

student would spend in the general education classroom (e.g., 16% of the day), and a

completed statement for justification for removal from the least restrictive environment

(LRE), as well as many other items that should not be present in a draft IEP.

The IRIS Center (2017) published a guiding document for practitioners that stated the predetermination of the student programs, services, or placement prevented parental input and involvement in the decision-making process. Furthermore, the article cautioned that making decisions in isolation from the IEP team often led to the development of an education program that might not fully address the student's needs. Additionally, Giangreco (2001) found that procedural errors frequently resulted in substantive violations and the development of IEPs that catered more to the requirements of the school or district (e.g., available programs and resources) and failed to address student's individualized needs. He emphasized that decision-making frameworks that allowed the development of the IEP without the input of all team members negatively affected the team's ability to engage in reflective practices to develop a comprehensive plan for services, programs, and placement for a student. Nicole's IEP team's predetermination of program, supports, and services interfered with interactive or authentic forms of reflective, collaborative decision-making during the IEP meeting. Instead, as the IEP document was completed in its entirety in advance without parental input, the team meeting was a review-like session of what the school-based team members had already determined would be Nicole's annual education program, and this was illustrated by school professionals (e.g., "we all sort of- kind of agreed...beforehand on what was being done," "just being able to come together and provide that information...for the parents").

How Assumptions Influenced Placement Decisions: Is Special Education a Service or a Place?

The power of IEP team members' individual assumptions about the nature of disability and their thoughts on what students require to be successful can influence the

decisions made in developing a student's IEP (e.g., Agran et al., 2020; Jackson et al.,

2008/2009; Jorgensen et al., 2007; Ryndak et al., 2008/2009). In the current study, IEP

team members' assumptions about the construct of disability (e.g., medical deficit model,

academic expectations, perceptions of intellect, and prognosis for remediation)

influenced their decision-making processes, and through their unspoken norms (e.g., pre-

IEP consultation between school-based members), affected the team's decision for

educational placement (i.e., life skills classroom) and the provision of related services.

Blackwell and Rossetti (2014) found that teachers often failed to show meaningful

connections between formal assessment practices and IEP development. Similarly, the

findings from my study showed that team members' assumptions regarding disability

greatly influenced how school-based team members identified criteria to support service

provision and goal development decisions.

Jorgensen et al. (2007) wrote that educational professionals who fail to presume

competence (e.g., see students as capable and design supports and services based on that

assumption) were more likely to underestimate the child's abilities and thereby prevent

them from equitable access to learning opportunities (e.g., academics, social experiences,

development of communication systems) afforded to their peers without disabilities. The

power of team members' personal lenses on disability was evident among Nicole's IEP

team members (See Figure 1).

IDEA (2004) defines special education as instruction that is specially designed to

meet the individual and unique needs of a student with a disability that must be provided

at no cost to the families. Further, Skrtic et al. (1996) stated that special education should

not be perceived as a place but instead viewed as identified supports and services that are

Figure 1

Contextual Influences on IEP Team Decision-Making
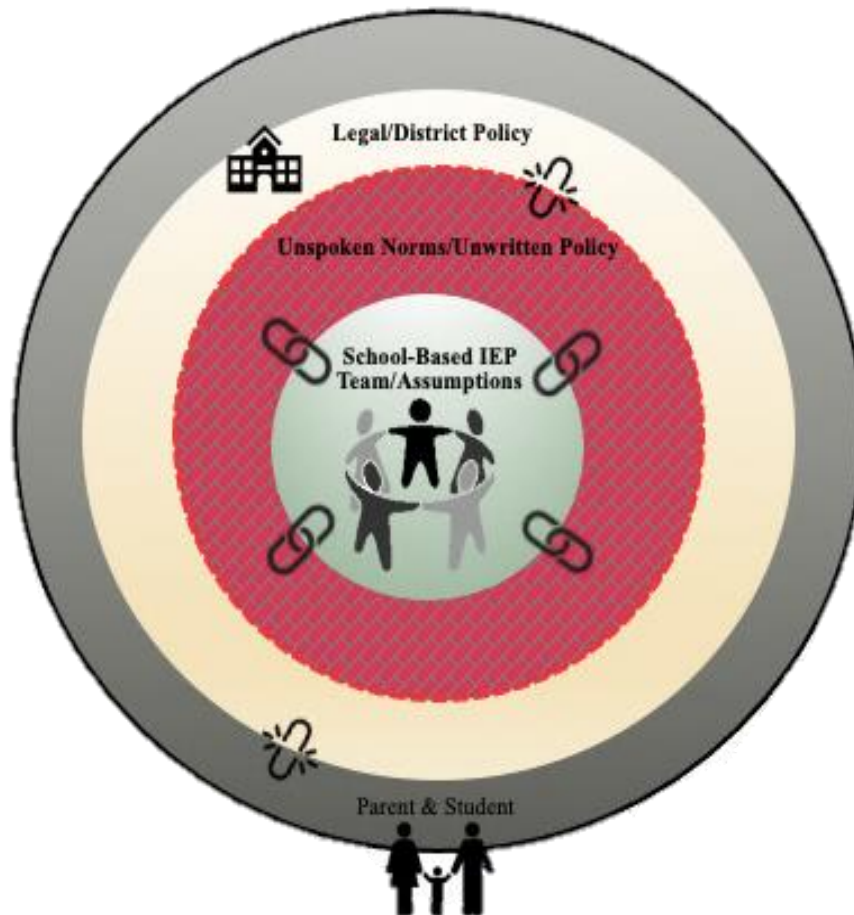
Note. This figure illustrates the contextual influences on IEP team decision-making. At the center of the model (i.e., green circle) are the school-based IEP team members and their assumptions regarding disability. The second circle (i.e., red brick) represents the hidden practices/mediational means that shape team practice, strongly linked to the center circle (i.e., unbroken links). The third circle (i.e., light beige) represents formal legal guidance and district policies that provide a broader historical and institutional context and are disconnected from the inner circles (i.e., represented by a broken link). The final outside circle (i.e., grey), where the parents and the student are positioned on the periphery, signifies their marginalization within the decision-making process (i.e., represented by a broken link).

not tied to a physical location. In contrast, some of Nicole's IEP team members referred

to the importance of creating an educational plan with the "just right challenge." They

spoke about Nicole's need for special education support in terms of location, labels, and

her levels of functioning. For example, this district had an unwritten policy that special

education services and supports (academic and behavior supports) were only provided at

specific schools and only within certain types of classrooms (e.g., life skills) that

supported students on the basis of special education eligibility labels (i.e., students with

ESN). School-based staff described that students were assigned to schools and

classrooms based on perceived levels of functioning (e.g., "there's a HUGE deficit in

their skills"). They perceived that these unwritten policies would result in a plan with the

"just right challenge" for Nicole.

Individual team member assumptions about disability and the district's unwritten

policies related to student placement played out in additional ways among Nicole's IEP

team members. School-based team members identified additional practices that guided

their decisions for when and how students accessed LRE, including students being

required to prove readiness to move to a lesser restrictive setting (e.g., "just making sure

that the kiddos have as much access to a lesser restrictive environment as they can handle

and that they are ready and prepared for"). The practice of LRE trials (i.e., granting a

student access to lesser restrictive settings in slow, monitored increments) was initiated

by school team members (e.g., special education teachers) and was based on their

assumption that students were '*ready*' to be included (i.e., approaching grade-level).

These unspoken practices were counter to the intention of IDEA (e.g., LRE guidance; 34

CFR § 300.114) and contradicted district written procedures (e.g., consider regular

education first). Consequently, using these forms of criteria (e.g., just right challenge, LRE access trials), the IEP teams engaged in choices that were not aligned with district and federal legislation and further failed to consider Nicole's individualized needs, which was illustrated by the predetermination of Nicole's placement, as well as her goals and services.

Hiding in Plain Sight: Uncovering How Conflict Avoidance Masked Team Disagreement

Navigating conflict or disagreement during IEP meetings is an inherent aspect of the process (Mueller & Buckley, 2014b), and team members lacking the skills or know-how to address differences of opinion can hinder the decision-making process in formulating IEPs for students with ESN (e.g., Giangreco, 1990; Mueller & Buckley, 2014b). For instance, team members may resort to actions that either inadvertently or purposefully stifle opposing viewpoints or deter discussions on divergent thoughts or opinions (e.g., Love et al., 2017; Ruppar & Gaffney, 2011). Nicole's team members' preference to avoid conflict drove many of the practices that influenced decision-making.

Nicole's IEP team's aversion to conflict significantly influenced how its members prepared for and engaged in decision-making during the development of her annual IEP and was observed in two primary areas: (a) between the school and family and (b) among the school-based IEP team members. Despite efforts employed by Nicole's IEP team to maintain conflict-free meetings, strategies utilized often masked dissonance rather than resolving it, resulting in disagreements that were often hiding in plain sight.

Masking Differences: Home-to-School Conflict Avoidance

IEP teams may employ a variety of strategies to minimize or mask differences

between school-based members and families. Mitigation strategies identified to diffuse

conflict between school and home by Nicole's IEP team occurred primarily during the

pre-meeting preparation but were also linked to specific parental participation behaviors

during the IEP team meeting. Two 'priming' strategies (i.e., anticipatory supports) were

used to prevent potential disagreements: (a) sending the completed IEP home before the

meeting and (b) initiating school-to-home communication to forecast upcoming changes

(e.g., reduction or removal of services). Further, all IEP team members (i.e., school-based

and the family) identified parental participation (e.g., asking questions) during the

meeting as an effective way to minimize or prevent team conflict.

　　　As noted above, the school-based team sent the IEP document home the night

before the meeting, and this was identified as a conflict-avoiding strategy surrounding the

parent's preparation and participation. All team members saw this dissonance-reduction

step as essential for ensuring that parents were informed about both the positive and

negative aspects of their child's educational plan that would be discussed in the IEP; it

was intended to prevent any surprises during the meeting. In addition, the team believed

that by providing the document the night before, Nicole's family could prepare for the

meeting by developing questions based on the document's contents.

　　　In addition to sending the IEP in advance of the meeting, school team members

discussed how they used priming or forecasting to reduce potential conflicts at team

meetings. This occurred in one of two ways: through phone conversations home or by

notifying the parent at a current IEP of anticipated service reductions that would be

discussed at the subsequent team meeting. For instance, school members mentioned the

practice of calling Norah in advance of the meeting if they suspected that service

reductions might cause parental distress. Furthermore, related service professionals

discussed how they had warned Norah at Nicole's previous IEP (i.e., providing the

parents with a year to adjust) that occupational therapy would be reduced at the following

annual team meeting, which did occur.

This practice was seen by school-based team members as giving parents time to

process decisions, thus reducing the likelihood of disagreement during the meeting.

Additionally, it was noted that these strategies of priming or forecasting also influenced

how new related service members were advised to approach decisions regarding the

provision of supports. They were instructed not to propose changes in initial meetings but

to maintain existing services (i.e., status quo) and consider reductions in subsequent IEPs

(i.e., forecasting), waiting at least a year before suggesting changes.

Finally, members of the school-based team viewed enabling parents to express

their opinions and pose questions (e.g., regarding home-based activities) as a strategy to

prevent conflicts. They saw this approach as a way to validate parental concerns during

the IEP meeting, which they believed could help reduce disagreements. Moreover, all

team members considered this strategy a priority (e.g., "one of the most important

things"). They viewed it as Norah's primary mode of participation in the IEP meeting.

However, school team members sometimes struggled to distinguish between Norah

asking questions for clarity on an already made decision and Norah's questions resulting

in actual decision-making and changes or adjustments to the draft IEP. They referred to

this parental activity (e.g., questioning) as contributing to the development of Nicole's

document. In contrast, the parent did not share this perception that her questions led to

changes in school-based team decisions in the IEP (e.g., "I don't feel like too many

decisions are MADE on my part...for the IEP").

In summary, prior research has highlighted parental exclusion from decision-making during the IEP team meeting as a significant concern for parents (Bacon & Causton-Theoharis, 2013; Fish, 2006; Lusa, 2008; Mueller & Buckley, 2014b; Ruppar & Gaffney, 2011; Tucker & Schwartz, 2013), potentially revealing why Nicole's IEP team's conflicts may have remained persistent during meetings. In their effort to avoid disagreement, the strategies school-based team members utilized in developing Nicole's IEP created an imbalance of power, where the school maintained authority in the decision-making process, and therefore, conflicts (e.g., the disconnection between family concerns and school-based decisions) persisted because parental concerns were only partially addressed or more frequently left unresolved.

A Good Working Relationship: Dissonance Reduction Among School Professionals

Prior research, such as Ruppar and Gaffney's (2011) examination of an IEP team for a student with ESN, has found that school-based team members' perception of their own professional identities may interfere with the full participation of all team members in decision-making. The current study's findings suggest that this group of team members may have believed that asking questions about a decision reached by another professional would be seen as questioning that individual's professional expertise. The understanding that school-based team members would "have each other's backs" while "learn[ing] to respect [each] other" influenced how this team prepared for and made decisions for Nicole's IEP. Observation of how Nicole's IEP team worked to minimize differences of opinion during the IEP meeting showed multiple examples of their efforts to avoid disagreement among school-based team members (e.g., respect for individual

disciplines). These conflict-avoidance strategies occurred in two ways: (a) ensuring that all school-based team members, including the SED, were on the same page with school decisions and capable of justifying their recommendations (e.g., presenting a united front during the meeting) and (b) promoting that individual team members were accountable/responsible for their discipline-related domains.

'On the Same Page': **Impact of a United Front on Decision-Making.** In this study, which aligned with the findings of Ruppar and Gaffney (2011), school-based IEP team members expressed that conflict among school professionals during IEP team meetings was considered unprofessional behavior, and like the participants in the aforementioned study, Nicole's IEP team also aimed to uphold "consistent professional identities" (p. 19). Furthermore, these team members expressed that conflict among school-based professionals during the IEP meeting undermined trust and created undue stress for the family. Therefore, these school team members took significant measures to avoid disagreements and present a united front (e.g., all school-team members *'on the same page'*) during the IEP team meeting, which impacted when and how school-based professionals made decisions and were often a driving force in the predetermination of Nicole's program.

Conflict avoidance strategies among school-based team members included aligning decisions through formal methods like quarterly scheduled meetings and informal collaboration beforehand, such as in treatment sessions or reviewing draft IEP inputs to minimize potential disagreements during IEP meetings. In addition, school-based team members spoke about an unwritten norm that existed and guided their participation during IEP team meetings. They described practices in which school-based

team members spoke up in meetings in support of each other (i.e., "chiming in" to back up a fellow school team member's recommendation) to reassure parents that proposed courses of action were best for students' progress, especially if parents questioned or were likely to disagree with school recommendations.

All school-based team members expressed discomfort with conflict during IEP team meetings. They also emphasized the importance of avoiding surprises, such as sudden disagreements (e.g., "blindsided"), within the IEP process. This was highlighted by Meghan's (SED) request for school-based team members to communicate decisions regarding proposed changes in services or support in advance of the team meeting, especially if school members perceived that those recommendations might result in conflict.

Given Meghan's leadership and authority role in the district, these unwritten, top-down directives required school-based team members to inform the SED of service reductions or changes to the IEP in order to avoid conflict and maintain professionalism in front of families. These strategies to avoid disagreement likely contributed to this team's practice of completing the IEP before the meeting. Additionally, these practices created inequity for the parents in the development of Nicole's IEP, as the focus on conflict avoidance left little opportunity for the team to consider, address, or incorporate Norah's concerns into the document.

Avoiding Conflict and the Impact of Staying in Your Lane. Siloed decision-making practices can influence how the IEP team develops students' educational programs and may narrow the types of goals that are developed. In this study, school-based team members supporting Nicole discussed working within their respective

disciplines when contributing to decisions in IEP development. This practice narrowed

the scope of goals they recommended and affected how school-based team members

viewed and responded to parental concerns raised during the meeting. This finding

aligned with Ruppar and Gaffney (2011), who observed that school-based IEP team

members avoided expressing divergent opinions during meetings.

All school professionals in the current study emphasized that they would not

challenge or question a colleague's professional judgment or decision-making during an

IEP team meeting. Extending and aligning with Giangreco's (1990) research, all of

Nicole's school-based IEP team members identified that their "good working

relationship" was a product of respect for their contributions to the development of

Nicole's IEP, including their ability to determine goals and amount of services (e.g.,

reduction or exiting of services) related to their specific areas of expertise. This included

education professionals (i.e., special education teachers) and related service providers

(i.e., OT, PT, SLP). The school providers respected the autonomy and expertise of other

professional colleagues and extended trust that each team member had the best interest of

the child in mind when making recommendations.

Additionally, the independent decision-making practices of related service

professionals resulted in a narrowed focus, constraining what some school-based team

members deemed as educationally relevant goals. For related service providers, this

professional lens restricted their focus to goal areas identified to support functional skills

for accessing Nicole's educational setting (e.g., navigating the hallways and cafeteria).

Further, in some cases, related service professionals rejected parental concerns to broaden

goals to include skills relevant to Nicole's future settings and outcomes. For example,

school-based professionals consistently dismissed Norah's persistent advocacy for

addressing Nicole's unilateral muscle weakness, aligning with the family's desire to teach

their daughter to ride a bike, because they felt this parent concern did not align with their

definition of the educational model of support (e.g., what was appropriate for school-

based interventions). Despite Norah's efforts to seek support for this goal during IEP

meetings over three years, the related service providers categorized this goal as

therapeutic (i.e., rehab/medical) rather than appropriate for the educational model of

support. This approach not only disregarded parental concerns but also potentially

overlooked the broader purpose of education outlined in IDEA.

For instance, Congress stipulated that the law aimed "to ensure that all children

with disabilities have available to them a free appropriate public education emphasizing

special education and related services designed to meet their unique needs and prepare

them for further education, employment, and independent living" (20 U.S.C.

§1400(d)(1)(A)(b)). Related service professionals might have considered addressing

Nicole's unique needs and engaged in more equitable discussions with the family

regarding their concerns. Interestingly, these school-based team members recognized the

value of teaching Nicole to ride an adapted bike at school (i.e., tricycle), use a treadmill,

and exercise on a recumbent bike. However, the team did not explore how teaching

Nicole to ride a two-wheel bike could align with fundamental aspects of IDEA,

encouraging educational access to build upon a child's future and promoting increased

self-determination and independence.

Knowing Your Place at the Table: The Impact of Role Construction on IEP

Development

IEP team members' perceptions of their own and other team members' roles can influence how decisions in team meetings are made. Prior research has explored the behaviors adopted by parents during their involvement in the IEP team process, decision-making, and participation in IEP team meetings (Miller et al., 2019; Mueller & Buckley, 2014a; Stoner & Angell, 2006). Stoner and Angell (2006) described parent roles in these meetings as including a broad range of actions and attitudes that occurred during their interactions with education professionals. The authors further noted that the roles of parents developed and were adapted in relation to the family's experiences with educational professionals.

All IEP team members in the current study identified roles that influenced how this team prepared for and participated in the development of Nicole's IEP. They defined their positions and outlined their responsibilities and contributions to decision-making during the annual IEP through four distinct roles. These roles were identified as the conductor (e.g., leadership, facilitator), mediator (e.g., dispute resolution), contributor (e.g., provided information and recommendations), and listener (e.g., receiver).

It is important to note that Nicole's IEP team often constructed their roles within the context of their "place at the table" when developing Nicole's annual IEP. For this team, their definition or perception of their role appeared to influence how they prepared for and participated in the development of the IEP. Some roles seemed to restrict engagement and participation (i.e., listener), while others afforded power and authority to a team member in the decision-making process (i.e., conductor, mediator, contributor). All IEP team members' construction of their roles seemed linked to how they learned to participate in the IEP. The described learning by "showing up" and "jumping right in."

This 'baptism by fire' appeared to forge the different identities, and as team members constructed what their parts were in the development of the IEP, they appeared to adhere strictly to their specific roles. This potentially hindered their willingness to take on other responsibilities or make different contributions in the decision-making process.

Nicole's Role as a Student: No Place at the Table

Hughes et al. (2013) found that students with more extensive support needs reported limited participation in the development of their IEPs. Additionally, Agran and Hughes (2008) stated that students with disabilities were rarely prepared to assume leadership roles within the context of the IEP team meeting (e.g., facilitating). For Nicole's IEP, it was reported that she had never prepared for or participated in the development of her education program. In decision-making, Nicole did not have a place at the table. While it was noted that Minnie informally asked Nicole if she was aware of the upcoming IEP, there was no evidence suggesting that the student's input was incorporated into her education program.

Limitations

This qualitative interview study examined how one IEP team supporting a student with ESN conceptualized decision-making within the context of an annual team meeting. In addressing the limitations of this study, I acknowledge that this investigation is not generalizable to other IEP teams supporting students with ESN. While readers may relate to and/or associate with the findings (i.e., naturalistic generalization; Merriam, 1998), the themes found in this research may not be representative of other IEP teams supporting students with ESN.

Second, the sample size of participants in this study was small, and all

participants were similar in terms of race (i.e., white), gender (i.e., female), and

socioeconomic status (i.e., middle class). Also, the school in this study represented a rural

school district with unique characteristics in terms of resources, community, population,

and student body. Additionally, not all IEP team members were involved in this

investigation (i.e., general education teacher, father of the child), and their input could

have provided a deeper understanding of the decision-making process within this IEP

team.

I must also acknowledge that I have a strong bias towards equitable and inclusive

educational access for all students with disabilities. My experiences as a parent of a child

with a disability, an educator, and a doctoral student may have affected the way I

interpreted these data. Therefore, my bias, assumptions, and preconceptions of the IEP

process could have influenced my analysis.

While many of the findings from this study were supported by a sociocultural

framework, certain phenomena could not be fully examined through this lens. For

instance, while complex interactions and practices within the IEP team's decision-making

process were highlighted, critical aspects of power and authority resulting in educational

inequities for Norah and her daughter were not fully explored. De Valenzuela et al.

(2000) argued that a sociocultural lens, which focuses on how agents engage with

mediational means, cannot fully address deeper elements like politics, power, inequity,

and marginalization. They suggested that a critical theory approach, potentially paired

with other critical approaches (i.e., social construction of disability), would better

uncover the inequity and power structures evident in this study's findings. Further

investigation could provide valuable insights into these critical elements.

Implications

Understanding how IEP teams collaborate to develop IEPs for students with ESN is crucial. Currently, existing literature has not sufficiently captured the diverse perspectives and unique experiences of all individuals who participate in the IEP team. This study's findings highlighted numerous team practices that inhibited collaborative and reflective decision-making between team members when developing an annual IEP.

Findings revealed the complexities and challenges that influenced decision-making for an IEP team supporting a student with ESN. To address these issues, I have compiled recommendations aimed at improving practice for (a) in-service IEP team members (i.e., school professionals, families, and students) and novice service providers (b) faculty in teacher preparation programs and (c) pre-service professionals across disciplines (e.g., related service providers, educators).

In-Service IEP Team Members: School, Family, and Student

Findings from this study highlighted the need for targeted strategies to enhance the effectiveness of IEP teams supporting students with ESN. For in-service providers, it is crucial to ensure that school professionals and families have access to meaningful professional development and continuous learning to reinforce best practices in IEP development. Furthermore, it is well-documented that families often lack training and support in navigating the IEP process (e.g., Bacon & Causton-Theoharis, 2013; Fish, 2006; Mueller & Buckley, 2014a/2014b). Recommendations include: (a) professional development for all IEP team members (e.g., seminars, annual training), (b) improving IEP team communication, (c) involving the student in the IEP process prior to the age of transition, and (d) developing communities of practice for in-service teachers to support

their first years in the field (Billingsley, 2004).

Ideas for Professional Development

First, in this study, the team used the IEP as an agenda for the meeting (i.e., followed the flow of the document). Research has identified that this form of linear decision-making often constrains collaborative and reflective decision-making (e.g., Giangreco, 2001; Ruppar & Gaffney, 2011). One suggestion for practice that may positively impact the decision-making process is to offer professional development to IEP members regarding more interactive approaches to collaboration in both pre-team and official IEP meetings (Giangreco, 2001). The law does not demand a specific linear sequence in the development of the IEP, and helping teams work to develop an interactive decision-making model is one potential solution to ensuring that the legal intent of IDEA is followed (Giangreco, 2001).

Education professionals and parents may benefit from yearly accessible, individualized instruction on special education law and conflict management. Professional development or group seminars would involve current IEP teams, as a cohesive unit. Each year, families and their current team members might participate in new courses or refreshers for repeated topics to remain up-to-date.

The legal PD would provide all team members the opportunity to learn about the legal expectations for IEPs and their responsibilities and rights in developing the IEP. Providing these learning opportunities to IEP teams as the legal landscape changes over time is imperative. Through these trainings, all team members would have the opportunity to fully understand their roles and rights clearly.

In addition to legal seminars, providing courses on conflict resolution would

support how teams view and work through disagreements in IEP development.

Curriculum focus for these courses would be on developing tools to improve

collaboration during program development, striving for consensus in decision-making.

Moreover, these instructional supports could provide the knowledge necessary to ensure

parents felt confident and empowered when advocating for their children's educational

needs.

Team Communication

While school-based professionals recognize the importance of pre-IEP team

meetings and communication among team members for developing IEPs, this study

revealed that these practices often impeded parental involvement and violated IDEA

guidelines (Yell, 2019). In addressing this, it is important for existing and new in-service

teachers to acknowledge that current electronic systems (e.g., IEP writing programs)

often do not allow vital members of the IEP team (e.g., parents and GE teachers) direct

access to the document. This lack of access may create inequities for team members

within the decision-making process, and further, not having full access may

unintentionally communicate that certain members don't have an active role in the

decision-making process.

In addressing this issue and how to change unspoken norms or unwritten

procedures that may limit or exclude legal members of the IEP team, it is vital that SE

teachers communicate with the family. Educators may wish to reach out weeks before the

meeting to request information on how the child is performing at home (e.g., present

levels, data), asking about student strengths, interests, and requesting information on

current concerns (e.g., goals). Additionally, in collaboration with the family, ensuring

time to gather information from the student, as a legal IEP team member, is also important.

Additionally, teachers might also begin to include parents on all written correspondence between the team, including recapping meetings or discussions with which the parent was not privy. In starting this practice, it is important to ensure that school-based professionals and the family know of the intention to open those channels of communication about IEP preparation, collaboration, and consultation. Further, the communication should be reciprocal (e.g., all parent information should be shared with all school-based team members). These approaches to communication encourage transparency between home and school, ensuring that parents are actively engaged in the development of the IEP.

Student Involvement in the IEP Process

IEP teams may wish to consider shifting current practices to include students with ESN prior to the age of transition. Including these students in IEP team meetings and decision-making may increase and promote self-determination (Hughes et al., 2013). Further, existing research has indicated that when students attend their IEP, many team practices are improved (e.g., Martin et al., 2004). For example, Martin et al. (2004) found that school-based IEP team members tended to focus conversations more on student's areas of strength as well as their overall needs and interests. Additionally, parents also reported benefits including increased understanding of meeting procedures, intent, and engagement. It seems that including students at the table early and consistently can enhance collaborative practices within the IEP team, all the while honoring the desires, needs, and input of the student for whom the IEP is designed.

Communities of Practice: Continued Support for New Teachers

Billingsley (2004) conducted a comprehensive review of literature examining factors affecting teacher retention and attrition in special education. The study highlighted that special education teachers face the highest attrition rates, followed by math and science teachers, with many showing signs of burnout within the first five years. To address this, I recommend that local colleges establish communities of practice to support new teachers. These communities should extend outreach to all new educators in the area, involve master teachers as mentors, and offer ongoing professional development. This support system would help teachers stay updated with research, maintain best practices, and foster a sense of community from the start of their careers.

Teacher Preparation Faculty and Pre-Service Students

Putman and Walsh (2021) emphasized that access to quality preparation programs significantly and positively impacts how new teachers perform in their first years as educators. In this study, professional IEP team members indicated that their formal education or teacher preparation programs did not provide adequate instruction for participating as members of an IEP team. They often noted that the bulk of their knowledge developed through informal, hands-on experiences.

In responding to this concern, recommendations include developing new coursework or incorporating concepts into existing coursework that address (a) special education law, (b) disability justice, (c) a deeper understanding of impairment versus disablement (Lalvani & Broderick, 2013), and (d) advocacy and conflict resolution skills. Additionally, offering social justice institutes (e.g., summer programs or retreats, guest speakers from within the disability community) to support pre-service professionals from

various fields (e.g., multi-disciplinary access) may provide engaging ways to shift patterns of practice/prejudice and existing assumptions regarding disability. Lastly, educators of pre-service teachers may seek to partner with students and organizations supporting adults with disabilities in the community to engage in community events. This can help dispel existing stereotypes about disability through authentic activities and the building of friendships.

This dissertation study found that IEP teams engage in unspoken norms and hidden practices that result in the predetermination of a student's IEP. The implications of predetermining a student's IEP constrained this team's ability to engage in decision-making as intended by the law and supported by district policy. To help teams understand the potential negative impact of this behavior, preparation programs for all school-based persons associated with the IEP team (e.g., teachers, related service professionals, administrators) might consider enhancing the required coursework related to special education law.

Current research indicates that preparation programs are significantly lacking in the area of special education law. Markelz et al. (2022) examined State Department of Education websites to determine the extent to which public education departments (PEDs) required teachers to study special education law for licensure. The authors found that only one state (Utah) mandated pre-service teachers to complete a 3-credit-hour special education law course. Furthermore, only six PED websites mentioned knowledge of special education law as a licensure requirement: Arizona, Colorado, Iowa, New Hampshire, Texas, and Virginia (p. 195). Among the universities surveyed (N=67), Markelz et al. discovered that only 18% included special education law in their

undergraduate programs. Similarly to the findings of this study, in the current

investigations, related service professionals noted that their preparation programs offered

little to no information on IEP teaming or IEP development. Given the study's findings,

increasing access to this crucial content may help IEP teams avoid procedural and

substantive violations identified in this investigation.

While providing access to courses regarding the legal requirements for IEP team

members may support students' technical knowledge and understanding, it may do little

in helping them shift implicit assumptions regarding disability. Lalvani and Broderick

(2013) suggest that pre-service programs create opportunities for students to actively

participate in social justice education. This involves courses on disability justice, with

direct opportunities to acknowledge discrimination, prejudice, and ableism. For example,

the authors emphasize activities such as "recasting" disability simulations to critically

consider disability oppression through a "socio-political context and able-bodied

privilege" (p. 481).

Additionally, teaching faculty might collaborate with disability self-advocates to

create a summer social justice institute. This project could involve community members,

students, families, and guest speakers from the disability community. The overarching

goal would be to give students experiences with individuals from the disability culture to

build new narratives that dispel implicit assumptions.

Finally, partnering with students and organizations that support adults with

disabilities in the community to engage in events can help dispel stereotypes about

disability through authentic activities and building friendships. Although these activities

are not solely focused on IEP development, they may positively impact the IEP team

process, as this study found that team members' assumptions regarding disability shaped

the process. Through these critical (i.e., coursework) and engaging (i.e., individual)

experiences, pre-service teachers may develop a strong narrative for disability justice and

human rights work.

Recommendations for Future Research

The findings of this qualitative interview study contributed to the limited body of

research that has considered how IEP team members conceptualize their and others' roles

in the decision-making process when developing an IEP for a student with ESN. More

research is needed to better understand this critical process. Below, I address the potential

areas for future research regarding decision-making processes within IEP teams.

First, while this study addressed an IEP team supporting a student with ESN in

one rural district, future research may wish to consider other IEP teams across a variety

of contexts (e.g., metropolitan, suburban, urban) and teams that support diverse families

and students (e.g., culturally and linguistically diverse). Further, conducting research with

IEP teams supporting students who use augmentative and alternative communication

systems (AAC) may offer other perspectives (e.g., students with ESN, assistive

technology) not captured in the literature. Moreover, finding teams that include the

student with ESN as an IEP team member may enhance the understanding of team

decision-making and self-determination for the student.

Further research could explore the impact of team members' assumptions on

assessment practices and decision-making within the context of IEP development.

Currently, Blackwell and Rossetti (2014) identified a gap in the research literature that

has examined how IEP teams utilize assessment data to guide the decision-making

processes when developing the IEP. Additional exploration may provide insight into how team members' assumptions and data collection influence IEP team decision-making.

Additionally, a crucial area for further investigation would be the practice of predetermination within IEP teams. This study revealed that decisions for the development of the IEP were often predetermined by school-based team members before the IEP meeting, significantly constraining parental input in the development of the IEP and undermining the collaborative process intended by IDEA. Future research could examine the extent and impact of predetermination, investigating how and why this occurs. Further, investigations might explore the effects predetermination has on team dynamics and student outcomes, as well as ways to ensure that IEP meetings remain collaborative and inclusive to all legal members of the team.

Finally, research examining the perceptions or experiences of students with ESN as members of the IEP team is limited (Agran & Hughes, 2008; Hughes et al., 2013). Furthermore, while there have been limited studies considering the voices of these students at the age of transition, I was unable to locate any investigations that had considered students with ESN prior to late adolescence. In examining this gap in the literature, it may be reasonable to consider that existing research has focused on IEP teams supporting students eligible for transition according to the IDEA mandate (i.e., no later than the first IEP in effect when the child is 16; (20 U.S.C. §1414(d)(1)(A)(i)(VIII))). The paucity of research emphasized the need to better understand how students with ESN perceived their roles and involvement in decision-making for the development of their IEPs.

Conclusion

Jackson et al. (2008/2009) stated that the purpose of education is three-fold: (a) socialization, (b) academic instruction, and (c) promoting individual growth. In considering these purposes, the IEP remains the blueprint for free and appropriate public education (FAPE) for students with disabilities (Yell, 2019). This study considered how one team supporting a student with ESN understood their and others' responsibilities in the development of this critical document. Although the IEP team working to support Nicole did not appear to act out of malice, this study identified numerous ways in which how this team conceptualized decision-making limited authentic and thoughtful collaboration, resulting in the development of an IEP that prioritized district resources and requirements over a student's individualized needs. Additionally, this study established that few, if any decisions occurred during the physical IEP team meeting, which does not align with the expectations of IDEA. Further research is needed to enhance professionals' understanding of how IEP teams prepare and participate in the development of the IEP.

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Appendix A

Study Timeline

Date	Activity
3/22/2023	IRB submitted
4/17/2023	IRB approval
4/25/2023	Initial contacted district administrators/superintendents
4/25/2023	Approval from superintendent received
5/2/2023	Meeting with Dr. Copeland, participant recruitment
5/1/2023, 5/10/2023	Contacted special education director, noted 2-3 families that might have interest.
	Summer break
7/19/2023	Contacted special education director
7/25/2023	Interested family located
7/26/2023	Family contacted/IRB approved recruitment materials sent
8/7/2023	Email reminder sent
8/10/2023	Follow-up phone call to answer any questions/reviewing consent
9/15/2023	Permission received from parent to contact IEP team
9/16/2023	IRB approved informed consent received from child's mother
9/17/2023	Contacted head special education teacher/IRB approved school professional recruitment materials sent.
9/19/2023-9/21/2023	Pre-IEP interviews scheduled (i.e., six team members), Uploaded to UNM OneDrive secure folder
9/22/2023	Observe IEP meeting
9/25/2023 - 9/29/2023	Post-IEP interviews schedule (i.e., six team members), Uploaded to UNM OneDrive secure folder
10/17/2024	Contacted the OIRB regarding use of UNM Linguistics as professional transcription service

10/24/2023	Sent compensation to IEP team members via USPS to home addresses or hand delivered to participants
10/25/2023	Begin verbatim transcription
10/26/2023	UNM Linguistics transcription service started
11/13/2023-11/14/2023	All transcripts sent to Rev.com for transcription
11/13/2024	Bi-weekly meetings with Dr. Copeland begin
11/13/2023-2/25/2024	Verify and format all transcripts; uploaded transcripts into Dedoose for analysis as completed; first cycle coding begins.
1/26/2024 – 4/26/2024	Weekly meetings with Dr. Copeland (i.e., critical friend)
2/26/2024	Video files deleted
3/6/2024	First cycle coding completed
3/24/2024	Second cycle coding (thematic analysis) complete
3/25/2024	Member checks sent to all participants noting response requested on or before 3/29/2024 at 5:00 pm.
3/25/2024	Parent and special education teacher responded; all looks ok
3/26/2024	SED responded with questions regarding if filler words would be removed from final draft if her expert was used.
3/26/2024	Responded to SED
3/29/2024	No additional responses on member checks

Note. IRB = institutional review board, IEP = individualized education program, UNM = University of New Mexico, OIRB = Office of Institutional Review Board, USPS = United States Postal Service, SED = special education director, SE = special education.

Appendix B

Recruitment Email for District Superintendent

1337 S Garner Street
State College, PA 16801

[Dr. Insert Here]
[Title]
Name of School District
Mailing Address
City, State

REQUEST FOR PERMISSION TO CONDUCT RESEARCH IN SCHOOLS

Dear [Name],

My name is Peggy Duffie, and I am a doctoral student at the University of New Mexico (UNM). I have recently moved to State College, and I am writing to you seeking permission and a letter of support to recruit participants for my dissertation research study: The IEP Team: Team Members' Conceptualization of the Decision-Making Process.

The purpose of this qualitative research study is to investigate how individual IEP team members conceptualize their responsibilities toward the many educational decisions made during the development of an IEP for a student with extensive support needs (ESN). A student or child with ESN is often supported under the educational eligibility of intellectual disability (ID), autism spectrum disorder (ASD), or multiple disabilities (MD), who often qualify to take alternative forms of assessment for state-required testing. Additionally, these children or students benefit from supports in academics, social supports, communication systems, and daily living skills in their home, community, and school. I would like to understand better how IEP team members conceptualize their responsibilities and contributions and the responsibilities and contributions of others to the decision-making process when developing the IEP.

This project is a dissertation study and will be conducted under the supervision of Dr. Susan Copeland (UNM, Department of Special Education).

For this research, I am seeking to recruit one IEP team (i.e., elementary, or middle school) supporting a student with ESN. For my investigation, adult IEP team members would be asked to participate in two, 60-minute individual interviews (i.e., pre-, and post-IEP meeting). If the student with ESN is part of the IEP team, and the parent deems it appropriate, the student would be asked to participate in one 30-minute interview (post-IEP meeting). All participants will receive a $10.00 Amazon gift card for their time and efforts.

In addition to participant interviews, with the permission of the parent and agreement of the school site, I would like to be a passive observer during the annual IEP meeting, and I would be requesting a copy of the finalized IEP from the parent to provide context and deepen my understanding of the interviews with IEP team members.

While I am seeking to conduct this study during the current school year, most research activities (i.e., recruitment and participant interviews) should occur outside the professional duty-day.

I am hopeful that an IEP team may be found prior to the end of this school year; however, if an IEP team cannot be located before June 2023, I am seeking permission to continue recruitment in the fall of 2023. If you need additional information, I would be happy to set a time to meet in person, via ZOOM, or talk on the phone. Please feel free to contact me at 505-264-4334 or via my email phules@unm.edu.

I have included my current Institutional Review Board (IRB) approval letter from the UNM. Please reach out to Dr. Susan Copeland (505-277-0628/susrc@unm.edu) with any questions or concerns regarding this study.

I thank you in advance for your time and consideration of my request, and I look forward to your response.

Sincerely,
Peggy Duffie

Peggy Duffie, MA
Department of Special Education
505-264-4334
phules@unm.edu

Principal Investigator: *Dr. Susan Copeland (505-277-0628/susrc@unm.edu)*
Study Title: The IEP Team: Team Members' Conceptualization of the Decision-Making Process
IRB # : 2303047630

Appendix C

Recruitment Email for Parent

Subject Line: Opportunity to Participate in Research

Dear (Name of participant),

You are invited to participate in a research study about how individual IEP team members conceptualize the decision-making process during the development of an individualized education program (IEP) for a student with extensive support needs (ESN). A student or child with ESN is often supported under the educational eligibility of intellectual disability (ID), autism spectrum disorder (ASD), or multiple disabilities (MD), who often qualifies to take alternative forms of assessment for state-required testing. Additionally, these children or students benefit from supports in academics, social supports, communication systems, and daily living skills in their home, community, and school. You are receiving this email because you are a parent/legal guardian who is currently part of an IEP team supporting your child.

The purpose of this research study is to better understand IEP team decision-making when developing an individualized education program (IEP), and this project will examine how you, as a member of the IEP team, see your responsibility and contributions to the many different decisions made during an IEP meeting. Also, I would like to better understand how you see the responsibilities and contributions of other team members in the decision-making process.

If you agree to participate, this study will involve your participation in two, 60-minute individual interviews.

Participating in this study is not expected to pose any greater risk than you might encounter in everyday life when participating in conversations; however, some individuals may experience fatigue or boredom when answering questions. While there are no known direct benefits for participants, there are possible benefits to the field of special education. It is possible that the findings from this study could inform special education practice to enhance decision-making in the IEP meeting.

If you choose to participate in this study, you will receive a $10.00 gift card for your time.

You do not have to be in this study; your decision to be in any study is totally voluntary.

In addition, your child might also be eligible to participate, if you feel that this is appropriate.

1. **I would like more information on how my child might be eligible to participate in**

this study.

☐ Yes
☐ No

Parent/Legal Guardian Initials: _____ Date: _____

If you feel you understand the study and would like to participate, or if you have any questions about the study, please contact me at 505-264-4334 or email me at phules@unm.edu so that we can arrange a time to meet to answer your questions and review the consent form together.

If you have questions prior to participating, please contact:
- Peggy Duffie 505-264-4334/phules@unm.edu
- Dr. Susan Copeland 505-277-0628/susrc@unm.edu
- UNM Office of the Institutional Review Board (OIRB) 505-277-2644/irb.unm.edu

Sincerely,
Peggy Duffie

Peggy Duffie, MA
Department of Special Education
505-264-4334
phules@unm.edu

Principal Investigator: *Dr. Susan Copeland (505-277-0628/susrc@unm.edu)*
Study Title: The IEP Team: Team Members' Conceptualization of the Decision-Making Process
IRB # : 2303047630

Appendix D

Informed Consent: Parent

You are being asked to participate in a research project that is being done by Dr. Susan Copeland (primary investigator) and Peggy Duffie (doctoral candidate) from the Department of Special Education. The purpose of this research is to better understand individualized education program (IEP) team decision-making when developing an individualized education program for a student with extensive support needs (ESN), and this project will examine how you, as a member of the IEP team, see your responsibility and contributions to the many different decisions made during an IEP meeting. Also, I would like to better understand how you see the responsibilities and contributions of other team members in the decision-making process. The research questions guiding this study are:

- How do IEP team members conceptualize their responsibilities within their IEP team role in the decision-making process when developing an IEP for a student with ESN?
- How do IEP team members conceptualize their own and others' contributions to the decision-making process when developing an IEP for a student with ESN?

You are being asked to join because you are a parent/legal guardian who is currently part of an IEP team.

This consent form contains important information about this project and what to expect if you decide to participate. Please consider the information carefully. Feel free to ask questions before making your decision whether or not to participate. Your participation in this research is voluntary.

Your involvement in this study will involve participating in two individual interviews. Each interview is expected to last about 60 minutes, and the interviews may occur in person or via ZOOM (i.e., depending on what you prefer). Interviews will happen in a private meeting room of your choice (i.e., local library, church, school, or via a private ZOOM session).

In person interviews will be audio taped using two digital recording devices, and if you choose to have your interview over ZOOM, it will be recorded (i.e., both video and audio).

During the interview, you will be asked questions about (1) the purpose the your child's upcoming IEP meeting, (2) how you prepare for the meeting, (3) how you and other team members participate in the meeting (i.e., from your perspective), and (4) the decision-making that occurs in the development of the IEP. If I ask you any questions that you do not feel comfortable answering, you can choose to not answer the question. Additionally, if you become uncomfortable, you can stop the interview at any time.

One 60-minute interview will occur prior to your upcoming IEP meeting, and the second individual interview will occur within two weeks following your annual IEP meeting.

In addition, to help me better understand the process, I would like to observe the annual IEP meeting when it occurs. While I will take notes during this meeting, the meeting itself will NOT be audio recorded.

      I give my consent for Peggy Duffie to observe and take notes during the annual IEP meeting to be held on [Date]

Parent/Legal Guardian Signature: _____ Date: _____

      I DO NOT give my consent for Peggy Duffie to observe and take notes during the annual IEP meeting to be held on [Date]

Parent/Legal Guardian Signature: _____ Date: _____

I am also seeking your permission, as parent, to view the finalized IEP document to aid in my understanding of the IEP decision-making process. This information is protected by FERPA, and therefore, if you are willing to provide me a copy of the finalized IEP document following the IEP meeting, please sign and date here:

    _____I give my consent for Dr. Susan Copeland and Peggy Duffie to obtain a hard copy of the finalized IEP document following the annual IEP meeting on [Date]

Parent/Legal Guardian Signature: _____ Date: _____

    _____I DO NOT give consent for Dr. Susan Copeland and Peggy Duffie to obtain a hard copy of the finalized IEP document following the annual IEP meeting on [Date]

Parent/Legal Guardian Signature: _____ Date: _____

Your involvement in this research study is voluntary, and you may choose to not participate. Your decision to participate or not to do so will in no way affect your child's educational supports and services. There are no known risks in this research, and participating in this study is not expected to pose any greater risk than you might encounter in everyday life when participating in conversations; however, some individuals may experience discomfort or a loss of privacy when answering questions.

We will take measures to protect the security of all your personal information, but we cannot guarantee confidentiality of all research data. The University of New Mexico Institutional Review Board (IRB) that oversees human research may be permitted to access your records.

Your name will not be used in any published reports about this project. All identifying information (e.g. your name, the name of your child's school, location) will be removed from data collected (e.g., interviews, field notes). Additionally, data will only be saved on a secure UNM server, and data analysis activities will take place on password protected computers.

Your information collected for this project will NOT be used or shared for future research, even if we remove the identifiable information like your name or date of birth. We will delete all data collected after dissemination of the results of the study.

While there are known direct benefits for participants, there are possible benefits to the field of special education. It is possible that the findings from this study could inform special education practice to enhance decision-making in the IEP meeting.

If you choose to participate in this study, you will receive a $10.00 gift card for your time.
Participation in this study is voluntary and participants may withdraw from the study at any time (e.g., during data collection, during data processing, or following completion of data analysis) simply by contacting the student researcher, Peg Duffie or the faculty advisor (Dr. Susan Copeland) by phone or through email (this information is provided on the consent form). Choosing to withdraw will not affect your child's educational services in any way.

Once withdrawn from the study, audio recordings of individual interviews will be deleted from any electronic storage locations and any paper and/or electronic copies of transcribed interviews will be destroyed. Until the project is completed, a copy of the initial consent form will be retained.

The researcher may withdraw a participant from the study if they refuse to participate in the pre- and post- interviews. In this case, a withdrawal form will be completed, and the participant will be notified.
- The participant withdrawn by the primary or student researcher will still receive the $10.00 gift card for their time and efforts.

- If you have any questions, concerns, or complaints about the research, please contact:
- Dr. Susan Copeland 505-277-0628/susrc@unm.edu; 1 University of New Mexico, Albuquerque, NM 87131
- Peggy Duffie 505-264-4334/phules@unm.edu; 1337 S Garner Street, State College, PA 16801

If you have questions regarding your rights as a research participant, or about what you should do in case of any research-related harm to you, or if you want to obtain information or offer input, please contact the IRB. The IRB is a group of people from UNM and the community who provide independent oversight of safety and ethical issues related to research involving people:

UNM Office of the IRB, (505) 277-2644, irbmaincampus@unm.edu. Website: http://irb.unm.edu/

CONSENT

You are making a decision whether to participate in this research. Your signature below

indicates that you have read this form (or the form was read to you) and that all questions have been answered to your satisfaction. By signing this consent form, you are not waiving any of your legal rights as a research participant. A copy of this consent form will be provided to you.

I agree to participate in this research.

_____   _____   _____

Name of Adult Participant   Signature of Adult Participant   Date

Researcher Signature (to be completed at time of informed consent)

I have explained the research to the participant and answered all of their questions. I believe that they understand the information described in this consent form and freely consent to participate.

_____   _____   _____

Name of Research Team Member   Signature of Research Team Member   Date

Appendix E

Recruitment Email for School Professionals

Opportunity to Participate in Research

You are invited to participate in a research study about how individual IEP team members conceptualize the decision-making process during the development of an individualized education program (IEP) for a student with extensive support needs (ESN). A student or child with ESN is often supported under the educational eligibility of intellectual disability (ID), autism spectrum disorder (ASD), or multiple disabilities (MD); who often qualify to take alternative forms of assessment for state required testing. Additionally, these children or students benefit from supports in academics, social supports, communication systems, and daily living skills in their home, community, and school. You are receiving this email because you are a school professional who is currently part of an IEP team supporting a student with ESN.

The purpose of this research study is to better understand IEP team decision-making when developing an individualized education program, and this project will examine how you, as a member of the IEP team, see your responsibility and contributions to the many different decisions made during an IEP meeting. Also, I would like to better understand how you see the responsibilities and contributions of other team members in the decision-making process.

If you agree to participate, this study will involve your participation in two, 60-minute individual interviews.

Participating in this study is not expected to pose any greater risk than you might encounter in everyday life when participating in conversations; however, some individuals may experience fatigue or boredom when answering questions. While there are no known direct benefits for participants, there are possible benefits to the field of special education. It is possible that the findings from this study could inform special education practice to enhance decision-making in the IEP meeting.

If you choose to participate in this study, you will receive a $10.00 gift card for your time.

You do not have to be in this study, your decision to be in any study is totally voluntary.

If you feel you understand the study and would like to participate, or if you have any questions about the study, please contact me at 505-264-4334 or email me at phules@unm.edu so that we can arrange a time to meet to answer your questions and review the consent form together.

If you have questions prior to participating, please contact:
- Peggy Duffie 505-264-4334/phules@unm.edu

- Dr. Susan Copeland 505-277-0628/susrc@unm.edu
- UNM Office of the Institutional Review Board (OIRB) 505-277-2644/irb.unm.edu

Sincerely,
Peggy Duffie

Peggy Duffie, MA
Department of Special Education
505-264-4334
phules@unm.edu

Principal Investigator: Dr. Susan Copeland (505-277-0628/susrc@unm.edu)
Study Title: The IEP Team: Team Members' Conceptualization of the Decision-Making Process
IRB # : 2303047630

Appendix F

Informed Consent: School Professionals

You are being asked to participate in a research project that is being done by Dr. Susan Copeland (primary investigator) and Peggy Duffie (doctoral candidate) from the Department of Special Education. The purpose of this research is to better understand individualized education program (IEP) team decision-making when developing an individualized education program for a student with extensive support needs (ESN), and this project will examine how you, as a member of the IEP team, see your responsibility and contributions to the many different decisions made during an IEP meeting. Also, I would like to better understand how you see the responsibilities and contributions of other team members in the decision-making process. The research questions guiding this study are:

- How do IEP team members conceptualize their responsibilities within their IEP team role in the decision-making process when developing an IEP for a student with ESN?
- How do IEP team members conceptualize their own and others' contributions to the decision-making process when developing an IEP for a student with ESN?

You are being asked to join because you are a school professional who is currently part of an IEP team supporting a student with ESN.

This consent form contains important information about this project and what to expect if you decide to participate. Please consider the information carefully. Feel free to ask questions before making your decision whether or not to participate. Your participation in this research is voluntary.

Your involvement in this study will involve participating in two individual interviews. Each interview is expected to last about 60 minutes, and the interviews may occur in person or via ZOOM (i.e., depending on what you prefer). Interviews will happen in a private meeting room of your choice (i.e., local library, church, school, or via a private ZOOM session).

In person interviews will be audio taped using two digital recording devices, and if you choose to have your interview over ZOOM, it will be recorded (i.e., both video and audio).

During the interview, you will be asked questions about (1) the purpose the student's upcoming IEP meeting, (2) how you prepare for the meeting, (3) how you and other team members participate in the meeting (i.e., from your perspective), and (4) the decision-making that occurs in the development of the IEP. If I ask you any questions that you do not feel comfortable answering, you can choose to not answer the question. Additionally, if you become uncomfortable, you can stop the interview at any time.

One 60-minute interview will occur prior to the student's upcoming IEP meeting, and the student's individual interview will occur within two weeks following your annual IEP meeting.

In addition, to help me better understand the process, I would like to observe the annual IEP meeting when it occurs. While I will take notes during this meeting, the meeting itself will NOT be audio recorded.

I am also seeking permission from the student's parent to view the finalized IEP document to aid in my understanding of the IEP decision-making process. If the parent grants permission, researchers will obtain a copy of the IEP from the parent directly. Your involvement in this research study is voluntary, and you may choose to not participate. There are no known risks in this research, and participating in this study is not expected to pose any greater risk than you might encounter in everyday life when participating in conversations; however, some individuals may experience discomfort or a loss of privacy when answering questions.

We will take measures to protect the security of all your personal information, but we cannot guarantee confidentiality of all research data. The University of New Mexico Institutional Review Board (IRB) that oversees human research may be permitted to access your records.
Your name will not be used in any published reports about this project. All identifying information (e.g. your name, the name of your school, location) will be removed from data collected (e.g., interviews, field notes). Additionally, data will only be saved on a secure UNM server, and data analysis activities will take place on password protected computers.
Your information collected for this project will NOT be used or shared for future research, even if we remove the identifiable information like your name. We will delete all data collected after dissemination of the results of the study.

While there are no known direct benefits for participants, there are possible benefits to the field of special education. It is possible that the findings from this study could inform special education practice to enhance decision-making in the IEP meeting.
If you choose to participate in this study, you will receive a $10.00 gift card for your time.
Participation in this study is voluntary and participants may withdraw from the study at any time (e.g., during data collection, during data processing, or following completion of data analysis) simply by contacting the student researcher, Peg Duffie or the faculty advisor (Dr. Susan Copeland) by phone or through email (this information is provided on the consent form).
Once withdrawn from the study, audio recordings of individual interviews will be deleted from any electronic storage locations and any paper and/or electronic copies of transcribed interviews will be destroyed. Until the project is completed, a copy of the initial consent form will be retained.

The researcher may withdraw a participant from the study if they refuse to participate in the pre- and post- interviews. In this case, the hard copy withdrawal form will be completed, and the participant will be notified.
- The participant withdrawn by the primary or student researcher will still receive

the $10.00 gift card for their time and efforts.

●

If you have any questions, concerns, or complaints about the research, please contact:

- Dr. Susan Copeland 505-277-0628/susrc@unm.edu; 1 University of New Mexico, Albuquerque, NM 87131
- Peggy Duffie 505-264-4334/phules@unm.edu; 1337 S Garner Street, State College, PA 16801

If you have questions regarding your rights as a research participant, or about what you should do in case of any research-related harm to you, or if you want to obtain information or offer input, please contact the IRB. The IRB is a group of people from UNM and the community who provide independent oversight of safety and ethical issues related to research involving people:

UNM Office of the IRB, (505) 277-2644, irbmaincampus@unm.edu. Website: http://irb.unm.edu/

CONSENT

You are making a decision whether to participate in this research. Your signature below indicates that you have read this form (or the form was read to you) and that all questions have been answered to your satisfaction. By signing this consent form, you are not waiving any of your legal rights as a research participant. A copy of this consent form will be provided to you.

I agree to participate in this research.

_____   _____ _____

Name of Adult Participant   Signature of Adult Participant   Date

Researcher Signature (to be completed at time of informed consent)

I have explained the research to the participant and answered all of their questions. I believe that they understand the information described in this consent form and freely consent to participate.

_____   _____ _____

Name of Research Team Member   Signature of Research Team Member Date

Appendix G

Transcription Protocol (de Valenzuela, 2018)

- Type in the real names of the participants for the first draft. We will change them to pseudonyms after you transcribe the whole tape.
- Type EXACTLY what you hear. For example, if someone says "gonna" (not going to), type gonna. Same with *talkin'*, *doin'*, *y'know*, etc. Don't clean up the grammar or pronunciation. Spell and type everything exactly as you hear it.
- If you don't understand what someone says, listen to it a couple of times, the back up a bit and play it through (sometimes that helps) and then, if you still can't understand it, put XX, to indicate an unintelligible utterance.
- When one person talks, keep typing in the same paragraph. Don't hit the paragraph return until a new person starts talking.
- Don't use punctuation like you would when you write. When transcribing, punctuation has very specific meanings. For example:
- Put a period at the end of a phrase that <u>sounds like</u> someone is ending a sentence, when their voice goes down at the end of a sentence.
- Put a question mark at the end of a sentence which <u>sounds like</u> a question, when their voice goes up at the end of the sentence. It doesn't matter whether it is a question, grammatically. And, if a question doesn't sound like one, where someone's voice doesn't go up at the end of the sentence, don't put a question mark.
- Use a comma to indicate a pause. Don't use it just because it is grammatically a phrase. There has to be a real pause there.
- Use a dash to indicate when a word is broken off. For example, "w- what" would indicate that someone started to say what but only started it, but then said it again.
- Don't use dots (...) to indicate that someone trailed off. I will need to use that later to indicate that I deleted part of a quote. Instead, if there is a pause, use a comma.
- If two people talked on top of each other, put a square bracket ([) at the beginning of when the overlap occurs for the person who is talking and then, put the end bracket (]) at where the overlap starts. You will then do a paragraph return and type in what the second person said who was talking over the first person. That will also be in square brackets. Look at the example below to see how that works.
- If someone is talking along and doesn't stop their flow of conversation but someone else interjects, then you use the = sign to link two parts of the transcript. This tells us that the first person didn't have a break in the conversation, but lets you also indicate where the second person was talking interjecting without overlapping.
- Use double parentheses to indicate a description that you are including. For example, is someone laughs or pounds the table, or snaps their fingers, you would include it as ((laughing)) ((pounds table)) ((snaps fingers)) ((claps hands))

- Use a colon to indicate where a sound is prolonged more than usual.
- Use all caps when someone uses a HUGE emphasis on a word.
- If there's a break in the recording, like when the tape is turned over, use double slashes to indicate that. (See below)

Example One:

Barb: ((laughing)) XX

Julia: Yeah people used to say that they a::, thought I was a::, talkative, 'till they met my family

Barb: Oh really. XX

Julia: Okay well hopefully this will re- yeah I think its recording, yeah

Barb: We can play it back in a second and see if it's

Julia: Yeah, well, it's pickin' up. The little monitor's going

Barb: Okay [XX]

Julia: [Okay, thanks] this: makes it a lot easier for me to transcribe if I'm not taping questions, uhm do you want to see a copy of the questions I'm gonna ask?
Barb: Yeah yeah

Julia: It makes it easier to follow along.

Barb: [okay]

Julia: [This is] very open ended and we'll just, go though 'em, and, ((chuckles)) and, if it's okay with you I'd like to interview you:, two more times and then come back to you at the end. for some. member check.

Barb: M'kay

Julia: So, to see if any of your, ideas about this change, through the whole process like the thirs time-, the third time I'll interview you would be a:fter, the external reviewers co:me

Barb: Oh okay

Julia: So.

Barb: And- the purpose to interview us? Why are you interviewing us?

Example Two

Julia: ((microphone noise)) I'm gonna move this closer to you so XX don't get a lot of uhm, fan ((noise in background))

Beth: Okay. That's not gonna hurt the, computer. Bill dropped something on it yesterday. ((laughing))

Julia: Okay, and you said were, both enlightened and confused. Can you tell me a little more about that?

Beth: Uhm, it seemed to me that THIS particular OGS review

Example Three

Julia: Okay. Today is, September 19th I believe? Is that right?

Chris: Uh huh.

Julia: September 19th and I'm interviewing Christine Mitchell for the second round of

questions,=

Chris: M'kay.

Julia: =uhm, prior to the OGS visit. Which will happen next week. WELL, [Dr. Mitchell=]

Chris: [((laugh))]

Julia: =what do you see as the purpose of this OGS review.

Example Four

Julia: Yeah. So you know a part of me- you know today ((inaudible sentences for about 45 seconds))

//

((end of side 1 of tape))

//

Julia: So- so it's just kind of uhm, to bring out uhm, what kind of data do we want to