Parents of College Graduates with Learning Disabilities: Practices and Factors Attributing to Their Children's Preparation for Postsecondary Education

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Parents of College Graduates with Learning Disabilities: Practices and Factors
Attributing to Their Children’s Preparation for Postsecondary Education

Alexander Johnston Hale

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of
Educational Specialist

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ABSTRACT

Parents of College Graduates with Learning Disabilities: Practices and Factors Attributing to Their Children’s Preparation for Postsecondary Education

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The purpose of this qualitative study was to investigate and describe parenting practices that parents believe were effective in helping prepare their children with LD for college enrollment. Participants were chosen from among the parents of students interviewed by Cook (2010). Six parents (three couples) volunteered to be interviewed by phone. Interviews were recorded, transcribed, and thematically analyzed using hermeneutic phenomenological methodology. Under the category of Parent Practices, themes emerged in the areas of early identification, self-advocacy training, and home accommodations, and under the category of Family Factors, themes emerged in the areas reading, expectation, and normalization. Findings are discussed concerning the study's implications to both parents and educators.

Keywords: qualitative research, interview, parent perceptions, learning disability, postsecondary education, preparation for college
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DESCRIPTION OF THESIS STRUCTURE

This thesis, Parents of College Graduates with Learning Disabilities: Practices and Factors Attributing to Their Children’s Preparation for Postsecondary Education, is presented in a dual or hybrid format. In this hybrid format, both traditional and journal publication formatting requirements are met. The preliminary pages of the thesis adhere to university requirements for thesis formatting and submission. The first full section of the thesis is presented in the new journal-ready format and conforms to the style requirements for the Journal of Learning Disabilities. The full literature review, consent form, and interview protocol are included in Appendices A, B, and C respectively. Two reference lists are included in the thesis format. The first includes only the references found in the first journal-ready article. The second reference list includes all citations from the extended literature review found in Appendix A.
Introduction

According to U.S. Department of Education (2010), 13.2% of children ages 3-21 as having a disability of some kind. The largest category of disability identified by the Individuals with Disabilities Education Improvement Act (IDEA) is specific learning disabilities (LD), encompassing 42% of those identified, or 5% of the general school population (U.S. Department of Education, 2014; Snyger & Dillow, 2011). A specific LD is defined by the IDEA as a disorder involving the understanding and usage of either written or spoken language, which is not the result of mental retardation, emotional disturbance, or environmental, cultural, or economic disadvantage. A student with LD may experience elevated difficulty in performing any task that involves listening, speaking, reading, writing, spelling, thinking, or mathematical calculation (U.S. Department of Education, 2006).

The demands of performing such tasks in the public school system present enough difficulty for students with LD to significantly affect high school graduation rates. In 2008, the average freshman graduation rate (students that graduate after the typical four years) for public high schools in the U.S. was 76% (Snyger & Dillow, 2011), whereas the graduation percentage of students diagnosed with LD was 64% (U.S. Department of Education, 2010). A portion of students with LD go on to post-secondary education for vocational training or two- or four-year college or university programs. About 21% of these individuals attended a four-year institution in 2009, an increase of 5% from 2007, compared with 42% of total high school graduates in the same year (U.S. Department of Education, 2010). Relatively few students with LD pursue baccalaureate degrees, although the number is increasing.
Review of Literature

Students with LD who plan to enter colleges and universities face the challenge of being compared with peers who do not share their disabilities. Prerequisites for entrance and achievement at the college and university levels are similar for students with and without LD (Foley, 2006), resulting in lower success rates for students with LD (Abreu-Ellis, Ellis, & Hayes, 2009). Foley (2006) observed that the transition to postsecondary schools is often the first time students with LD have to deal with their unique challenges on their own and meet their own academic needs. The success or failure of students with LD in postsecondary schools is largely determined by their ability to meet the challenge of advocating for themselves (Foley, 2006).

One step in the process of self-advocacy is communicating the nature of one’s difficulties to teachers and peers; however, students with LD tend to conceal their disabilities (Foley, 2006; Heiman & Karive, 2004). Furthermore, many students are diagnosed in their later years of high school or after admittance to colleges and universities (Heiman & Karive, 2004), which delays the development of self-advocacy skills and other appropriate coping strategies.

College Success for Students with LD

As students with LD transition to postsecondary schools, the responsibility of disclosing the nature of their disabilities and advocating for appropriate accommodations falls upon themselves rather than their individual education program (IEP) teams (Foley, 2006; Gil, 2007). For many students, this is the first time they have had sole responsibility to advocate for themselves and many lack the necessary skills to do so. Success in a college or university program for students with LD is most often achieved when students use a combination of self-advocacy, specific learning strategies and classroom accommodations (Abreu-Ellis et al., 2009; Heiman & Karive, 2004; Lombardi, Gerdes, & Murray, 2011).
**Self-advocacy.** One of the most important self-advocacy skills is self-disclosure, or the act of disclosing the disability to instructors and explaining the effects of the disability on achievement. Formal self-disclosure occurs when a student verifies a previously diagnosed disability with the university’s student accessibility office and/or when the student presents documentation to course instructors explaining the effects of the disability (Heiman & Karive, 2004). In addition to disclosing the disability, successful students then advocate for accommodations that facilitate achievement in individual courses. Accommodations can help level the playing field and decrease stress caused by the disabilities (Gil, 2007; Heiman & Karive, 2004). However, The National Longitudinal Transition Study-2 revealed that two-thirds of students identified with LD in postsecondary institutions were not receiving accommodations because they did not disclose their disabilities (U.S. Department of Education, 2010).

Many students do not gain self-advocacy skills because they either do not receive adequate self-advocacy instruction at home or they do not learn these skills at school. Gil (2007) suggested that students with LD need to be prepared for transition to postsecondary institutions through self-advocacy training as part of the middle and high school IEPs in order to increase their chances of a smooth transition and to receive appropriate accommodations.

**Learning strategies.** Students with LD have difficulty with a wide range of academic domains, and must adjust their learning strategies depending on their own specific difficulties in order to achieve academic success. According to Trainin and Swanson (2005), in comparison to students without LD, students with LD generally do not show significant differences in problem solving and strategic preparation for tests; however, academic performance is closely correlated with these study strategies. By definition, students with LD have difficulty with processing information because of impaired language function. College students with LD often compensate
for difficulties with cognitive functioning with metacognitive learning strategies, which means they consciously control actions where automatic functioning is hindered (Abreu-Ellis et al., 2009; Trainin & Swanson, 2005). These strategies include test taking and study routines, help-seeking, and self-regulation.

Students with LD in postsecondary schools spend more time studying than their peers without LD, and use that time in advance preparation for lessons and tests to avoid cramming (Trainin & Swanson, 2005). Help-seeking has also been linked to more successful academic performance. Students who seek help from teachers, parents, and peers are more likely to have higher grade point averages than those who do not seek help (Abreu-Ellis et al., 2009; Foley, 2006; Gil, 2007; Trainin & Swanson, 2005).

Accommodations. It is estimated that of the students identified with LD who enter universities, 40% will need remedial coursework (Joyce & Rossen, 2006). Although IDEA mandates transition planning in high school, it does not address the needs of students with disabilities in college (Hadley, 2011). The Americans with Disabilities Act of 1990 (ADA) requires all educational institutions to provide reasonable accommodations in order to prevent discrimination of students with qualified disabilities.

Accommodations for students with LD can include, but are not limited to extended time on tests and course assignments, large print books, priority seating, taping lectures, reduced class load, note takers, modified test formats, and even course substitutions (Joyce & Rossen, 2006). Students are responsible for providing appropriate documentation of their specific learning disabilities to their school’s accommodations office and receive accommodations specific to their disability. Course substitutions can only be granted for non-crucial career content in which the
substitution does not constitute a fundamental change in the required program core knowledge base (Americans with Disabilities Act, 1990).

**LD in the Developmental Years**

A specific learning disability is a lifelong condition (National Joint Committee on Learning Disabilities [NJCLD], 2011). However, LDs are often unrecognized until specific limitations are exposed through difficulties with reading, writing, math or other academic pursuits. When a teacher or parent suspects a disability the processes of referral, evaluation, eligibility determination, and IEP development are well established. Once the disability has been diagnosed, ideally the parents and the school work together to determine appropriate levels of special education, supplementary aids and services, and/or accommodations that will address the student’s needs.

However, once the student begins receiving services the outcomes become less predictable. Success can be influenced by a variety of classroom factors, including teacher attitude, instructional effectiveness, appropriateness of curriculum and materials, behavior management and the socio-emotional climate of the classroom (McClesky & Waldron, 2011). Outside the classroom, the student’s success can be greatly influenced by peer relationships, such as classmates and other friends and acquaintances both at school and in extracurricular settings, and by parent and family factors.

**Parental Influences on Children with LD**

Learning disabilities affect more than just the diagnosed individual; they can impact each person socially and emotionally related to the individual. The family of an individual with LD is especially affected, and the impact is similar to that of more visible disabilities (Case, 2000; Dyson, 2010). Parents and other family members must learn to cope with the stress caused by the
negative aspects of the disability. Absent or ineffective coping strategies can augment stress and lead to family disorganization. Parents often feel guilt related to assuming personal responsibility for the disability, and marital tension is often a result of unequal distribution of parenting responsibilities (Dyson, 2010). For example, one parent may be away from the home during the times of day when most of the parent advocacy and support occurs.

Children with LD not only affect the home environment, but are also affected by it. A child’s attitude toward his or her own learning disability is influenced by factors in the home. Parental attitudes toward a child with LD, as perceived by the child, positively correlate with the child’s performance (Dyson, 2003). According to Dyson (2003), parents tend to rate their children lower on social competence and higher on behavior problems than the children do. The mother’s perception is generally more influential to the student’s own perception than the father’s (Dyson, 2003).

**Parental Influence on Preparation for College**

As mentioned, self-advocacy, specific learning strategies and classroom accommodations are keys to success for college students with LD (Abreu-Ellis et al., 2009; Heiman & Karive, 2004; Lombardi et al., 2011). Research into coping styles of adolescents with LD shows that successful students with LD ages 12-15 show different coping profiles than less successful students. Students with LD are more likely to develop passive, non-helpful strategies than their peers without LD, which puts them at an elevated risk because they also have an elevated need to develop coping strategies (Shulman, Carlton-Ford, Levian, & Hed, 1995).

Successful students showed higher motivation to learn, to credit their successes to hard work, and fewer tendencies to ignore problems or simply look on the bright side and hope things would work out (Firth, Greaves, & Frydenberg, 2010). Students with LD can benefit from
instruction on developing effective learning strategies, but show lower levels of internal coping in general, and demonstrate a lower tendency to approach, appraise, and decide independently how to deal with academic problems (Case, 2000; Shulman et al., 1995).

Parents help their children with LD gain these skills and understandings, and contribute in other ways to their student’s preparation. Smith, English, and Vasek (2002) suggest several things that parents can do at home to help their children with LD prepare to self-advocate for entrance into, as well as within, postsecondary institutions. Parents can aid in the rehearsal of skills such as honest and direct expression of thoughts and feelings, making eye contact, speaking clearly with appropriate emphasis, and making appointments (Harris, 2001; Smith et al., 2002). However, research is lacking from the parents’ perspective of the effectiveness of these practices or their use of these or any other unspecified practice or behavior. Another unknown is whether parents attribute the success of their students with LD to any specific self-advocacy building practices in the home.

Through their influence on their child’s emotional wellbeing, parental behaviors have a measurable effect on student achievement during the child’s adolescent years. Research not specific to children with LD indicates that when parents are involved in their adolescent children’s happiness and school progress, the children are more motivated, feel more effective, and achieve more than children whose parents adopt a controlling style based on rigid structure or coercion (Duchesne & Ratelle, 2010). No research was found that similarly described effects for children with LD.

**Problem Statement**

Research provides little evidence of effective parenting practices for helping children with LD prepare for college enrollment. Suggestions are numerous, but data-based and detailed
retrospective accounts of lessons parents have learned are few. This want of information leaves parents to fend for themselves and their children with LD while lacking resources to inform them of practices that could be helpful early in their children’s school careers.

**Purpose of the Study**

The purpose of this qualitative study was to investigate and describe parenting practices that parents believe were effective in helping prepare their children with LD for college enrollment. Insight into the home context and K-12 academic progress of students with LD who have been successful with college enrollment and subsequent graduation will provide deeper understanding on practices and factors that contribute to their success. Parents of successful students are in a majority of cases the most intimate observers of their children’s home context and academic progress though K-12 school years. This study aims to gain this deeper understanding of the academic success of students with LD by taking a closer look at student experiences through the lens of their parents by way of interview, and the lived experience of the parents themselves.

**Research Questions**

This study investigated two questions: (a) What practices do parents of students with LD report were instrumental in preparing their children for college enrollment? and (b) What other factors other than parenting practices emerged from parent responses?

**Methods**

This study used a qualitative research strategy in the tradition of phenomenology, specifically hermeneutic phenomenology. Phenomenological methodology attempts to describe experiences (phenomena) with as little variation as possible from the way they were experienced and establish a renewed contact with the original experiences (Gall, Gall, & Borg, 2007; Manen,
When dealing with the experience of others, descriptions of experiences are acquired through interviews. The purpose of the interview is to have the participant describe in as faithful and detailed a manner an experience of a situation that the investigator is seeking, precisely as it took place (Kvale & Brinkmann, 2009; Giorgi & Giorgi, 2003). Kafle (2011) explains that phenomenology is focused on meaning, the way things appear to us through experience, or in our consciousness, and the way in which meaning is constructed though and concerning our experiences. Hermeneutics is a distinct school of thought in the philosophy of phenomenology in that it concedes that reduction through interpretation is endless, but “…interpretation is all we have and description itself is an interpretive process.” (Kafle, 2011, p. 187) Thus, narrative description by itself is as valuable to meaning as any number of interpretations. Data for this study were acquired through interview, transcription, and thematic analysis using by the researcher and faculty advisor.

Participants

Participants were selected through a criterion sampling technique. Participants’ consent forms are included in Appendix B. We invited the parents of six college graduates with LD who participated in a previous thesis study conducted by Cook in 2010. The parents of three college students accepted the invitation and were subsequently interviewed. Both parents in each case were interviewed yielding a total of six participants, of which all were still married. All parents interviewed are Caucasian. In Cook's study, students were interviewed using phenomenological methodology to identify family factors in their childhood and adolescent years, which prepared them for eventual admission into a 4-year university. Of the themes identified in the interviews, parental influences were the most salient, thus, the parents of these students were selected for
this study in order to better understand their perspective. Each parent was interviewed separately in order to provide deeper and richer data for each student case.

**Settings**

Interviews were conducted by speaker phone, so participants were situated in their own homes. The interviewer used a speaker phone in a graduate student office or another private office for convenience in recording the interviews.

**Measures/Instruments**

The interview guide consists of one question based on the research question: “What family factors and parent practices do you believe were instrumental in preparing your child with learning disabilities for college enrollment?” Preplanned follow-up questions were used as needed to redirect conversation toward the research question.

**Data Collection**

**Interview procedure.** The interviewer used a speaker phone to contact each participant. The speaker phone allowed the interviewer to record the conversation. After initial greetings, the interviewer explained the purpose of the study and the roles of the interviewer and participant: the interviewer asked individual questions and the participant answered as desired. The introduction to the interview followed a script (see Appendix C) and the interview was based on one open-ended question, only asking additional questions to support natural and open discussion. Each interview was given a one hour time limit, however, not all participants used all the time allotted. Each interview was digitally recorded using an iPhone with recording software application and then downloaded and saved to a laptop computer.
**Interview transcription.** The researcher transcribed the interviews using a headset and foot control device and saved them as Word documents. The researcher and faculty advisor then analyzed the documents separately.

**Data Analysis**

Phenomenological data are scientifically acquired and analyzed in a three-step process described by Giorgi and Giorgi (2003). First, the researcher obtains the description of the experience. The second step is to enter into phenomenological reduction, meaning that the events, as the participant describes them, are taken exactly as presented without extrapolation or expansion based on the researcher’s personal experiences. The third step is to seek the essence of the phenomenon through thematic analysis.

Thematic analysis is the process of reading and coding interview data into larger categories according to similarity (Braun & Clark, 2006). Themes emerge as coded data is revisited and reviewed to establish recurring patterns (Richards, 2005). Braun and Clark (2006) identify six steps in thematic analysis. Step one is *familiarizing yourself with your data.* This involves transcribing the interview, reading and rereading the transcription. In this step, the researcher begins to look for patterns of meaning and issues of potential interest in the data. Step two is *generalizing initial codes,* or the initial list of ideas derived from the data. Interesting features of the data noticed during the process of familiarization are coded and applied systematically to the entire data set. The third step is *searching for themes,* during which codes are used to compile data into potential themes. Step four is *reviewing themes* to decide whether candidate themes have enough data to support them as legitimate themes. Step five is *defining and naming themes.* This involves operationally defining and clearly naming each theme. Step six is *producing the report* in which the results are described and explained theme by theme.
Data from this study was read, coded and organized into themes separately by the researcher and faculty advisor (Burla, et al., 2008). The researcher and advisor then met and discussed the coding and themes to resolve differences in interpretation (Burla, et al., 2008). Once the data were categorized into themes, the researcher reported and discussed the findings. The following section describes those findings.

Findings

Study findings are reported parent practices and other factors. These categories reflect the format of the interview questions: What parent practices and other factors do parents of students with LD report were instrumental in preparing their children for college enrollment? Themes within these categories emerged based on commonality between participants’ responses, as well as emphasis given by individual participants. Family members (mother, father, and child) were given alliterative pseudonyms to protect their identity as well as provide ease of reading. Family pseudonyms are as follows (mother, father, and child): Mary, Mark, and Molly; Rose, Ron, and Ryan; Sara, Sam, and Sandy.

Parent Practices

Parents described their personal practices regarding their responsibilities in ensuring the academic progress of their children with LD and preparing them for postsecondary education. Parent practices are organized into the following themes: (a) early identification, (b) parent advocacy and self-advocacy training, and (c) home accommodations.

Early identification. Parents reported that the timeliness of identifying their child’s learning disability was important. Sam stated: “Had I known that my daughter, early on, learned in a different way than I learn, and [that] there are different ways people learn, I would have been
a much better parent.” Other parents, because of their own educational background had an advantage in identifying their child’s learning disability. Mary explained:

I kind of figured out when she was a preschooler that she learned differently….I had gone in to just be a teacher’s aide with, um, kids with learning disabilities and ADD [Attention-Deficit Disorder], and so I really think that was key in me recognizing [the learning disability]….I also have a background as an elementary teacher.

Mary further explained. “I asked the school psychologist and counselors to start some testing on her to see if I could kind of figure out what was going on with her.” Similarly, Ron noted,

I had some knowledge of learning disabilities and was able to identify that there was a problem….Rose, I would say, far and away was the number one reason in terms of her being able to identify the problem early.

Rose noticed there was a problem early because, “I started him reading when he was three—I started to teach him to read. And I’m a fairly good teacher but I just, I didn’t have any experience with learning disabilities.”

**Parent advocacy and self-advocacy training.** Parents reported on the myriad ways they intervened with the schooling of their children with LD. After playing an active role in her daughter’s identification for special education, Mary continued as a liaison between the special education and general education teachers: “I felt like my role was to work with the MTA [multisensory teaching approach] teachers and bridge between her regular classroom teachers to help them understand what, what was going on with Molly.” She attended meetings, often accompanied by Mark, and played an active role in Molly’s IEP. “I started asking questions and there were some accommodations I was not comfortable with.” Mary went further, “I would go
into the school at the end of the year and meet with her next year’s English teachers.” If Molly received poor grades on report cards, “I would email the teacher and say, ‘Is something going on? Do we need to talk?’”

Mark explained the intensity of his and his wife’s involvement: “There’s just a lot of work with teachers….It really required a parent to be very involved to understand the laws, the rules, what’s available.” Rose similarly expressed, “I emailed [teachers] constantly because [Ryan] would come home and wouldn’t know the first thing about what assignment [he] had for homework.” Ron elaborated: “[Rose] got really involved in the school district. She got to know all the teachers. She was PTA president.”

Sara and Sam emphasized the importance of teaching their daughter to advocate for herself. Sara explained: “I had her be her own advocate.” Sam added, “We encouraged and helped her to meet with teachers after hours.” Sara explained how she would prepare Sandy for meeting with her teachers. “I just remember kind of coaching her about what she needed to say or do if this happened or that happened….I would tell her exactly what she needed to do the next day.” Yet she still intervened as necessary: “I would talk to her teachers and explain that she was having trouble and that she might need extra help.” Sara explained her view on the importance of self-advocacy:

They have to have the experience of doing something hard, being successful at it, failing a few times, but ultimately being successful in a few things and feeling like they could do it on their own and they could find a way to make it work on their own. That’s what made Sandy think she could go to college and do it, and be successful.
**Accommodation in the home.** Along with the emphasis on reading, several participants explained ways they would assist their children with LD with reading and other academic skills. Mary said, “We could do at home things they were doing in the classroom.”

Both the Mark/Mary and Sam/Sara families mentioned getting books on tape. Mark explained that “Molly’s library came through the mail with books on tape,” which helped her be “… as well-read as the rest of us.” Sara said, “We found a library that rented recorded books—books on tape—and she would [listen] to those books.

Rose said, “I personally worked with [Ryan], just uh, forty hours a week, probably.” Ron explained how Rose would work with Ryan: “She would go into his room and they’d sit and they’d drill for tests.” Ron elaborated on the different techniques Rose would use: “…Like repetitive motion things, like bouncing a ball, jumping on a trampoline, something like that to aid in getting the information in.” Rose explained: “We experimented with a lot of different things.”

**Summary.** The parents interviewed generally described a home environment which emphasized academic progress through the practice of reading frequently and an expectation of postsecondary education. Their children with LD participated in home activities similarly to their nondisabled siblings. The parents shared optimistic outlooks for their students’ academic progress and eventual college enrolment.

Each of the families mentioned the importance of early identification of their children’s learning disability whether or not they felt successful in doing so. Advocating for, as well as training their children to self-advocate regarding their disability, were common practices among participants. A majority of the parents interviewed openly acknowledged the difficulty of advocating and accommodating for their children with LD. Some elaborated on spending a lot of time providing academic support at home for their children.
**Family Factors**

Participants responded to the research question identifying factors in their respective home environments. Each parent’s responses are descriptive of their student’s time at home. Family factors are organized into three themes: (a) facilitation of student’s reading, (b) expectation of academic success and advancement, and (c) acceptance and normalization of the learning disability.

**Facilitation of student’s reading.** All three families reported reading together. At least one parent from each family indicated giving extra reading time and instruction to their child with LD. Mary elaborated on her reading with her daughter: “We always read every single day.” “I read to her, she read to me, even clear through high school.” Sara emphasized that it was a shared family responsibility to read to her daughter: “I read with her at home, and her dad, and my mother—who is a teacher—read with her too.” Ron and Rose talked about reading as a necessary aspect of the academic focus of the family. Rose stated: “We read a ton in our house.”

**Expectation of academic success and advancement.** A majority of the parents strongly emphasized the importance of expectation that their children would go to college and be successful academically and spoke about their expectation specifically. Sara said of her daughter, “We expected her to succeed, and we were willing to help her do whatever she could to succeed.” Sam supported his wife’s statement “We taught Sandy at home, you know, that she could do anything that she wanted to.”

Ron and Rose spoke of expectation from a different angle. Ron explained: “…we have, on both sides, at least two generations of college education….A college education was an expectation.” Rose said: “We’re like obsessed with academics in our house, so the expectations were very high. We’re fanatics about education.”
While speaking concerning the topic of academic expectation, many of the parents emphasized balancing academics with extracurricular and low-pressure activities. For example, Mark and Mary described Molly’s running as being an important balance and motivator for academic performance. Speaking of Sandy, Sam emphasized how he and his wife encouraged her to have hobbies and skills in areas of interest outside of school; “We… let our kids experience—to let them find out what they like in life.”

The parents interviewed talked very little, if at all, about other possible alternatives to postsecondary education as options for their children with LD during their preparation. One mother said that she wanted her daughter with LD to “…pursue whatever major she wanted,” but there was no mention of the daughter doing something other than college. One father considered retrospectively that options other than college may have been appropriate and possibly better for his daughter, but did not communicate that perspective during the time of that decision.

Acceptance and normalization. Parents commonly spoke of treating their children with LD the same as their other children, while still acknowledging and addressing their disabilities. Mary said: “I didn’t want to get into the business of comparing [my daughter]….I tried to incorporate the [other] kids in her learning as much as possible.” During reading time, Mary would instruct her other children “…not to…help her if she gets stuck on a word, but give her a few minutes or a few seconds to try to figure it out on her own.” Mark explained: “She had a different approach to how she learned and she read, but she did what the rest of us did.” He continued, “We just didn’t try to make too many excuses or exemptions for her.”

Referring to his daughter’s learning disability, Sam said: “I don’t know if disability is the proper word because it’s just the way she is.” He continued, “Sandy has got more abilities in learning the way she learns than I do; she just learns different[ly].”
The attitude of acknowledging the students’ disabilities without removing opportunity was common among all participants. Rose related an experience where she relearned not to make an exception for her son when he wanted to run for student government.

I was just trying to talk him out of [it]. ‘Come on. You can’t do that. There’s no way you can do that. Don’t do it this year; run some other time.’ He says: ‘Nope. No, I’m going to do it.’

However, when he was elected, her attitude changed. In a matter of fact way, she related a later experience talking to a high school administrator.

I’d say: ‘Well, Ryan wants to take chemistry.’ They go: ‘It doesn’t matter. Special needs kids can’t take chemistry.’ ‘Well, we’re going to take chemistry anyway.’ And then Ryan ended up getting a B+ in chemistry.

Many of the parents interviewed repeatedly emphasized the intelligence of their children with LD, possibly to mitigate a negative perception when talking about learning deficits. It was apparent that the interviewed parents did not see their children’s LD in a way that affected them beyond the specific learning areas.

Discussion

Interviews were based on one open-ended question: What practices and family factors do you believe were instrumental in preparing your child for college enrollment? The interviewer only provided supportive encouragement to facilitate natural responses describing each parent’s experiences. Based on phenomenology methodology, parents were encouraged to respond openly in a natural, conversational narrative, influenced primarily by their own lived experiences.

Overall, the participating parents expressed a high level of involvement with their children. This involvement included parent advocacy across their students’ K-12 experience, at-
home educational support, home accommodations, and participation in their children’s transition planning. Parents emphasized their own role in advocating for their children, yet also acknowledged their children’s contributions.

All identified positive qualities in their children, especially emphasizing that their children were bright and capable. All participants talked about their children being intelligent, despite their struggles with LD. In regard to academic performance, mothers attributed the academic success to the children; whereas fathers attributed children’s success to the mothers. Similar to previous findings, in comparison to fathers, mothers reported much higher levels of interaction with and engaging in active advocacy for their children with LD (Al-Yagon, 2015). Additionally, this active maternal role may be based on the fact that all participating fathers worked outside the home and all of the mothers were full-time homemakers. However, the fathers reported attending school meetings and sometimes, when time permitted, fathers assisted with homework and recreational activities.

This study included six parents, a small sample. Consequential to having such a small sample is that this study’s findings may not generalize to the broader population of all parents of students with LD. However it should be noted that a large sample size is not a priority in qualitative research, because the goal is to provide shared meanings, not to provide countable data points (Goldberg, Higgins, Raskind, & Herman, 2003). The interviews permitted these parents to voice their lived experiences, offering valuable insights about their challenges, frustrations, and successes. The experiences may not be fully generalizable, but the lived experience is useful to help others in examining and understanding their own unique experiences. Their interviews offered an inside view of the parents’ perspective which is often underappreciated (Murray, Handyside, Straka, & Arton-Titus, 2013; Spradley, 1979).
As the findings of this research are considered, it is also important to acknowledge that the participants were a very select group of individuals. Parents who participated reported their children were previously identified with LD during K-12 schooling. However, in spite of their learning disability, these students graduated from high school, were accepted into a university, graduated from a university, and were currently living away from home.

All participating parents were married and thus each child described in this study had two adults who assisted with homework and interfaced with school activities and responsibilities. This was a unique group of parents whose children were highly successful after graduating from high school.

The convenience sample consisted of six parents who were from a narrow demographic background, with similar religious and socioeconomic status. All parents previously attended college, though not all graduated. These characteristics are not representative of all parents who have children with learning disabilities; therefore, the information participants shared may not generalize to other parents from more diverse backgrounds. However, insights from their specific experience have a transferable value by allowing the reader to interpret and find meaning for him/herself even though the participant sample in this study is only specifically representative of parents whose children with disabilities attend and graduate from college (Irwin & Elley, 2013).

Another aspect to consider, this research was retrospective in nature; hence, parents’ interviews included descriptions of their children’s K-12 schooling and home life prior to college enrollment. Their perceptions may have changed over time. The success of their students (enrollment and later graduation from college) afforded these parents with a more positive view of the extensive labor dedicated to their children’s K-12 education.
Implications for Educators

K-12 Schools are required to provide educational accommodations for students identified with educational disabilities, including LD (U.S. Department of Education, 2006). In fact, when a person suspects a disability, schools are required to conduct an assessment and meet as a team to discuss the need for special education services.

Based on data from the National Longitudinal Transition Study (Shogren & Plotner, 2012), the vast majority of parents and students with disabilities are not actively and integrally involved in transition planning. Additionally, the data also show limited participation from community agencies and support personnel, those professionals involved with students after graduation from high school. Strengthening self-advocacy must be part of students’ transition planning, more strategically involving students in making transition plans that will adequately prepare them for their choice of either future college and/or community and work environments (Shogren & Plotner, 2012). Additionally, Murray et al. (2013) emphasize the importance of empowering parents and helping them gain confidence and trust in their partnership with special educators.

Many students have negative experiences while self-advocating even after appropriate self-advocacy training due to stigma associated with disability (Stamp, Banerjee, & Brown, 2014). Stamp et al. (2014) identified stigma as a major deterrent to self-disclosure self-advocacy. Many students are turned away from seeking help and accommodations because societal perceptions of LD (Quinlan, Bates, & Angell, 2012). Negative perceptions of disability can even be perpetuated by professors and teachers. In a qualitative study by Quinlan et al. (2012), one student reported requesting accommodations from a college professor who responded, “So you are stupid and you want extra help” (p. 228). This may be an extreme example, but it identifies
the rationale behind the fear of self-disclosure. Seeking accommodations is also often perceived by peers and teachers as a way to “cheat the system” and get extra help beyond what the disability merits (Stamp et al., 2014). Teachers do not need to understand the disability to accommodate, but to understand accommodations and to be willing to accommodate without judgment (Quinlan et al., 2012).

Universities do not have the same requirement to provide accommodations as K-12 schools. Unlike teachers in K-12 schools, university professors have no obligation to provide accommodations unless the student seeks out university accessibility services and pursues that option of their own accord. When parents have been diligent in advocating for their child’s education, the parents’ role modeling of advocacy creates a template for the student’s behavior of self-advocacy, but many students do not continue to seek needed support. Being realistic about students’ capacity means knowing that challenges with LD do not disappear upon entering college. Students with LD who enter college have nearly a 70% dropout rate (Lightner et al., 2012). Upon entering university transition, students with LD should be instructed about the need to self-advocate and seek assistance at university accessibility centers.

The accessibility centers at most universities provide specific instruction for students on how to request accommodations from their professors, and how to provide the necessary documentation. Although this process has to be carried out by the student, the instruction and guidance provided by accessibility centers makes the process relatively simple. Aside from requesting appropriate accommodations, students with LD would benefit from a class specially geared to organizational skills. College students with LD are encouraged to take a freshman class to help them organize their time and class materials and develop good study habits. Most
universities provide these types of classes, and information and registration may be acquired at their respective accessibility centers.

**Implications for Parents**

Parents in this study held expectations of academic success and had a family tradition of post-secondary education. These parents held high goals for their children. Similar to research conducted by Irwin and Elley (2013), parents' personal backgrounds, their expectations for their children, and their day-to-day interactions with their children shaped their children's futures and the likelihood of their children attending college and pursuing professional endeavors.

Although one parent feared that her child might not go to college, she resolved to not relay this personal fear aloud or share it with her child. On the exterior she fully expressed that her child was going to college and went forward with this hope. All parents in this study were invested in providing extra homework assistance, particularly preparing students for exams and in developing effective learning strategies. Ideally, students learned advocacy skills from their parents. Self-advocacy skills are necessary for post-secondary academic success; however, the parents emphasized their own advocacy on behalf of their child rather than direct self-advocacy instruction. According to Bowen, Hopson, Rose, and Glennie (2012), students’ perceptions of their parents’ involvement and academic expectations positively influenced children’s reading and math scores. It is likely that self-advocacy training happens indirectly through the parents’ example rather than formalized instruction.

Previous research (Grigal, Neubert, Moon, & Graham, 2003; Lightner, Kipps-Vaughan, Schulte, & Trice, 2012) indicated parents saw the benefits of and encouraged student involvement in IEP meetings and transition planning. Parent involvement needs to continue to the point where parents and students seek disability services prior to starting university classes,
getting linked into services that support their educational needs. Lightner et al. (2012) also noted the importance of students’ self-awareness of their own learning disability. Those who were aware of their disability and who went to seek university assistance early on, rather than waiting for failing grades and academic crisis, were much more successful academically, earning higher grades (Lightner et al., 2012).

When students were open with others about their disability and recognized the importance of attending to their own educational needs, they were able to successfully negotiate the transition into higher education. This critical transition from high school to college needs to be a smooth handoff, rather than a drop-off-at-the-curb. Transitioning should involve the parents, students, and university accessibility counselors in order to ensure that the needed educational accommodations and services are in place (Lightner et al., 2012).

Parents in this study admitted that preparing their children with LD for college enrollment was hard work—“a lot of work…”—leaving outsiders to wonder if these parents would do it again, or in hindsight if they would recommend this same path to others. Participants responded to the research question assuming the same goal as the research question implied, which was college enrollment. Participants made comments implying that their children only successfully enrolled in college as a result of how much effort, anxiety, and work they, the parents, put into their children’s academic success. Later in the interview, these same parents offered advice, as if to other parents in similar situations, emphasizing not to worry as much as they did, and to relax more. Ironically, had they taken their own advice, their student may not have had the academic success necessary to enroll in college.

This leads to the supposition that possibly college enrollment does not need to be every parents’ goal for their children. Ultimately some students and parents may find other goals to be
more satisfying and rewarding. Goals may even change, and should reviewed periodically. As noted by one parent, “It is a life sentence when you have learning disabilities. It is for the parents and it is for the kids.”

Possibly this life sentence would not appear so bleak if goals were aimed more toward each child’s skill set, rather than narrow and predetermined definitions of success within an educational context. Parents must consider the possibility of assisting their students in pursuing difference goals other than college.

Although considerations other than college enrollment were not pursued by participants in this study, not all students with LD will have skill sets that are advanced enough to make college a realistic option. Similarly, Goldberg et al. (2003) concluded:

Much of the LD field’s view of the challenges faced by individuals with LD has been shortsighted, focusing primarily on educational contexts….We need to place greater emphasis on developing compensatory strategies aimed at circumventing difficulties rather than spending inordinate time remediating deficits. (p. 234)

When creating transition plans, teachers, educators, and students should focus on students’ unique strengths and interests, fully considering a broad range of options and possibilities. Similar to training for a marathon race, factors to consider include the parents’ support and students’ stamina to sustain high levels of academic investment geared toward post-secondary education. Parents’ advocacy and students’ self-advocacy also play critical roles in successfully mastering K-12 and ultimately securing a university education.

Unfortunately, the context of formal education often focuses on child deficits rather than child strengths, particularly for children with disabilities. However, from these parents’ viewpoints, children are not defined by their deficits, but rather by their strengths. As one parent
noted, “I don’t know if disability is the proper word because it is just the way [my child] is….Because somebody learns different than somebody else doesn’t make them [disabled]. [My child] has got more ability to learn the way she learns than I do. She just learns differently.”

**Conclusion**

Based on qualitative interview results, certain common themes emerged as are listed and further explained in the findings section. Most notably, all parents reported high levels of involvement in the academics and advocacy of their children with LD, which was supported and emphasized by their respective spouses. The participants described their home contexts as being goal-driven well organized and balanced between scholarly and extracurricular activities. Underlying all was a general positive regard for the students with LD by their parents; all interviewed parents identified positive qualities in their children, especially in regard to their competence.
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Students with learning disabilities (LD) who plan to enter colleges and universities face the challenge of being compared with peers who do not share their disabilities. Prerequisites for entrance and achievement at the college and university levels are similar for students with and without LD (Foley, 2006), resulting in lower success rates for students with LD (Abreu-Ellis, Ellis, & Hayes, 2009). Foley (2006) observed that the transition to postsecondary schools is often the first time students with LD have to deal with their unique challenges on their own and meet their own academic needs. The success or failure of students with LD in postsecondary schools is largely determined by their ability to meet the challenge of advocating for themselves (Foley, 2006).

Stereotypes about people with learning disabilities have changed over the years as society has come to better understand the condition (Field, Sarver, & Shaw, 2003). Whereas many in the past simply categorized students with LD as a group that struggles in school and social situations (Hastings & Graham, 1995; Krause, Nixon, Beer & Beer, 1991), the current trend toward inclusive classrooms and societal awareness of LD has altered this view (May & Stone, 2012). Still, May and Stone (2012) found that college students without LD stereotype students with LD as having lower than average intelligence, contrasting with the IDEA definition of LD that does not mention diminished intelligence (U.S Department of Education, 2006). Fear of being misunderstood is one reason why college students with LD delay disclosing their condition and seeking the assistance and accommodations that help early disclosers be successful (Lightner, Kipps-Vaughn, Schulte, & Trice, 2012).

As students with LD transition to postsecondary schools, the responsibility of disclosing the nature of their disabilities and advocating for appropriate accommodations falls upon
themselves rather than their school IEP teams (Foley, 2006; Gil, 2007). For many students, this is the first time they have had sole responsibility to advocate for themselves and many lack the necessary skills to do so. Success in a college or university program for students with LD is most often achieved when students use a combination of self-advocacy, specific learning strategies and classroom accommodations (Abreu-Ellis et al., 2009; Heiman & Karive, 2004; Lombardi, Gerdes, & Murray, 2011).

One step in the process of self-advocacy is communicating the nature of one’s difficulties to teachers and peers; however, students with LD tend to conceal their disabilities (Foley, 2006; Heiman & Karive, 2004). Furthermore, many students are diagnosed in their later years of high school or after admittance to colleges and universities (Heiman & Karive, 2004), which delays the development of self-advocacy skills and other appropriate coping strategies.

**Self-Advocacy**

The term “self-advocacy” refers to the act of representing oneself in terms of one’s own disability. This includes self-disclosure (communicating the nature of one’s disability), and help seeking. Self-advocacy also includes understanding the nature of one’s own disability, knowing the resources and accommodations available for the disability, and taking necessary action to receive the appropriate resources and accommodations (Gil, 2007; Wilgosh, Sobsey, Cey, & Scorgie, 2008). In a school context, self-advocacy can occur when students remind their teachers of needed accommodations, asking questions, and, when old enough, participating in IEP meetings. Students with disabilities should know the name and description of their diagnosis. They should know the learning environments and situations that will be problematic for them, and know how to use appropriate and effective coping strategies in order to deal with them.
Self-advocacy requires knowledge of available assistive technology, such as audiobooks, and the courage to request them when needed. Students can self-advocate effectively by being bold enough to inform teachers of the specific teaching methods that are helpful. (Gil, 2007; Smith et al., 2002; Wilgosh et al., 2008) High school is a good place for students to practice self-advocacy skills that will be helpful in college by meeting with teachers and discussing their situation and to get feedback (Gil, 2007).

**Learning Strategies**

Learning strategies can be defined as “a person’s approach to learning and using information” (University of Kansas, 2015, p.1). Using metacognitive strategies to organize work, plan and implement procedures, and check accuracy is a well-validated approach to helping students become more effective and efficient learners (Deshler, Alley, & Carlson, 1980). Learning strategy instruction has proven effective for reading, writing, math, thinking, memorization and retrieval, assignment completion, social skills, and other purposes (Lenz & Deshler, 2004). Research describes strategies used by college students with LD for finding information, selecting main ideas, studying, preparing for and taking tests, and managing time (Allsopp, Minskoff, & Bolt, 2005; Reaser, Prevatt, Petscher, & Proctor, 2007).

Students with LD have difficulty with a wide range of academic domains, and must adjust their learning strategies depending on their own specific difficulties in order to achieve academic success. Trainin and Swanson (2005) write that, in comparison to students without LD, students with LD generally do not show significant differences in problem solving and strategic preparation for tests; however, academic performance is closely correlated with these study strategies. By definition, students with LD have difficulty processing information because of impaired language function. College students with LD often compensate for difficulties with
cognitive functioning with metacognitive learning strategies, which means they consciously control actions where automatic functioning is hindered (Abreu-Ellis et al., 2009; Trainin & Swanson, 2005). These strategies include test taking and study routines, help-seeking, and self-regulation.

Successful students with LD in post-secondary schools spend more time studying than their peers without LD, and use that time in advance preparation for lessons and tests to avoid cramming (Trainin & Swanson, 2005). Help-seeking has also been linked to more successful academic performance. Students who seek help from teachers, parents, and peers are more likely to have higher grade point averages than those who do not seek help (Abreu-Ellis et al., 2009; Foley, 2006; Gil, 2007; Trainin & Swanson, 2005).

**Accommodations**

Under IDEA, schools are required to identify students with disabilities as soon as possible and provide educational services and interventions without the students or their families needing to actively seek assistance (U.S. Department of Education, 2006). An IEP team makes decisions about the educational goals, interventions, and accommodations for the student, which may or may not involve the participation or input of the students themselves, depending on the students’ capacity for understanding and taking part in the discussion. After high school, these services are no longer provided, and the students must take upon themselves the responsibilities previously assumed by the school. Without training, it is difficult for a student to acquire the necessary skills to advocate for her or himself (Gil, 2007).

Students with LD can benefit from wide range of accommodations that assist in the presentation of information as well as the manner in which they are required to respond to the information in assignments and tests. Accommodations can be provided to assist with reading;
when, where, and how tests are taken; and modifications to the assignments required for the student. The accommodations available to students in high school and college are the same with only a few variations in the availability of assistive technology (Bolt, Decker, Lloyd, & Morlock, 2012; Joyce & Rossen, 2006).

A survey by Bolt et al. (2012) indicates students typically use the same accommodations in college that they used in high and find them to be equally helpful. More students reported using accommodations in college than in high school, which is likely due to the elevated demands of the curriculum (Bolt et al., 2012). Although some accommodations were not used by many of the students, such as dictating responses to a scribe, those who reported using them reported using them with a high frequency, and found them to be very helpful (Bolt et al., 2012). This could possibly be because many students are not aware of the specific accommodations available to them and have difficulty seeking accommodations they did not receive in high school. This suggests that more instruction in self-advocacy efforts and appropriate accommodation needs to occur at the high school level by parents, teachers, and counselors so students have these skills as they transition into the college setting. Extended time on tests and assignments is most commonly rated by students as an effective accommodation, and research shows that students with LD make more significant gains in performance than their non LD peers (Bolt et al., 2012; Ofiesh, 2007).

**LD in the Developmental Years**

Introduced by Sam Kirk in the 1960s, the term *specific learning disabilities* describes difficulties in reading, writing, math, and other skills that are not caused by intellectual impairment, vision or hearing problems, or other observable conditions (Kirk, 1962). The category was one of the original disability classifications included in the 1975 Education for All
Handicapped Children Act (20 USC 1401) and continues in the Individuals with Disabilities Education Improvement Act (IDEA) (U.S. Department of Education, 2006). Specific learning disabilities constitute the most common classification of disability identified and served in public schools, currently about 35% of students enrolled in special education (U.S. Department of Education, 2014). The American Psychiatric Association (APA) uses a different name and definition for the condition, preferring the term specific learning disorder to specific learning disability (Diagnostic and Statistical Manual of Mental Disorders, 5th edition [DSM-5], 2013). The APA definition is more descriptive of academic skill deficits and diagnosis, and also refers to effects of the disability on work and daily living. Still, there is considerable overlap between the two definitions and both are useful in the respective fields of education and mental health services.

Descriptions of LD subtypes have emerged over the years. Dyslexia, or difficulties with aspects of reading, is the most common type (Cortiella & Horowitz, 2013). Dyscalculia refers to difficulties in math and dysgraphia to writing. Associated deficits that are not considered subtypes include auditory and visual processing disorders. Non-verbal LD is associated with additional deficits that overlap with more common subtypes, such as visual-spatial confusion or understanding social cues (Cortiella & Horowitz, 2013). Research indicates that children with LD experience more social and behavioral adjustment problems than peers without LD (Al-Yagon, 2015).

A specific learning disability is a lifelong condition (National Joint Committee on Learning Disabilities [NJCLD], 2011). There is a growing body of evidence linking LD to family genetics, poverty, and pre-and post-natal insults to the brain, but specific biological causes have yet to be identified (Cortiella & Horowitz, 2013). LDs are often unrecognized until specific
limitations in school are exposed through difficulties with reading, writing, math or other academic pursuits, and some are recognized only in adulthood or not at all (Cortiella & Horowitz, 2013). When a teacher or parent suspects a disability the processes of referral, evaluation, eligibility determination, and IEP development are well established. Ideally, once the disability has been diagnosed, the parents and the school work together to determine appropriate levels of special education, supplementary aids and services, and/or accommodations that will address the student’s needs (Gibb & Dyches, 2015). As with other detrimental conditions, early identification and treatment are key to maximizing each individual’s success in school and life.

However, once a student begins receiving services the outcomes become less predictable. Success can be influenced by a variety of classroom factors, including teacher attitude, instructional effectiveness, appropriateness of curriculum and materials, behavior management and the socio-emotional climate of the classroom (McClesky & Waldron, 2011). Outside the classroom, the student’s success can be greatly influenced by peer relationships with classmates and other friends, with acquaintances in and out of school, and by parent and family factors (Al-Yagon, 2015; Duquette, Fullarton, Orders, & Robertson-Grewal, 2011; Sullivan et al. 2015).

**Parental Influences on Children with LD**

Learning disabilities affect more than just the diagnosed individual; they can have social and emotional impacts on each person related to the individual. The family of an individual with LD is especially affected, and the impact is similar to that of more visible disabilities (Dyson, 2010). Parents and other family members must learn to cope with the stress caused by the negative aspects of the disability. Absent or ineffective coping strategies can augment stress and lead to family disorganization. Recent research indicates that mothers of children with LD use more avoidance and fewer active engagement strategies to cope in the home (Al-Yagon, 2015),
while those with more emotional resources were positive influences on their children (Al-Yagon, 2010). Stresses related to LD in the home can also affect parent discipline styles. For example, parents with a high control-negative affection approach can exacerbate problem behaviors in their children (Barksauskiene, 2009). Parents can also feel guilt related to assuming personal responsibility for the disability, and marital tension is often a result of unequal distribution of parenting responsibilities (Dyson, 2010). For example, one parent may be away from the home during the times of day when most of the parent advocacy and support occurs. As in most relationships, levels of open and honest communication affect parent-child interactions. Parents of children with LD tend to report less involvement in the family and more problem behaviors than parents of children without LD (Heiman, Zinck, & Heath, 2008).

Children with LD not only affect the home environment, but are also affected by it. A child’s attitude toward his or her own learning disability is influenced by factors in the home. Parental attitudes toward a child with LD, as perceived by the child, positively correlate with the child’s performance (Dyson, 2003). According to Dyson (2003), parents tend to rate their children lower on social competence and higher on behavior problems than the children do. The mother’s perception is generally more influential to the student’s own perception than the father’s (Dyson, 2003).

**Parental Influence on Preparation for College**

As mentioned, self-advocacy, specific learning strategies and classroom accommodations are keys to success for college students with LD (Abreu-Ellis et al., 2009; Heiman & Karive, 2004; Lombardi et al., 2011). Research into coping styles of adolescents with LD shows that successful students with LD ages 12-15 show different coping profiles than less successful students. Students with LD are more likely to develop passive, non-helpful strategies than their
peers without LD, which puts them at an elevated risk because they also have an elevated need to
develop coping strategies (Shulman, Carlton-Ford, Levian, & Hed, 1995).

Successful students showed higher motivation to learn, credit their successes to hard
work, and had fewer tendencies to ignore problems or simply look on the bright side and hope
things would work out (Firth, Greaves, & Frydenberg, 2010). Students with LD also show lower
levels of internal coping in general, and demonstrate a lower tendency to approach, appraise, and
decide independently how to deal with academic problems (Shulman et al., 1995). Students with
LD can benefit from instruction on developing effective learning strategies.

Parents help their children with LD gain these skills and understandings, and contribute
in other ways to their student’s preparation. Smith, English, & Vasek, (2002) suggest several
things that parents can do at home to help their children with LD prepare to self-advocate for
enrollment into, as well as within, postsecondary institutions. Parents can aid in the rehearsal of
skills such as honest and direct expression of thoughts and feelings, making eye contact,
speaking clearly with appropriate emphasis, and making appointments (Harris, 2001; Smith et
al., 2002). However, research is lacking from the parents’ perspective of the effectiveness of
these practices or their use of these or any other unspecified practice or behavior. Another
unknown is whether parents attribute the success of their students with LD to any specific self-
advocacy building practices in the home.

Through their influence on their child’s emotional wellbeing, parental behaviors have a
measurable effect on student achievement during the child’s adolescent years. Research not
specific to children with LD indicates that when parents are involved in their adolescent
children’s happiness and school progress, the children are more motivated, feel more effective,
and achieve more than children whose parents adopt a controlling style based on rigid structure
or coercion (Duchesne & Ratelle, 2010). No research was found that similarly described effects for children with LD.
References


APPENDIX B: Consent Form

Consent to be a Research Subject

Introduction
This research study is being conducted by Alexander Hale and Gordon S. Gibb, PhD at Brigham Young University to investigate and describe parenting practices that parents believe were effective in helping prepare their children with learning disabilities for college enrollment. You were invited to participate because your child with learning disabilities attended Brigham Young University (BYU) and participated in research directed toward understanding preparation for college for students with learning disabilities. The withdrawal or refusal to participate in this research will not affect your child’s standing at BYU.

Procedures
If you agree to participate in this research study, the following will occur:

- you will be interviewed for approximately one (1) hour about parenting practices and home environment that you believe were influential in preparing your child with learning disabilities for college enrollment.
- the interview will be audio recorded to ensure accuracy in reporting your statements.
- the interview will take place over the phone at a time convenient for you.
- the researcher may contact you later to clarify your interview answers for approximately thirty (30) minutes.
- total time commitment will be 90 minutes

Risks/Discomforts
There are minimal risks for participation in this study. You may, however, feel some discomfort when answering questions about personal beliefs or when being audio recorded. If you feel embarrassed about answering a particular question, you may choose to decline or excuse yourself from the study.

Benefits
There will be no direct benefits to you. It is hoped, however, that through your participation other parents may be benefited who are preparing their children with learning disabilities for college.

Confidentiality
The research data will be kept in a secure location on a password protected computer and only the researchers will have access to the data. To protect your privacy, you and your child will be identified by pseudonym in reporting the research. At the conclusion of the study, all identifying information will be removed and the data will be kept in the researcher's locked office.

Compensation
No compensation will be provided for participation in this research.
**Participation**
Participation in this research study is voluntary. You have the right to withdraw at any time or refuse to participate entirely.

**Questions about the Research**
If you have questions regarding this study, you may contact Alex Hale by e-mail at halealexj@gmail.com or by phone at (562) 240-3745 or Gordon Gibb, PhD by e-mail at gordon_gibb@byu.edu or by phone at (801) 422-4915.

**Questions about Your Rights as Research Participants**
If you have questions regarding your rights as a research participant contact IRB Administrator at (801) 422-1461; A-285 ASB, Brigham Young University, Provo, UT 84602; irb@byu.edu.

**Statement of Consent**
I have read, understood, and received a copy of the above consent and desire of my own free will to participate in this study.

_____________________________  _______________________________  _________________
Name (Printed)                     Signature                      Date
APPENDIX C: Interview Protocol

Question:

What family factors and parent practices do you believe were instrumental in preparing your child with learning disabilities for college enrollment?

Planned prompts:

a. Tell me more about______.
b. You mentioned _____.
c. What was your role in ______?
d. What would you tell another parent currently in that situation?  
e. Is there anything else you would like to add?