

Trust and Communication: Perspectives of Mothers of Children with Disabilities on the Role and Importance of Communication in Trusting Relationships with Teachers

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Abstract

Trust is imperative to effective relationships between teachers and parents of children with disabilities. Communication is the foundation on which trust is established and maintained. This study employed a qualitative research design to investigate the perspectives of 16 mothers of children with varying disabilities, of varying ages, and from varying geographical regions regarding the role of communication in establishing and maintaining trust with their children's teachers. Analysis of the interview data revealed that (a) the mothers used two primary communication strategies, dialogic and problem-focused, when interacting with their children's teachers, and (b) the perceived teacher responses had a significant effect on either facilitating or inhibiting trust in mother-teacher relationships. Discussion of the findings addresses recommendations for education professionals as they forge effective and trusting home-school partnerships with parents of children with disabilities.

The Importance of Trust in Family-Professional Relationships

Parents and education professionals should strive to form effective family-school partnerships for various reasons, including: (a) legal mandates, (b) increased parental involvement, and (c) increased student achievement. The Individuals with Disabilities Education Improvement Act (IDEIA) (2004) and the No Child Left Behind (NCLB) Act (2002) encourage parental involvement and require education professionals to regard and treat parents as full members of Individualized Education Plan (IEP) teams. IDEIA and NCLB both stipulate that parents must be invited to participate in IEP team activities of evaluating, goal setting, and choosing service delivery (Office of Special Education and Rehabilitation Services [OSERS], 2004). More recently the use of Response to Intervention (RtI), which requires general education teachers to use increasingly, intensive interventions to assist children with learning disabilities (LD) prior to referring a child for special education, has added an additional impetus to establishing effective communication with parents of children with disabilities. Increased parental involvement is facilitated by effective family-school partnerships, and the resulting benefits in the education of all children, regardless of their disability label or lack thereof, are well documented (e.g., Dunlap, 1999; Kayama, 2010; Lambie, 2000; Mahoney & Kaiser,

1999; Turnbull, Turnbull, Erwin, & Soodak, 2006). Indeed, many see parental involvement as a basic tenet of the special education system (e.g., Turnbull et al., 2006; U.S. Department of Education, National Center for Learning Disabilities, 2005).

Several studies have focused on strategies for increasing and maintaining effective family-professional partnerships (Edwards & DaFonte, 2010; Matuszny, Banda, & Coleman, 2007; Montgomery, 2005; Shirvani, 2007; Singh, 2003). Yet, effective family-school partnerships require more than strategies; there must be a foundation upon which to build. That critical foundation is trust. Attempts to define trust abound in various disciplines, including sociology, psychology, business, and education. Hoy and Tschannen-Moran (1999) defined trust in relation to schools as “an individual’s or group’s willingness to be vulnerable to another party based on the confidence that the latter party is benevolent, reliable, competent, honest, and open” (p. 189). Dunst, Johanson, Rounds, Trivette, and Hamby (1992) found trust to be one of the most frequently mentioned characteristics of positive parent-professional partnerships by both education professionals and parents; 55% of the practitioners and 45% of the parents they surveyed identified trust as integral and necessary to family-professional relationships. Soodak and Erwin (2000) interviewed parents of young children with significant disabilities in inclusive settings and found that the presence of trust positively influenced parental participation and perceptions.

According to Bryck and Schneider (2003), “...trust is the connective tissue that binds individuals together to advance the welfare and education of students” (p. 44). Both parents and professionals have clearly identified trust as an essential component for effective collaboration and as a vital component of effective family-school relationships (Dunst et al., 1992). There is little doubt that trust is vital to building and maintaining effective family-school relationships for all children (Adams & Christenson, 2000). The establishment and maintenance of trust is as (and perhaps *more*) important to families of children with disabilities since there may be a perceived heightened level of risk due to their children’s disabilities (Stoner et al., 2005; Stoner & Angell, 2006).

Communication: The Key to the Establishment of Trust

So, how is trust established between families of children with disabilities and education professionals when that relationship is complex, with a variety of factors, such as disability, age, setting, and history affecting each relationship differently (Angell, Stoner, & Shelden, 2009)? Some researchers theorize that trust is built incrementally and progresses through distinct stages. For example, Rempel, Holmes, and Zanna (1985) hypothesized that trust consists of three progressing levels arranged in a hierarchical order: (a) predictability, (b) dependability, and (c) faith. Holmes and Rempel (1989) referred to this developmental progression as “uncertainty reduction” (p. 190). This concept can be applied to the relationships families of children with disabilities have with education professionals, since the anxiety associated with trusting others to care for their children with disabilities at school often dissipates as trust develops (Angell et al.; Stoner & Angell, 2006). Additionally, Holmes and Rempel asserted that caring and responsiveness of others positively influence levels of trust in relationships. However,

they identified limited amounts of contact or communication between families and professionals as an inhibitor to establishing trust.

Communication is a pivotal requisite for establishing and maintaining trust. Adams and Christenson (2000) identified communication as one of the key processes involved with establishing trust, and Margolis and Brannigan (1986) saw trust as “an interactive process, involving the sharing of information, ideas, and feelings” (p. 71). Furthermore, Bronfenbrenner (1979) held that “the communication of ideas, information, and skills builds positive attitudes toward ‘educating’ children by both parents and professionals” (as cited in Dunst et al., 1992, p. 197). Parents of children with disabilities have indicated that effective communication with teachers gives them an opportunity to assess authentic caring, which they identify as a prime contributor to the establishment and maintenance of trust (Stoner et al., 2005; Stoner & Angell, 2006).

Trust can deteriorate rapidly when communication is absent or ineffective. In a study that investigated parent-school conflict, Lake and Billingsley (2000) identified limited and/or lack of communication as a factor in parent-school conflict. Additionally, if communication was perceived as untrue or deceitful by parents, conflict was escalated and trust was severely damaged. Communication can enhance or diminish trust, yet our understanding of the perspectives of parents of children with disabilities regarding communication with education professionals is limited. Reedy and McGrath (2010) contend that “effectively communicating with parents is one of the greatest challenges of the twenty-first century facing early childhood caregivers and special educators” (p. 347). Consequently, there is a need to comprehensively understand parent perspectives so that education professionals may contribute to building trust and effective communication to establish vital family-school partnerships.

The current study emerged from a broader study of the perspectives of mothers of children with disabilities on trust in educational professionals (Angell et al., 2009). Communication with all education professionals was important, but it was the communication between mothers and teachers, both general and special education teachers, that was mentioned most frequently during interviews with mothers and was most significant during initial data analysis. Therefore, we chose to re-examine our data to address the following research questions:

1. What are the perspectives of mothers of children with disabilities on the role of communication in establishing and maintaining trust with their children’s teachers?
2. How do mothers of children with disabilities describe their communication with their children’s teachers?

Method

Research Design

We employed qualitative research methodology to gain insight into the relationship between communication and trust of mothers of children with disabilities in teachers. We

followed the advice of Strauss and Corbin (1998) who explained that “qualitative methods can be used to obtain the intricate details about phenomena such as feelings, thought processes, and emotions that are difficult to extract or learn about through more conventional methods” (p. 11). Trust was the central phenomenon we examined for further understanding (Creswell, 2002). We used a collective case study approach to examine the similar stories of our participants, mothers of children with disabilities (Brantlinger, Jimenez, Klingner, Pugach, & Richardson, 2005). The use of collective case study methodology also gave us reassurance that events in individual cases were not “wholly idiosyncratic” (Miles & Huberman, 1994; Stake, 2000).

Participants

We used a purposive sampling technique that included snowballing methods to recruit a heterogeneous group of mothers of school-age children with disabilities as participants in this study. Our rationale for our maternal focus was based on research that indicates that mothers have more contact with education professionals than fathers (e.g., David, 1998; Nord, Brimhall, & West, 1997; Thomson, McLanahan, & Curtin, 1992; U.S. Department of Education, National Center for Education Statistics, 2001). We purposefully included mothers who had children of various ages, with various disabilities, and from several different school districts in different settings (i.e., rural, suburban, and urban). We utilized this sampling methodology to facilitate maximum opportunities for comparable analysis (Strauss & Corbin, 1998).

We used three techniques to recruit participants: (a) district-level administrators’ distribution of recruitment materials, (b) individual school professional’s distribution of recruitment materials, and (c) a participant referral snowballing technique whereby participants distributed recruitment materials to other mothers. This sampling method facilitated our recruitment of mothers who reflected as much variation as possible within our sample (Patton, 1980). In our initial recruitment phase, we mailed explanatory and invitational letters to several school district administrators in a Midwestern state. We asked these administrators to distribute the invitational materials to mothers from the schools in their districts if they approved of our interviewing mothers in their schools. Mothers were asked, through the invitational letter, to return permission-to-contact forms if they were interested in participating in the study or learning more about it. This method of recruitment proved to be minimally effective, yielding only 2 participants. We tentatively attributed administrators’ or mothers’ reluctance to participate to the nature of the study (i.e., the investigation of trust) and subsequently shifted from working with district level administrators for recruitment to working with school principals and various school personnel (e.g., therapists and special education teachers).

The second phase of recruitment involved school professionals sending invitational letters and permission-to-contact forms to potential participants with whom they had regular contact. Upon receipt of this approval, we scheduled 1:1 face-to-face interviews with the mothers, explained the study, and obtained informed consent. We had more success recruiting in this phase and tentatively attributed the success to the personal contact or to the nature of the relationships participants had with the education

professionals who contacted them. Personal contact from familiar individuals within their schools or districts may have influenced the mothers' willingness to participate. Additionally, we had a third recruitment phase, using a snowballing technique (Brantlinger et al., 2005) by which we asked participants to contact and provide recruitment information to other mothers of children with disabilities.

Our second and third recruitment phases yielded an additional 14 participants. Our final participant pool consisted of 16 mothers of children with various disabilities. The mothers ranged in age from 18 to approximately 55. Twelve mothers were Caucasian, one was African American, and three were Hispanic. One of the Hispanic mothers had limited English proficiency, so a Spanish-speaking interpreter assisted during her interview. These mothers and their children represented eight school districts, varying grade levels, and a range of geographical areas (i.e., rural, suburban, and urban). See Table 1 for participant demographics.

[See Table 1 after References Section
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Interviews

Qualitative data were collected via 1:1 semi-structured interviews which Fontana and Frey (2000) described as "one of the most powerful ways in which we try to understand our fellow human beings" (p. 645). Interviews were conducted face-to-face in locations designated by the mothers. Most of the interviews occurred in the mothers' homes and other interviews occurred in public locations identified by and convenient for the mothers. The interviews ranged in length from 60 to 90 minutes. Each interview was audio-taped and transcribed verbatim to facilitate data analysis.

Each author conducted some of the 16 single-participant interviews. The interviews consisted of broad, open-ended questions designed to elicit mothers' perspectives on their trust in education professionals. Semi-structured interviews permitted us to address the issue of trust while maintaining a feeling of openness (Kvale, 1996). While we used a semi-structured interview protocol, interviews varied in that we probed for further information, elaboration, or clarification based on mothers' responses.

Data Analysis

The findings related to communication and mothers' trust in teachers emerged as one of several categories or themes we identified as we analyzed our interview data. We reported findings related to overall maternal trust in education professionals (Angell, Stoner, & Shelden, 2009), but we decided that several themes warranted more in-depth analysis than was possible in the initial overview. Once we had analyzed all the interview data, we focused more closely on specific themes and developed concept maps that guided our reports. This study represents our more in-depth analysis of the role of communication in establishing and maintaining trust between mothers of children with disabilities and teachers.

We conducted cross-case analysis as described by Miles and Huberman (1994) to study each mother (i.e., case) as a whole entity, using line-by-line coding of each mother's interview responses. We followed the analysis of the individual cases with a comparative analysis of all 16 cases. Each researcher independently line-by-line coded each interview and all codes were entered in NVivo7™ software (Richards, 2002). Next, we met consistently as a team to discuss the codes, identify emergent themes, and reach concordance on the development of a concept map (shown in Figure 1) that represents the study's findings.

We used a flexible standard of variables or categories as we analyzed each case in depth (Coffey & Atkinson, 1992). We used a constant comparative method (Charmaz, 2000) to compare cases and to refine, expand, or delete categories as needed. This type of coding procedure helped us stay in tune with the mothers' views as we continually studied our interview data (Charmaz, 2000). We returned to the verbatim data when we discovered inconsistencies regarding codes or emerging categories. This allowed us to examine the inconsistencies and compare them directly to the mothers' input. We continued this process of continually returning to the data until we reached concordance on all categories. This process of cross-checking coding of the major categories provided "thoroughness for interrogating the data" (Barbour, 2001, p. 1116) and allowed for in-depth discussion that facilitated the development of the major categories.

Confirmability

We used methods of respondent validation (Creswell, 2002) and member checking (Janesick, 2000) to confirm our findings. Securing respondent validation involved presenting a summary of our findings to the interviewees by telephone or e-mail. We asked them if they concurred with any or all of the emergent perspectives, that is, if they saw their personal perspectives represented in any or all of the reported findings. We conducted member checks as a means of confirming the findings by asking participants to comment on the accuracy of their individual verbatim quotes, and we obtained approval to use their direct personal quotes in written or verbal reports of the study. All 16 participants confirmed that the summary of findings adequately and accurately represented their perspectives on the role of communication in establishing and maintaining trust in teachers, and all the mothers whose direct quotes appear in the report gave permission to cite them.

Findings

The relationship between mothers and teachers has many dimensions and facets; it is complex, dynamic, and recursive in nature, and it has the potential to change with each interaction, each education professional, and each success and challenge faced by children. Analysis of the data revealed that effective communication was the catalyst for trusting relationships, and ineffective communication or the absence of communication could either erode or completely destroy trust. The effect of communication on trust was

of paramount importance to our participants. When asked what affected trust the most, one mother, Carole, responded, “Communication is everything.”

This study’s findings are organized to provide (a) an overall description of the communication that occurred between our participating mothers and their children’s teachers and (b) results of our data analysis which led to the identification of parental communication strategies, mothers’ perceived teacher responses, and the consequential impact of communication and trust within family-school relationships. Figure 1 contains a graphic representation of parental communication strategies, which were integral to and had the potential to enhance or erode trust within the complex and dynamic relationship between mothers of children with disabilities and their children’s teachers.

[See Figure 1 after References Section]

Communication: The Road to Establishing Trust

Participants described their interactions with education professionals and all participants reported interacting primarily with their children’s special education teachers, regardless of whether or not their children received special education within general education settings. This is not to indicate that the mothers in our study didn’t communicate with general education teachers, but their primary contact people were special education teachers. Several participants desired one contact person, especially if their children were in high school and had many general education teachers. Pat summed up this perspective: “His classroom teachers, I don’t have a whole lot of interaction with. I just feel like it is easier to go through her [special educator] than to go to them [general educators] directly.”

The frequency of mother-teacher communication varied greatly and was affected primarily by children’s ages and the presence or absence of issues of concern. There was more communication between the mothers and teachers when the children were younger. This may be typical for all students as they become older, and may be preferred by the children themselves, as they desire more independence. DeDe spoke of her deaf son: “In all the early years, I was always up there. I was in and out so I knew all his teachers. But now that he’s in the hearing classes, I don’t really go up there because he’s getting older. He’s getting to be—like—‘Mom...!’” However, regardless of their children’s ages, if the mothers had a concern, the frequency of communication increased dramatically.

Types of communication varied across participants and included notebooks, notes, phone calls, and e-mail messages. Participants were aware that a particular mode of communication might work better with an individual teacher or with a particular content.

For example, Carole spoke of the benefit of communicating with phone calls:

I have found, too, that if a teacher lets you call them directly, it’s a lot better than writing notes and waiting for a response. It’s a lot better because you can get immediate answers, and so when you have a problem you can get immediate help. It’s just better than writing notes.

Two participants identified e-mail messages as a form of documentation; however, both participants had experienced difficulties in the past with their children's education and had learned to document and save all communication between themselves and their children's teachers. One of them expressed caution when communicating through e-mail: "Yeah, e-mail can be good, but I'm always careful on e-mail because that is documentation." Neither of these parents was thinking of e-mail as documentation prior to encountering problems during her child's education. This illustrates that prior history with teachers and all education professionals, whether positive or negative, can affect parental perspectives and actions.

The majority of the mother-school communication content was child-focused. Occasionally, if there was a personal situation, such as a death in the family of either the teacher or the parent, communication became personal. Usually, though, the mothers and teachers focused their communication on the children. Two primary content areas were consistently identified: (a) 'everyday' content and (b) content that addressed concerns. Everyday content was usually focused on the school day, any minor issues that arose at home or at school, or any daily progress the children had accomplished. Olivia described everyday content with her daughter's teacher as "She [the teacher] is willing to come to me very readily and just chat, or make a conversation, or say 'this little thing happened.' I like to know little things about Emily's day; it doesn't have to be big things." Since our participants had children in different school settings and with different disabilities, the actual topics of everyday content were diverse. For example, Olivia, whose child was in preschool, desired and received communication about her daughter's nap schedule, while Pat, whose son was in high school, desired and received information about her son's progress with classroom assignments.

Another content area of communication focused on problems or concerns. The problem could be perceived by the participants as major, minor, or one that starts off minor and escalates to a major problem due to ineffective communication. Major problems focused on lack of accommodations, failure on or difficulty with assignments, or concerns regarding the social behavior of either their children or classmates. These were "hot topics" for the participants and when they initiated communication on these topics, they wanted immediate attention and/or action. Unfortunately, many times responses from their children's teachers were not congruent with the mothers' desire for action.

The communication abilities of the children of the participants varied. Some children had few or no communication difficulties while other children communicated non-symbolically, due to their disability. If their children's communication skills were limited, the mothers repeatedly emphasized the need to know about their children's school days. The mothers reported a strong need to somehow compensate for their children's lack of or limited communication. They emphasized that when their children were not able to communicate events of the school day or convey difficulties that might have arisen during the day, they needed the special education teacher to compensate through frequent communication. The mothers said they acknowledged and appreciated

their children's teachers' attempts to meet these needs. Nicole exemplified this when she explained,

She just wanted to let me know that [he wasn't feeling well], because a lot of times he won't. He didn't—when I picked him up, he didn't say anything. And once we were at home for a while he didn't say anything. So it was good to know that, in case, later on during the night something happened, that I knew that he wasn't feeling well. So yeah, she's, she's wonderful.

Mothers appeared to perceive that their children were vulnerable, especially when their children's communication was impaired. Vickie said, "I can remember when he started school and they were going to put him on a bus. And I said, 'He doesn't talk; you are going to lose him.' And I sat there bawling. 'You know, somewhere at that school, you are going to lose him. He does not talk and if you lose him he is not going to be able to tell you who he is.'" It was this perceived vulnerability that was the root of desiring additional, prompt, and comprehensive information from teachers when concerns arose.

The majority of participants reported they were the ones who initiated communication between themselves and their children's teachers when content focused on problems. Pat, whose son was in high school, spoke of this: "What I find interesting, is that in the teacher's position there is very little communication. I am the one that prompts the communication." It was also evident that if conflict arose, parents increased their communication efforts. Noreen illustrated this when discussing difficulties she had with her son's school: "And now, we are into first grade. Struggle, Struggle, Struggle. Always up there talking to the teacher. 'He's having problems with this. What can we do?' Always working very, very hard to try and get him through first grade."

If teachers' responses were ineffective or problems persisted, the mothers continued to communicate, and actually increased their efforts. Regardless of who initiated communication, how frequent communication was, or what type of communication mode was used, each communication interaction became an opportunity for teachers to enhance or erode trust through their responses.

Teacher Response to Communication: Freeway or Potholes

Once communication was initiated, the prime determinant of whether or not it was successful, as perceived by the participants, was the teacher's response. The important features of teachers' responses that facilitated trust were immediacy, active listening with an acknowledgement of the mothers' perspectives, and evidence of a disposition of authentic caring. Many participants spoke of effective communication with their children's teachers, and many gave specific examples of communicating effectively during some years and ineffectively during others. When communication was effective it had a profound impact on mother-teacher relationships. Lisa related the following when speaking of the sadness of leaving her son's current teacher, with whom she communicated effectively and whom she trusted implicitly:

It is going to be hard saying goodbye to her. My husband and I talked last night about, like I said, 'What a great IEP meeting this was.' And he said, 'You know,

we just, we just are so grateful to her for all the things, over the 3 years, that she has done to help him grow.’ And he says, ‘At the end of the year we’re really going to have to do something nice for her.’ And in my mind I’m thinking, you know, we could get her a gift certificate so her and her husband could go out to dinner or something. And my husband says, ‘We need to go in on that last day and give her a big hug.’ [Laughter] That’s what he said! I said, ‘Well, I was kind of thinking about a gift certificate,’ and he said, ‘Oh, well, that, too.’

De-De illustrated the effect of having her concerns acknowledged and knowing her sons’ teachers authentically cared for her child.

I can’t even tell you how many times I have met with these people over the past 7 or 8 years. At least maybe, I think twice a year at the beginning of the year and at the end of the year, and if it happens to be the year that we do a re-eval or 3-year re-eval it can even be more. I do not feel at all intimidated by any of the individuals. They don’t make me feel my questions or concerns are stupid. I have complete confidence [in them].

It should be stressed that in this study effective teacher responses did not necessarily equate with teachers’ agreement with the mothers. Many mothers reported that teachers would disagree with them and the trust within the relationship was intact or at times enhanced. For example, Teresa reported these perspectives even in the face of conflict:

“I think they would kind of like talk to you, help you through it [conflict]. And if I don’t feel comfortable with it, I think they would try to get to a point to make a solution. I think they will work it out and I think if you voice your opinion, they voice theirs...everybody’s not gonna agree on everything.”

Mothers in this study described ineffective communication as latent and/or absent. Latency was particularly frustrating for the mothers, especially if they received late communication about difficulties with assignments or grades. Valerie spoke of her frustrations related to learning of her son’s difficulties with math *after* he had failed. “My thing is, he should have never gotten there. I should have been contacted before that, about the problem. And that’s where I have problems.” These mothers were aware, concerned, and willing to monitor and assist with their children’s academic work, but if they were not informed of failing grades or poor performance on assignments quickly, they were frustrated by missing opportunities to assist their children. Many of the mothers reported simply an absence of communication by their children’s teachers.

Mothers’ Communication Strategies

The 16 mothers in our study had interacted with numerous teachers, and the scope of this study did not allow us to interview teachers to examine their perspectives on communication with the mothers. However, even without the teachers’ viewpoints, it was the mothers’ *perspectives* on communication that was of prime importance. Data analysis revealed that these mothers engaged in particular strategies which we have identified as either dialogic or problem-focused communication strategies. They also

offered the observation that teachers engaged in these same strategies and one additional one, which we have categorized as inaction.

Dialogic communication strategies. Dialogic communication strategies were relaxed, focused on everyday content, and directed toward establishing and maintaining positive relationships with teachers. Participants spoke of several approaches they used when implementing dialogic communication strategies. These included frequent and persistent communication, sharing knowledge about their children, and/or asking directly for assistance with an issue before it became a major problem.

The strategy of communicating frequently and persistently with their children's teachers was exemplified by Dolorita, a Hispanic mother with limited English proficiency. She stated, "More, more. You have to communicate with them all the time." Similarly, Monica spoke of the benefit of frequent communication, "I'm a frequent caller and she's a frequent caller to me. So, I think we have a good relationship." Frequent communication when using dialogic communication strategies was an opportunity for mothers and teachers to get to know each other, and it was a strategy that both employed.

The prime focus of the mothers was their children, and all reported striving toward the objective of increasing teachers' knowledge of their children. To achieve this, mothers used dialogic communication strategies to share knowledge of their children's characteristics, needs, and any other pertinent information. For example, Olivia provided an in-service session for the staff at her daughter's daycare and reported on its benefit: "So that really helped the trust when everyone seemed to understand the issue, and understand my child." Conversely, the mothers did not hesitate to call on their children's teachers if they needed information. Carole described her strategy of calling her son's teacher: "I mean, I am one that—I'm going to call. And they know I'm going to call. And if Sam comes home with a note then his teacher knows that I am going to be calling her at 3:30. And when the phone rings she says, 'I just knew it was you.'" Sharing knowledge required an attitude, in both mothers and teachers, of valuing and accepting what each had to offer the other.

Mothers also used dialogic communication strategies to directly ask for assistance. Pat spoke of informing her son's teacher of her apprehension about the effect of her older son's deployment to Iraq on her younger child:

You know, I think he [younger son] is really slipping, and he is not turning in his work, and I have asked him, 'What is happening?' And I said [to the teacher], 'If you see something, tell me.' Mike went through a very emotional time when his brother left for Iraq.

This gave both the teacher and the mother the opportunity to interact without an intense, specified agenda to ward off any anticipated problems. Interactions such as this fostered trust, instilled a comfort level in parents, and had the benefit of cushioning the effect of any future difficulties.

Dialogic communication strategies appeared to set the stage for the establishment and maintenance of trust between mothers and teachers. All participants employed this strategy, valued and desired it, and recognized the resulting increased comfort level of interaction with teachers. When dialogic communication was established, participants reported feeling more comfortable communicating their concerns. Nicole said, “If there’s a problem, personal or academically, that you can be comfortable going to them and they can be there; they can fix it. And I think, because I’ve always felt that way, I’ve always gone to them that way. And I think that they’ve appreciated that.”

Mothers’ problem-focused communication strategies. Another communication strategy employed by the mothers in this study was one we have termed *problem-focused*. This strategy was used when mothers were concerned about academic failure and/or lack of accommodations for their children. This strategy was more intense than dialogic communication strategies. While dialogic communication strategies typically resulted in an increase in trust, problem-focused communication strategies had mixed effects on trust, depending on perceived teacher responses. Problem-focused communication strategies clearly indicated a need for immediate action, and if action was forthcoming, the effect was an increase of trust. However, mothers reported many instances of teachers’ latent responses. If mothers perceived latency of teacher responses, they *increased* the intensity of their communication. Pat described a situation in which she did not think the school had implemented the accommodations stipulated in her son’s IEP: “I was more in their face. ‘Look, look you said you were going to do this.’ And I am calling them, ‘Is it done, is it done?’ And I was e-mailing, ‘When am I going to see this?’ I am not saying they wouldn’t have been reliable but I know I had to make them reliable.”

Several mothers indicated that there was no response from teachers even when they employed problem-focused communication strategies. When this occurred, conflict was guaranteed, communication became ineffective, and, perhaps most detrimental, trust was destroyed. *Persistent* inaction on the part of the teachers was infrequent and mentioned by only three mothers during the interviews. However, the result of the perceived inaction in all three cases was the mothers’ employment of outside advocates and, in one case, filing a complaint with the state board of education (which cited the school district for breach of confidentiality). All 3 mothers indicated that if the school district had listened to them, acknowledged their points of view, and responded respectfully, the matter could have been resolved. Once again, we do not have the teachers’ or school administrators’ perspectives in any of these cases. However, the mothers’ collective perspective was that these incidents escalated due to perceived ineffective communication strategies on the part of the teachers. The long-term effect was an absence of trust, an increased monitoring of their children’s education, and a relationship with future teachers that was unlikely to become trusting.

Discussion

Effect of Communication on Trust: Stalling or Reaching the Destination

Participants reported that communication had direct effects on the trust between themselves and their children's teachers. This trust varied from year to year, with each new teacher. Our participants reported desiring frequent communication, especially regarding issues they felt were problems. This is consistent with findings by Singh (2003) that 75% of mothers of children with disabilities wanted daily communication with their children's teachers. Additionally, Singh identified written logs as the preferred mode of communication. In our study, one mother desired phone communication to resolve a problem since resolution might be attained during the conversation. However, most of our mothers communicated through email; which may improve efficiency but does not always improve quality of communication (Thompson, 2008) Regardless of the mode of communication, the response time was especially important during problem-focused communication.

Teacher responses to the participants' communication strategies had the potential to develop, maintain, enhance, reduce, or even destroy trust. There are numerous papers and reports that focus on effective communication with parents regarding certain issues, such as communicating with parents of children with attention deficit disorder (Mathur & Smith, 2003; Montgomery, 2005) or communicating with parents regarding homework issues (e.g., Munk et al., 2001). However, perspectives of mothers of children with disabilities regarding the importance of communication on trust have not been investigated. This study underscores the power that effective communication has in building trust.

Participants reported that they adopted particular communication strategies based on the content of that communication. When the content was about everyday topics, mothers employed a dialogic communication strategy and the communication itself was more relaxed. If a problem arose, the mothers used a problem-focused communication strategy and they expected an immediate teacher response. Teacher responses did not have to be in agreement with the mothers' desires, but they did need to be respectful, demonstrate authentic caring for students, and acknowledge the mothers' perspectives on problems. Communication that was not respectful, had no aspect of authentic caring, or was dismissive of the mothers' concerns was detrimental to trust. If mothers perceived inaction by teachers, the mothers' trust was reduced or destroyed. This perspective is consistent with research that has focuses on conflict between parents of children with disabilities and education professionals (Lake & Billingsley, 2000).

Communication with parents of children with disabilities must be perceived as important, must be cultivated early in the school year in a positive and proactive manner, and, when parents communicate with teachers, appropriate responses should be forthcoming. Trust is built incrementally over time and, unfortunately, can be destroyed much faster. Numerous researchers have found a positive relationship between parental involvement

and communication by teachers (Ames, De Stefano, Watkins, & Sheldon, 1995; Epstein, 1990; Shirvani, 2007). The current study found that mothers reported more trust in teachers who valued communication and engaged in communication frequently and in a timely manner.

Special education teachers know their students require individual services and accommodations. Those same considerations need to extend to the entire family. Since trust is the foundation for establishing effective parent-professional relationships, teachers should recognize and meet the parental need behind the communication. Within this framework, based on our professional experiences, and based on the lived experiences of our participants, we offer the following recommendations to assist special education teachers in choosing and implementing appropriate communication strategies to facilitate trusting relationships with parents of children with disabilities.

Recommendations

1. Establish communication before any difficulties arise. Ensure that this communication is dialogic, is based on mutual respect, conveys authentic caring for the student, and lays the foundation for trust.
2. When parents initiate communication, decide whether this communication is dialogic or problem-focused. Respond to parents, regardless of the type of communication you receive from them.
3. If a parent's communication is dialogic, respond in a manner designed to establish a relationship. This is an opportunity to build trust, get to know the parent, address any minor issues, and open the door for future communication.
4. If a parent's communication is problem focused, respond immediately. Even if you don't perceive the issue to be problematic, the parent may, and an immediate response can do much to defuse the situation.
5. If the communication is problem-focused, acknowledge the parent's concern; don't dismiss it. Acknowledgement does not equate with agreement; however, it does demonstrate respect for the parent's point of view.
6. Demonstrate a willingness to develop a strategy to solve a problem a parent identifies. This may be done easily if the problem is minor or may require a face-to-face meeting if the problem is more complex. Involve the parent in the problem-solving process.
7. Set up a time to review the adopted communication strategy. This is very important but easily overlooked. Contact the communicating parent to get his or her input on how things are going relative to the problem and provide your own input.

8. Return to Number 1. Continue to establish a routine of ongoing communication, and trust will continue to grow. When problems arise they will be dealt with more easily by both parents and professionals who authentically care for students with disabilities.

Limitations and Directions for Future Research

Qualitative research was used in this study to elicit participants' perspectives and caution should be applied in generalizing these findings to a larger group of mothers of children with disabilities. Although our sample size was large and we made every attempt to include a diverse sample regarding socioeconomic status, minority status, geographic status, and disability status the findings should not be generalized to the overall population of mothers of children with disabilities.

While we used accepted qualitative research methods for this study, we recognize that the validity of the findings may be affected by certain limitations. The first limitation of this study is that we did not initially plan explicitly to gather data on mothers' perspectives on the role of communication in establishing and maintaining trustworthy parent-professional relationships. Rather, these data emerged from the data gathered to address broader research questions about mothers' trust in education professionals. The use of a semi-structured interview protocol allowed us to probe further when participants discussed the importance of communication in trustworthy relationships.

The second limitation of this study is that we did not establish extended relationships with the participants. We interviewed each mother once. Multiple interviews would have been ideal. However, we determined that the initial data and our analysis of them provide a strong foundation for more in-depth examinations of the role of communication on trust between mothers of children with disabilities and their children's teachers. We also recognize that the generalizability of the findings may be limited by the nature of our participants. However, although these findings are based on the perceptions of only 16 mothers from one state, these participants reflected ethnic, racial, and economic diversity and were mothers of children of various ages and disabilities. The recruitment of participants through school professionals may also limit the generalizability of the findings in that the professionals may have identified mothers with whom they felt they had positive, established relationships with education professionals.

Future research on the effect of communication on trust and parent- teacher partnerships could explore fathers' and teachers' perspectives, since both of these groups are important members of home-school partnerships. Future research that focuses on perspectives of fathers and teachers may add valuable insights into the nature of trust and communication in family-professional relationships. Additionally, research that surveys a broader sample of parents would be beneficial to substantiate this study's findings.

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Table 1

Participant's Name	Ethnicity	Child's Name	Disability/Diagnosis	Grade Level	Instructional Setting	School Location
Mary	Caucasian	Alex	ASD	Preschool	Self-contained	Rural
Olivia	Caucasian	Emily	Sensory Integration Dysfunction	Preschool	Inclusive	Suburban
Terri	Hispanic	Frankie	Developmental Delay	Preschool	Inclusive	Urban
Vickie	Caucasian	Larry	Mental Retardation	Elementary	Self-contained	Rural
Yvonne	Caucasian	George	ASD	Elementary	Inclusive	Suburban
Noreen	Caucasian	Roger	Other Health Impaired	Elementary	Inclusive with pull-out services	Urban
Nicole	Caucasian	Oscar	ADD	Elementary	Inclusive with pull-out services	Urban
Monica	Caucasian	Tommy	ADD	Elementary	Inclusive with pull-out services	Urban
Lisa	Caucasian	Hank	Learning Disability	Elementary	Inclusive	Urban
DeDe	African American	Victor	Deaf	Middle	Inclusive	Urban
Teresa	Hispanic	Selena	Deaf	Middle	Self-contained	Urban
Dolorita	Hispanic*	Josefina	Deaf	Middle	Self-contained	Urban
Ursula	Caucasian	Charlie	ADHD	Middle	Inclusive	Suburban

Valerie	Caucasian	Tad	Non-verbal Learning Disability	High	Inclusive	Suburban
Carole	Caucasian	Sam	Cerebral Palsy	High	Inclusive	Suburban
Pat	Caucasian	Mike	Learning Disability	High	Inclusive	Suburban

* used an English/Spanish interpreter during her interview

**Mothers' Perspectives on Trust
in Relationships
with Education Professionals**

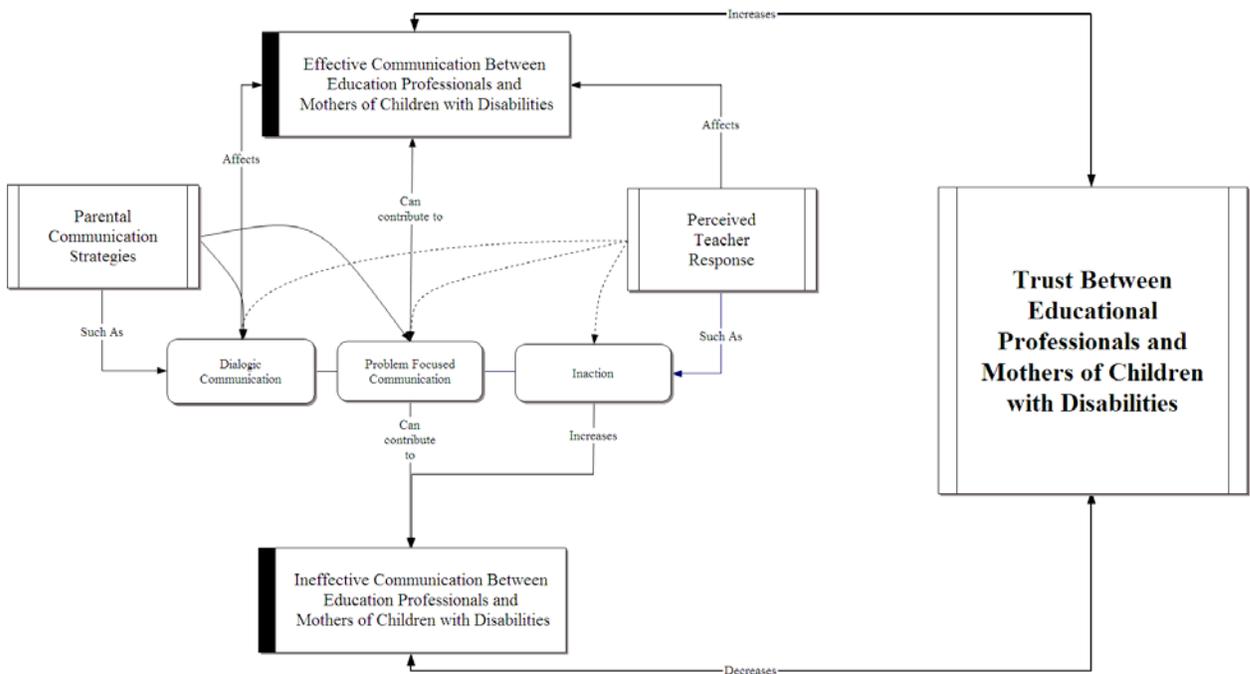


Figure 1. Mothers' perspectives on trust in relationships with education professionals.