Parental Expectations of Adapted Physical Educators: A Hispanic Perspective

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The purpose of this study was to identify the perspectives of Hispanic parents of children with disabilities regarding adapted physical education (APE) professionals in relationship to their child’s purposeful play and transition to school programming. Participants \( N = 11 \) were Hispanic parents of children with disabilities. Parents participated in one-on-one interviews in their preferred language (Spanish or English). Transcripts were analyzed through a constant comparative analysis. Three themes emerged from the data: (a) qualified APE professionals, (b) challenges for the family, and (c) normalcy. These themes were supported by subthemes. The results indicated that Hispanic families were not as familiar with APE services as Caucasian families were. Parental expectations among Hispanic parents were similar to Caucasian parents, but the preference for modes of communication and information differed.

The Individuals with Disabilities Education Improvement Act (IDEIA) of 2004 mandated that parental input should be taken into consideration when making decisions for a child with a disability. Understanding family expectations can provide insight for adapted physical education (APE) teachers when developing educational programs. Family expectations for the child will vary due to the type and/or severity of the disability (Fidler, Lawson, & Hodapp, 2003).

In an effort to meet family expectations, professionals who provide services to children with disabilities need to be qualified to employ appropriate practices. Even though the IDEIA (2004) mandates that physical education (PE) services be provided by qualified individuals, each school district defines what constitutes

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a qualified professional (Cantu & Buswell, 2003). These professionals should be able to modify activities according to the needs of the children they serve (Tripp, Rizzo, & Webbert, 2007). In addition, professionals need to be able to include the background and history of children with disabilities and their families when planning. Furthermore, the input from families may provide valuable information regarding their expectations of the professional. These expectations may vary among cultural groups.

Expectations among Hispanics, the fastest growing minority group in the U.S., may vary due to the great diversity among this cultural group in terms of their country of origin, beliefs, and customs. Consequently, it is very difficult to make generalizations about the characteristics of this group or appropriate interventions in a particular situation and make them applicable to all Hispanic communities (Geenen, Powers, & Lopez-Vasquez, 2001; McChesney, Gerken, & McDonald, 2005; Salas-Provance, Erickson, & Reed, 2002). Since there is little research about Hispanic involvement in school-based APE, the purpose of this research study was to identify the perspectives of Hispanic parents of children with disabilities regarding their expectations of APE in relationship to their child’s purposeful play and transition to school programming. In the past, studies addressing this topic in the field of APE have focused primarily on Caucasian families of children with disabilities (An & Goodwin, 2007; Downing & Rebollo, 1999).

Caucasian parents of children with disabilities highly value the positive impact that PE may have for their children (An & Goodwin, 2007; Martin & Smith, 2002). As a result, Caucasian parents tend to have certain expectations for their children and for the professionals who provide APE services for their children.

Caucasian parents deemed it important for professionals who provide APE services to be qualified, to possess the training necessary to work with children with disabilities, to have high expectations for their children, and to continually communicate with the parents (Prezant-Pollock & Marshak, 2006; Stuart, Lieberman, & Hand, 2006; Wang, Mannan, Poston, Turnbull, & Summers, 2004). Specific expectations of Caucasian families of children with disabilities included safety (Stuart et al., 2006) and successful participation in inclusive settings (Mactavish & Schleien, 2004). Downing and Rebollo (1999) conducted research exploring parental perceptions regarding the essential elements of successful integration of children with disabilities in PE programs. Their results indicated that the essential components necessary were to have the opportunity to participate in balance and coordination activities, gross motor skills, and physical fitness.

Caucasian parents also believed that family interests and expectations need to be considered for successful implementation of an inclusive environment. Parents reported a desire to establish a collaborative relationship with the school to assure that their interests and expectations are valued. Parents felt that any contribution they could provide to teachers would eventually benefit their child’s academic development (Downing & Rebollo, 1999).

Successful collaboration between parents and teachers has been documented in special education (Blue-Banning, Summers, Frankland, Lord-Nelson, & Beegle, 2004). Parents and professionals recognized good communication as an essential component of an effective collaboration (Lavay, Lytle, Robinson, & Huettig, 2003). When there is lack of collaboration and communication, parents tend to assume a passive role in the IEP process (Downing & Rebollo, 1999). Hence, many educa-
tional professionals are not soliciting parental input (Hager & Beighle, 2006) even though it is mandated by the IDEIA.

A collaborative relationship is an excellent way to empower families of children with disabilities (An & Goodwin, 2007; Downing & Rebollo, 1999). Castañeda and Sherrill (1999) found that in situations where coaches of a baseball league for children with disabilities interacted clearly with the parents, the families felt secure, confident, and empowered. In addition, the results also demonstrated that parents’ expectations for their child were to be physically active, to play like a “normal” child, and for their child to participate in physical activities with the whole family; however, to achieve these expectations, parents are in need of assistance from professionals.

One goal of APE is for children with disabilities to transfer the skills they learned in the gym to their community; however, often families of children with disabilities encounter barriers that impinge on their opportunities to participate in these recreational activities (e.g., lack of knowledge of how to modify activities, lack of time). Parental expectations toward the transition process of their child with a disability need to be considered as well. Their expectations toward their child’s transition from home to school and from school to community are fraught with uncertainty (Russell, 2005).

Russell (2005) explored the expectations of Caucasian families regarding these transitions. The findings indicated that some of the parents’ expectations in regard to the transition process were (a) for their child to make progress in school (e.g., learn to read and write), (b) for parents to obtain support, and (c) to acquire information from professionals regarding the transition process. According to Russell, parents developed their expectations based on previous experience, information provided by the school system, and formal networks of professionals.

Lack of knowledge about the transition process from the school system to the community among Hispanic parents has been documented (Rueda, Monzo, Shapiro, Gomez, & Blacher, 2005). Rueda et al. investigated the expectations of Hispanic parents of young adults with developmental disabilities regarding transition and the transition process using a qualitative research design. Overall, Hispanic parents expected an increase in the level of independence among of their children as a result of their participation in such programs; however, Hispanic parents also conveyed a sense of dissatisfaction with professionals providing the services to their children, primarily because they believed that the professionals did not value their input. Similar to Caucasian families, Hispanic families wanted more information regarding the transition process, more communication with service providers, and more information in their native language. A key finding of this study was that although Hispanic families wanted more independence for their children, because of their lack of trust in the educational system provided, they believed the best placement for their children was to remain at home with their families. In general, the families interviewed considered having a child with a disability as their responsibility and felt that they needed to support their child. Consequently, working outside the home was not an option for their children.

Given these cultural values that tend to be prevalent among Hispanic families, one possible approach to take with respect to the transition process is to involve the parents in the education of their children. This approach would help to address the communication and trust issues that exist among Hispanic families. Furthermore,
research findings support the effectiveness of using parents as teachers of their children with disabilities to improve aquatic skills (Prupas, Harvey, & Benjamin, 2006) and fundamental motor skills (Sayers, Cowden, & Sherrill, 2002) when practiced in the community. In order for this to work, parents are in need of training as to how they can work collaboratively with their child's teacher for the benefit of the child (Hunt, Soto, Maier, Liboiron, & Bae, 2004; Stuart et al., 2006).

**Theoretical Framework**

Bronfenbrenner’s (1977) ecological model of human development served as the theoretical framework to guide this study. The model proposes that a person develops his/her understanding through interaction with his/her social environment on four levels of interaction. The following demonstrates the application of the four levels of interaction to parents of children with disabilities.

The first level of interaction is called the microsystem. It represents the relationship between an individual and his/her immediate setting (e.g., parents, siblings, family members). The second level, mesosystem, is considered the tie of a child with the community (e.g., school, sports league, after school programs, church). Exosystems, the third level, are the social settings in which a child does not directly participate, but impacts their lives nonetheless (e.g., parental work, family stress). The last level is the macrosystem, which includes different societal rules, customs, principles, beliefs, and values.

Therefore, parental expectations can be organized using Bronfenbrenner’s ecological model of human development. Families of children with disabilities may develop expectations concerning their child, their role as a parent, and their interactions with professionals in relationship to the well-being of their children. The assistance of APE teachers is critical for achieving these expectations.

In addition to knowing the background regarding their students’ disabilities, APE teachers should know the desires and expectations of their students’ families, while respecting differing expectations. The current study was undertaken because to date, no research has identified the expectations Hispanic parents may have of their child’s APE teachers. The following research questions guided this study:

- What are the expectations of Hispanics parents of children with disabilities toward the professionals providing Adapted Physical Education?
- What are the physical, social, and emotional expectations of Hispanics parents of children with disabilities?
- What are the expectations of Hispanic parents of children with disabilities with regard to their children’s transition to the school system?

**Method**

**Participants**

In accordance with the purpose of the study, a purposeful sampling method was used to identify possible candidates to participate in this study (Creswell, 2003). The selection criteria required that participants were born in a Hispanic country
or identified themselves as Hispanic, and had a child with some type of physical, intellectual, or emotional disability. The recruited participants were Hispanic parents ($N = 11$) of children with congenital or acquired disabilities, who participated in an Adapted Aquatic Program and/or who received APE services in a local school district. Demographic information of the participants and their children are presented in Tables 1 and 2. Most of the participants were mothers ($n = 8$).

**Data Collection**

A qualitative research design was used to address the research questions of interest. Qualitative research is appropriate when a phenomenon needs to be understood (Creswell, 2003). Creswell indicated that the purpose of phenomenological research is to identify the essence of human experience concerning a phenomenon. Based on the purpose of study and the research questions presented, a phenomenological methodology proved to be the most appropriate.

Qualitative data were gathered through one-on-one semistructured interviews, conducted in the participants’ preferred language (Spanish or English). All interviews were conducted by the primary investigator (PI) who is bilingual. The selection of questions was based on an extensive literature review. To ensure content validity, a panel of experts, including higher education professors in the fields of APE, physical education, and family studies reviewed the interview questions:

1. What are your expectations for the professionals providing Adapted Physical Education services for your child?
2. What outcomes tied to physical activity do you hope your child will demonstrate?
   a. Physical Domain [for example, ride a tricycle or a scooter]
   b. Social Domain [for example, developmentally appropriate play]
   c. Affective Domain [for example, enjoy interacting with family while out to dinner]
3. What are your hopes regarding leisure, recreation, fitness, and sports as a part of your family routine?
4. What are your expectations regarding your child’s ability to access and enjoy community-based leisure, recreation, and sports programs?
5. What are or were your hopes regarding your child’s transition into the school system?

The expert panel reviewed the interview questions and provided feedback. Based on their recommendations, the PI made changes and redistributed the instrument to the panel for final approval. Next, the PI conducted a pilot study with one participant to ensure the quality of the questions. Feedback in regard to the clarity of the questions was provided by the participant and incorporated into the interview protocol.

Before the selection of participants, approval from the Institutional Review Board (IRB) office of a local university was obtained. The PI requested permission to contact the participants from the director of the aquatic program and the school district. Upon approval, school principals were contacted for permission to conduct the study. Once permission was granted by school principals, the PI contacted potential candidates. A phone call was made explaining the purpose of
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the study. If families showed interest in participating, meetings were arranged to get parental consent and conduct the interviews.

After receiving written informed consent, the PI conducted the interviews at the preferred location of the participants (e.g., their home). Each interview took approximately 40–55 min. Every effort was made by the PI to help parents feel comfortable. Introductory questions were asked to engage the participants in the topics. In addition, the definition of APE was clarified to the participants by the PI. All interviews were recorded via audiotape. The purpose of taping was to ensure accuracy, validity of content, and theme analysis of the individual interviews. Because of regional dialects among Hispanic groups, the PI asked participants for clarification during the interview process if the PI did not understand the meaning of a word or a phrase spoken. Upon completion of each interview, the tape was transcribed by the PI to ensure accurate data. Interviews in Spanish were first transcribed in that language, before being translated into English.

Data Analysis

Transcripts were analyzed through a constant comparative analysis (Denzin & Lincoln, 2003). Following the transcription process, researchers analyzed the data searching for patterns or connections among the participants’ responses. Initially, the researchers analyzed the data independently of one another, then as a group to reach consensus. Words, phrases, and ideas were coded and then placed into broader categories or themes. A list of topics emerged from the transcripts of each interview based on the participants’ responses.

All of the interviews conducted in Spanish were translated. To ensure the accuracy of the translations, the English translation of one interview in Spanish was sent to a bilingual external researcher for translation back into Spanish. That translation was then compared with the original interview transcript in Spanish for accuracy. The content of the interviews proved to be comparable, with the exception of the use of a few translated words, which had the same meaning in Spanish. This gave the researcher confidence in the quality of their translations. Consequently, only one comparable external translation was conducted.

Validation of the Findings

Trustworthiness. To ensure trustworthiness of the data, three types of triangulation were employed. First, the interviewer recorded field notes of parents’ body language. Field notes were used to identify nonverbal expressions that could not be captured on the transcripts. In addition to nonverbal expressions, comments or phrases were also noted. Second, once the transcriptions were available, they were returned to the participants for member checking to ensure that the information collected was accurate. The transcripts were sent to the participants in the same language that the interviews were conducted. If the participants were not able to read, the transcripts were recited to them. The aim was to ensure a rich and accurate description of the data (Creswell, 2003). This review process was implemented with all but three participants, who were not available after the interviews were completed. Lastly, transcript data were analyzed by multiple researchers, consisting of two Caucasian and two Hispanic.
**Researcher Role.** The PI performed the analysis and interpretation of the results to gain a better understanding of parental perceptions. The PI is Hispanic and possesses a formal education in the field of APE. The PI recognized that his ethnicity and previous experience working with children with disabilities might compromise the objectivity of this study. While this could have been a potential drawback to the study, the fact that the PI was Hispanic may have made the participants feel more comfortable and contributed to a more open dialogue.

**Results**

The purpose of this study was to identify the perspectives of Hispanic parents of children with disabilities regarding their expectations of APE in relationship to their child’s purposeful play and transition to school programming. Three themes emerged from the analysis: (a) qualified APE professionals, (b) challenges for the family, and (c) normalcy. These themes were supported by subthemes.

**Theme 1: Qualified APE Professional**

The parents in the current study perceived that the professionals who provided APE services for their children needed to demonstrate mastery in the profession; however, some parents were not familiar with the APE services to which their children were entitled. Therefore, they expressed a desire to know more about APE and how they could help their children develop as much as possible. The subthemes under Qualified APE Professional were (a) mastery skills, (b) development of child to capacity, (c) communication with parents, and (d) parental involvement.

**Subtheme: Mastery Skills.** In addition to high expectations for their children, parents wanted the APE professionals to have the appropriate competencies and knowledge to work with children with disabilities and to help their children to succeed. A mother of a child with Down syndrome indicated,

> That they be up-to-date with studies, I think it would be good that each one know the problem, the disability of every child, be updated, and learn a little . . . because it’s always important to be able to relate to the children.

**Subtheme: Development of the Child to Capacity.** The hope of every parent was for their children to be as successful as possible. Parents wanted their children to develop in other learning domains in addition to the cognitive domain in order to enjoy active participation in the community. They perceived this could be accomplished by participating in physical activity. A father of a child with autism valued the impact that APE services had on his child:

> Because self esteem is not only knowing how to read, knowing how to behave . . . all the components like emotional, affective, motor . . . and when it’s getting better through adapted PE the motor part . . . that also develops and it reflects on other social abilities. Everything, everything is a component . . . Adapted PE is one of the components. It’s like a puzzle . . . it’s one of the pieces that if it’s missing you can’t do the puzzle.
One way parents believed teachers could help their children to develop to capacity was simply by giving their children an opportunity to try new things. A mother of a child with cerebral palsy (CP) commented, “Maybe give her a little bit more confidence . . . I mean . . . give her a chance . . . don’t just sit her out and say . . . you know . . . you can’t do it . . . let her try.”

**Subtheme: Communication With Parents.** The third subtheme of mastery skills was communication with parents. Parents desired more ways to communicate and more frequent communication in their native language (Spanish) from APE teachers. They indicated the need for information about APE services and information about their children’s progress communicated in their native language. A father of a child with autism mentioned, “More information to the parents in Spanish . . . written as well as verbal . . . we have to remember that we work with different levels of education and not all understand the importance of physical development.”

In addition to receiving information in their native language, parents desired more ways to communicate. A mother of a child with spina bifida indicated the following:

I expect them to have more communication with the parents. . . . Maybe written notes about what activities the child is doing at school. If he is working on a new skill, so that I’ll be aware and work at home with him more.

This mother also mentioned that she wanted more communication:

If the APE teacher would have a little bit of communication. . . . Because usually I don’t talk a lot to the APE teacher . . . the APE teacher usually sees my child but I never get updated throughout like I do with say OT [occupational therapy] or speech [therapy] . . . and a lot of that is the misconception that they are not able to be contacted but I know they are, and I’ve really never had any communication with the APE teachers.

Although she received a report card from the school every six weeks, a mother of two children with disabilities (autism and CP) indicated this:

I think [6 weeks] is too long . . . of a time to know . . . if like he is working on a skill . . . . I think I should be aware maybe that week that he is working on it. Because after 6 weeks, I don’t think he is going to be working on the same thing.

**Subtheme: Parental Involvement.** The fourth subtheme of mastery skills was parental involvement. Parents considered it important for APE professionals to embrace and value parental support. Parents indicated they would like to be more involved in the educational process of their children, but they encountered barriers that interfered with their involvement. Some of these barriers included lack of knowledge about APE services and activities they could practice at home. In some cases parents felt rejected from the school system when they tried to advocate for their children.

A mother of a child with CP who advocated for more APE services reported that she was told that this was not possible. According to the mother, the individual
in charge of the IEP meeting told her, that regardless where she goes or who she contacts they cannot give more services to her child.

**Theme 2: Challenges for the Family**

The second major theme revolved around various challenges to the families. The participating parents shared challenges faced during school transitions, accessing community resources, in addition to the challenges of raising children with disabilities. The subthemes that emerged were (a) transition at school, (b) accessing community resources, (c) disability awareness, and (d) living with a child with a disability.

**Subtheme: Transition at School.** Parents perceived that the transition to school was not a smooth process. They perceived a lack of continuity when their children moved from one grade to the next, and they felt the APE services were interrupted. In addition, parents perceived that there was not continuity among the activities that were practiced at school nor did they understand how these activities transferred to the community. As a consequence, they believed the services to their children received were negatively impacted.

Transition at school was not the only issue for some parents. Anxiety over current programming and the transition from school to community was expressed by the mother of a child with autism as a concern:

> With the school district, I would expect . . . [they provide] more activities for [children with] special needs during the break time. Like summer time and winter time, when kids don’t really have a lot to do. [Activities at the park] geared to at least having more access to special needs children. Usually the activities at the park are more towards the regular kids and they usually need to be potty trained and they have certain restrictions so special needs children can’t go.

The parents of another child with autism mentioned that the majority of the programs were school-based, they indicated that the recreational programs offered at school should be extended into the community. The mother of this child remarked,

> I would like these services to be generalized . . . that they not only be in school, but also in the community . . . that those resources also be for the families of the children with disabilities. But that they not only be . . . here where we live we know that it’s only in school. That is not representative of such a big population of children with special needs. . . . That is [services] could expand to the community. Let’s say recreation parks, that they emphasize those types of services more.

**Subtheme: Accessing Community Resources.** Accessing community resources was identified as the second subtheme of challenges for the family. Families communicated a desire to be active in participating in physical recreation activities in the community. They wanted to actively participate in these types of activities, but due to various constraints it was not possible for them to do so. Some obstacles perceived
by parents included preference for sedentary lifestyles, lack of programs, finances, and their children's disabilities. The mother of a child with autism commented,

I hope that my family would do more sports, more outdoor activities that have to do with physical . . . being physically active. Because we mostly watch movies, go to the theaters and that is not physical. So I hope we will do more things together.

When asked why they performed these types of sedentary activities, she indicated it might be easier to deal with their children, “mainly because it is easier to keep the kids together, than going to [a park] . . . and because we are usually tired.”

Families took time to participate in recreational activities with their children, but a mother of a child with spina bifida highlighted the lack of programs for children with disabilities in their community. In order for them to participate, they often have to drive long distances. She indicated,

I wish there were adapted sports for her; there is really not anything out here for her, when we were at Coppell we used to do softball. But driving all the way from Irving to Denton is not an option any more. So there is nothing out there for her.

Regarding to financial constraints, a mother of two children with autism stated the following:

I believe it is more beneficial to be in a sport, practice a sport with those who are in physical education. But many times because of money, it can’t happen. . . . I also see him taking a liking to baseball and I know there are games, small leagues where there are groups of children . . . that have their games on certain days and everything, but almost always money stops us . . . there isn’t the money to get them into a sport.

Subtheme: Disability Awareness. The third subtheme under challenges for the family was disability awareness. Families of children with disabilities faced discrimination when trying to get access to community programs. For example, they felt awkward over the unwelcome stares they received. Often they felt their privacy was intruded upon by questions regarding their children’s disability. In some cases they felt they had to clarify that although their child had a disability did not mean that they did not have any positive attributes. For these reasons, parents perceived a need for disability awareness within the entire community, including children. The mother of a child with CP indicated that the disability of her child did not inhibit her from allowing her child to try new activities, but it might bother her child because of what other children may say. She stated this:

What I would like for my child . . . she doesn’t ride a bike . . . she can’t skate . . . she doesn’t ride a scooter . . . more or less for her to be more normal like a normal child . . . I mean to walk better . . . not to have so much of a limp. . . . I mean it doesn’t bother me so much, it bothers her more than it does me. . . . And kids can be cruel.
This mother also believed a need to educate teachers regarding children with disabilities and what these children were able to do. She indicated this:

I think she can . . . if they give her a chance . . . we have had teachers who have told her that she cannot do it . . . and she will just sit out . . . and she won’t try . . . if they give her a chance . . . she will do it.

**Subtheme: Living With a Child With a Disability.** Living with a child with a disability is presented as the fourth subtheme under challenges for the family. Parents of children with disabilities were often confounded when dealing with different situations, such as advocating for services for their children, health issues, and unique characteristics of their children. As a consequence, they may not have the emotional or physical energy to be involved in the educational process of their children. For example, the mother of the child with spina bifida reported this:

I don’t know why, I don’t know if it’s just that there are so many things are going on in the life of a special needs child that APE is the last thing you think about. You know when you are worried with receptive language, you are worried with occupational therapy, you are worried about making sure they can write their name and they have the energy to do that; you forget if they are not exercising and they are not doing these things.

Parents also wanted the opportunity to enjoy and communicate with their children. However, communication was not always possible, especially for children with autism. As one mother indicated, “He still doesn’t talk; he only says mama and just little words. I want him to be able to talk to me. That’s the main goal, in the whole world . . . that’s the only one . . . for him to talk.”

**Theme 3: Normalcy**

The third theme that arose from the analysis of the data were normalcy, and the only subtheme associate with normalcy was the desire to play the same way normal children play. Hispanic parents wanted their children to interact with children without disabilities and enjoy the same activities as “typical” children.

**Subtheme: To Play as Normal Children.** In addition to being able to communicate with their children, parents wanted their children to be able to socialize with children without a disability. The mother of a child with CP confirmed,

Other children leave him behind because they want to run, they want to play. Any activity that he does he always stays behind. This is why he doesn’t join other children to play. Because he knows he is the last one in everything. Then he always has to be with his brother, because he knows that his brother waits for him in everything. . . . I would like that he would socialize more with children, but at the same time . . . he fears being alone with other normal children because he knows he is always last.

Even though parents desired for their children with disabilities to be active in sport/recreational activities, this was not always possible. The mother of a child with CP commented in this regard:
He likes sports as I told you before, but sometimes he gets frustrated because he wants to play and he can’t do it. Then he gets frustrated . . . he falls or . . . they leave him behind or he can’t do that of a normal child. And we try that as with our other children, that he can do it and everything. But since he is a little bigger he notices that he can’t, that he can’t do that of a normal child.

The need for socialization appeared to be important for the participating parents. This need was clearly evident in a comment of one mother of a child with autism:

I want him to be able to play with other kids, because he is always by himself. He likes to play by himself; he likes to be just on his own time . . . he is in his own world. I want him to be able to go an extra level . . . play with a ball and pass to each other. I want him to be able to do something like that.

If their children were not able to play with other children without disabilities, parents in this study wanted for their children to be able to play with the family. The mother of a child with autism said, “Regular things that kids would enjoy like riding a bike . . . just to learn how to play together . . . with each other, with other kids and with me, their parents, to learn to play together.”

There is no greater joy than for parents than to see their child be successful in every aspect of life. If they saw that their children were having a good time the parents were satisfied. They wished the best for their children and wanted them to be able to enjoy activities like any other child.

**Discussion**

**Parental Involvement**

Hispanic parents perceived that a qualified professional should possess up-to-date knowledge with regard to his/her profession when working with children with disabilities. Overall, parents wanted teachers to help their children to develop to their full capacity by holding high expectations for the children.

Hispanic parents wished to be more involved in the educational process of their children, a finding that is consistent with the results of studies conducted with Caucasian families (An & Goodwin, 2007; Downing & Rebollo, 1999; Prezant-Pollock & Marshak, 2006; Wang et al., 2004). However, the results of this study differed from previous studies with Caucasian families in that the Hispanic participants tended not to interact with the APE professional who provided services to their children. Typically, Hispanic families are perceived as assuming a passive role in the educational process of their children (Geenen et al., 2001; Salas-Provance et al., 2002). For this reason, teachers need to identify strategies to encourage Hispanic parents to be involved in the educational process. Hispanic families need to develop trust in the professionals who serve their children. If families believe that a professional not only values their language, but also respects their culture, they may be more receptive to becoming involved in the APE programs.

While Caucasian parents expressed trust in the professionals providing services to their children (Castañeda & Sherrill, 1999), the results from the current study suggest that Hispanic parents did not express trust in the APE professional.
Participants in Castañeda and Sherrill study consisted of parents with some college education who were financially stable; however, in the current study, participants primarily demonstrated a limited education with a median income below the U.S. poverty level. This suggests that in addition to cultural and languages differences, differences in socioeconomic status and educational background may be related to parental level of trust.

**Lack of Knowledge**

The findings of this study also demonstrated that some parents lacked knowledge regarding services provided to their children. In addition, parents did not know how APE teachers could help them motivate their children to be more involved in recreational activities in the community. These results are contrary to previous research (An & Goodwin, 2007; Wang et al., 2004) in which Caucasian families were familiar with APE services available to their children. Therefore, to maximize parental knowledge, teachers of children with disabilities need to provide parents with the necessary information so they can gain an understanding about their rights and APE services. Parents also expressed uncertainty with respect to the modifications necessary to make participation in recreational physical activities. Much of this lack of understanding can be attributed to the lack of available information provided in their native language.

Hispanic parents preferred information in Spanish. Consequently, including an interpreter as a member of the educational team may prove to be extremely helpful to Hispanic families; however, having an interpreter will not necessarily resolve all of the problems. Workshops and in-services during which a variety of topics could be addressed (e.g., laws, services, and strategies) are two good methods for conveying information to parents.

Often Caucasian parents are involved in their children’s programs, providing ideas to the professionals who work with their children while also being involved in their children’s IEP meetings. Participation in the IEP meetings may provide them with an opportunity to have their voices heard and enable them to serve as advocates for their children (An & Goodwin, 2007). By contrast, a Hispanic mother of a child with CP encountered many communications barriers with the school administration.

Parents may perceive that advocating for their children with disabilities is their responsibility (Wang et al., 2004). Some of the obstacles encountered by Caucasian families advocating for their children have been reported in prior studies (An & Goodwin, 2007; Downing & Rebollo, 1999); however, in the case of Hispanic families, the problems faced may be different because they may not be aware of their rights and might experience significant language barriers. Consequently, Hispanic families may not consider the services provided to their children to be adequate.

**Communication Strategies**

Hispanic families who were familiar with the APE services in this study wanted more comprehensive communication with the APE teacher. Communication is an essential factor in the development of inclusive/collaborative environments (Blue-Banning et al., 2004; Castañeda & Sherrill, 1999; Downing & Rebollo, 1999; Hunt
Parental Expectations

et al., 2004). In the current study, a mother of a child with spina bifida indicated that although she received communication from an APE teacher every six weeks, she wanted even more frequent interactions. Another mother indicated a desire to have more communication with APE teachers to enable her to practice at home what the child learned at school. Research has demonstrated that parents have a need for more frequent communication with their children’s teachers (Blue-Banning et al., 2004). Generally, parents in the current study did not work collaboratively with professionals. Therefore, it is important to integrate procedures to recruit and obtain feedback from parents from different cultural groups into the curriculum process. Furthermore, it is recommended that collaborative work with parents and other professionals be emphasized in the development of future teachers of children with disabilities and their families (Lavay et al., 2003).

Shared Responsibility

Consistent with previous studies (An & Goodwin, 2007; Downing & Rebollo, 1999), parents in the current study wanted to share responsibility for their children’s educational process with teachers. For example, prior studies found that parental involvement in the educational process had a positive impact on the development of motor/play skills of their children with disabilities (Prupas et al., 2006; Sayers et al., 2002). In the current study, however, some parents lacked the skills to motivate or teach certain play or sports skills to their children. This indicates that teachers may need to assume a mentorship role that will help them to share their skills and expertise with parents.

Transition From School to Community Physical Activities

Some parents reported a desire for both a smoother transition within the school system, and from the school system to the community. Parents demonstrated a desire for the activities practiced at school to be generalized to the community. A viable alternative may be to modify the APE curriculum so students can practice at school some of the activities that are available within their community.

Families reported various barriers faced when attempting to access community resources. Similar results were reported in research conducted primarily on Caucasian families (Stuart et al., 2006). In the existing study, Hispanic parents wanted to extend the services their children received at school during the academic year to the community during summer and winter months.

In this study, a mother of a child with spina bifida indicated a lack of information regarding recreational programs for children with disabilities. She stated that the only information she received about programs was from a medical institution. Adapted PE professionals who provide services are experts in play, recreation, sports, and aquatics activities for individuals with disabilities. If they can share their knowledge with parents, it may help facilitate access to community facilities, thereby enhancing the quality of life for individuals with disabilities and their families.

Social Integration and Collaboration

The participating parents wanted their children to play with other children without disabilities, and believed that their children could develop friendships and
socialization skills through recreational activities. Martin and Smith (2002) reported similar results in finding that recreational activities are a vehicle that can be used to promote friendships among children. Students with disabilities need to share time with students without disabilities to socialize with them (Tripp et al., 2007).

Tripp and colleagues (2007) indicated that students with disabilities need to be exposed to working in collaboration with students without disabilities. This interaction helps them enjoy participating with peers and learn life skills. Some parents in the current study emphasized that their children were afraid to interact with children of the same age without disabilities. To compensate for this fear, parents preferred to have their children play themselves in recreational activities. This was evident in their preference toward individual recreational activities like swimming, bike riding, or going to a park and was comparable to findings reported by Mactavish and Schleien (2004). Some possible explanations for the participation in individual activities as opposed to competitive sport-related activities may be the lack of knowledge about adapted sport for children with disabilities or the lack of necessary finances. Consequently, APE professionals may need to identify strategies to collaborate and integrate Hispanic parents into their programs.

Limitations, Future Research, and Conclusions

A limitation of this study is the use of families with children with various disabilities. The needs of parents may vary depending upon the type of disability their children have; however, this is also one of the strengths of the study. Examining families of children having a variety of disabilities provided an overall perspective of the expectations of those families.

The findings clearly demonstrate the need for more frequent communication between APE service providers and Hispanic parents of children with disabilities. It is important that these professionals possess the knowledge to work with various sociocultural groups. Service providers need to appreciate the family background and empower parents to become involved in the educational process of their children.

Future research should address appropriate strategies that will assist in improving the involvement of Hispanic parents in APE programs. Other variables that researchers need to explore are the preferences of leisure time, recreational, or physical activities among Hispanic families. This may provide a beneficial contribution to the literature.

This research may provide APE teachers with insight on how to incorporate appropriate types of activities within their instructional programs specific to Hispanic children with disabilities and their families. The goal of physical activity programs should be to promote healthy participation in physical activities. If the physical activities implemented in the curriculum are pertinent to Hispanic students with disabilities, they may be more enthusiastic about continuing participation in similar community activities.

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References


