Parents' Perspectives towards Transition of Children with SEND from Early Intervention to other Educational Settings

انطباعات الوالدين نحو انتقال الأطفال ذوي الإحتياجات التربوية الخاصة والإعاقة من مرحلة التدخل المبكر إلى البيئات التربوية الأخرى

by

RAWHI MRAWEH AHMAD ABDAT

A thesis submitted in fulfilment

of the requirements for the degree of

DOCTOR OF PHILOSOPHY IN EDUCATION

at

The British University in Dubai

January 2020

Parents' Perspectives towards Transition of Children with SEND from Early Intervention to other Educational Settings

انطباعات الوالدين نحو انتقال الأطفال ذوي الإحتياجات التربوية الخاصة والإعاقة من مرحلة التدخل المبكر إلى البيئات التعليمية الأخرى

by

RAWHI MRAWEH AHMAD ABDAT

A thesis submitted to the Faculty of Education
in fulfilment of the requirements for the degree of
DOCTOR OF PHILOSOPHY IN EDUCATION
at
The British University in Dubai
January 2020

Thesis Supervisor
Prof. Eman Gaad

Approved for award:

_____   _____
Name   Name
Designation   Designation

_____   _____
Name   Name
Designation   Designation

Date: _____

DECLARATION

I warrant that the content of this research is the direct result of my own work and that any use made in it of published or unpublished copyright material falls within the limits permitted by international copyright conventions.

I understand that a copy of my research will be deposited in the University Library for permanent retention.

I hereby agree that the material mentioned above for which I am author and copyright holder may be copied and distributed by The British University in Dubai for the purposes of research, private study or education and that The British University in Dubai may recover from purchasers the costs incurred in such copying and distribution, where appropriate.

I understand that The British University in Dubai may make a digital copy available in the institutional repository.

I understand that I may apply to the University to retain the right to withhold or to restrict access to my thesis for a period which shall not normally exceed four calendar years from the congregation at which the degree is conferred, the length of the period to be specified in the application, together with the precise reasons for making that application.

_____

Signature of the student

Abstract

The purpose of the study was to investigate parents' perspectives and roles in the transition process from ECI to other educational contexts, and to understand how educational policies empower parents and support their children with SEND during the transition. Therefore, the study followed a sequential exploratory mixed-methods design to collect both qualitative and quantitative data. Data was primarily collected using semi-structured interviews with eleven parents of children with different types of SEND and content analysis to the early education policies. Questionnaires administered to (183) parents in Dubai, Ajman, Ras Al Khaimah and Fujairah in the UAE. Thematic analysis of interviews was conducted and found that parents perceive the transition process through three main categories as: 1) blurring 2) stressful 3) smooth. While they view their roles as: 1) ambiguous 2) active 3) no role 4) roles they should do. Thematic analysis of educational policies showed two main categories: 1) parents' empowerment 2) children inclusion.

Moreover, descriptive and inferential statistical analysis tests were performed using SPSS software of the parents' responses to the cross-sectional survey showed significant differences among parents' perspectives towards transition with respect to parents' gender, parents' education, type of child with SEND, the educational setting and the Emirate, however, no significant differences found in regards to the child gender. Finally, the study has several implications for early childhood intervention and policy in the UAE and the region as it draws a road map for children transition trajectory to inclusive settings from parents' perspectives.

Key Words: *Early intervention, Transition, Special education, Inclusion, Developmental delay, SEND, Parents perspectives.*

ملخص

هدفت الدراسة إلى استقصاء انطباعات أولياء الأمور وأدوارهم في مرحلة الانتقال من التدخل المبكر إلى البيئات التربوية الأخرى، والتعرف على كيفية تمكين السياسات التربوية لأولياء الأمور ودعمها لأطفالهم ذوي الاحتياجات التربوية الخاصة والإعاقة خلال مرحلة الانتقال. وبناء على ذلك، تم استخدام التصميم الاستكشافي ومنهجية البحث المختلط في جمع البيانات النوعية والكمية. في البحث النوعي، تم جمع البيانات من خلال إجراء مقابلات شبه منظمة مع إحدى عشرة من الأمهات. أما في البحث الكمي، فقد تم تطبيق الاستبيانات لجمع البيانات من (183) من الآباء والأمهات في دبي، عجمان، رأس الخيمة، والفجيرة في الامارات العربية المتحدة. تم إجراء تحليل البيانات النوعية للمقابلات ووجد أن الآباء ينظرون إلى عملية الانتقال من خلال ثلاث فئات رئيسية على أنها: 1) غير واضحة 2) مرهقة 3) سلسة. في حين فإنهم ينظرون إلى أدوارهم خلال عملية الانتقال على أنها 1) غامضة 2) فعالة 3) لا دور 4) أدوار ينبغي عليهم القيام بها. وأوجَدَ إجراء تحليل البيانات النوعية للوثائق فئتين رئيسيتين هما: 1) تمكين الوالدين 2) إدماج الأطفال.

إضافة إلى ذلك، تم إجراء اختبارات تحليلية وصفية، واستنتاجية إحصائية باستخدام برنامج التحليل الإحصائي SPSS لاستجابات الوالدين على استبيانات الدراسة. حيث أظهرت النتائج وجود فروق دالة إحصائياً بين انطباعات الآباء نحو الانتقال تبعاً لجنس الوالدين، تعليم الوالدين، نوع الاحتياجات التربوية الخاصة والإعاقة عند الأطفال، المرحلة التعليمية للطفل والإمارة، بينما لا يوجد فروق دالة إحصائياً تبعاً لجنس الطفل. وأخيراً، للدراسة مضامين عديدة على التدخل المبكر والسياسات في مرحلة الطفولة المبكرة في دولة الإمارات العربية المتحدة والمنطقة، حيث إنها ترسم خريطة طريق لمسار انتقال الأطفال إلى الدمج التربوي من وجهة نظر الآباء.

كلمات مفتاحية: التدخل المبكر، الانتقال، التربية الخاصة، الدمج، التأخر النمائي، الاحتياجات التربوية الخاصة، وجهات نظر الآباء.

Dedication

إلى والداي رحمها الله، اللذان رحلا قبل أن يشهدا هذا اليوم

إلى أبنائي محمد، كريم، ريان وعبد الرحمن، أملي القادم، وإلى زوجتي جمانة، التي تشاركني هذا الأمل.

إلى كل الذين يرددون بصمت كل صباح "نعم أستطيع".

To my parents, may Allah have mercy on them, who passed away before they witness this day

To my sons Muhammad, Kareem, Rayyan and Abdel Rahman, my upcoming hope, and my wife Jumana, who shares with me this hope.

To all who says silently every morning, "Yes I can."

Acknowledgements

Table of Contents

List of Illustrations

List of Tables

List of Appendices

Acronyms

ASD	Autism Spectrum Disorder
ANOVA	Analysis of Variance
CDA	Community Development Authority
DEIC	Dubai Early Intervention Centre
DHA	Dubai Health Authority
ECI	Early Childhood Intervention
EECIP	Emirates Early Childhood Intervention Programme
IEP	Individualised Educational Plan
IFSP	Individualised Family Services Plan
KHDA	The Knowledge and Human Development Authority
MOCD	Ministry of Community Development
MOE	Ministry of Education
MOHAP	Ministry of Health and Prevention
MSA	Ministry of Social Affairs
POD	People of Determination
PWD	Persons with Disabilities
SCHS	Sharjah City for Humanitarian Services
SEND	Special Educational Need and Disability
SPSS	Statistical Package for Social Sciences
UAE	United Arab Emirates
UNCRPD	The United Nations Convention on the Rights of Persons with Disabilities
UNESCO	United Nations Educational, Scientific and Cultural Organization
ZHO	Zayed Higher Organization for People of Determination

CHAPTER ONE: INTRODUCTION

1.1 Introduction

1.1.1 The UAE Background

The United Arab Emirates (UAE) is located in the North East of the Arab Peninsula and covers an area of approximately 71,023sq km. The constitutional federation comprised seven emirates: Abu Dhabi, Dubai, Sharjah, Ajman, Umm Al Quwain, Ras Al Khaimah and Fujairah. The country declared its independence on December 2nd, 1971. Since then, the UAE joined the Arab League, and, in the same year ,the United Nations Security Council admitted its membership (The UAE Government Portal 2019a). Afterward, the young nation has experienced dramatic development in all aspects of health, social and educational life and quickly emerged into modernism (Bradshaw, Tennant, & Lydiatt, 2004).

The UAE's population was 9,304,277 in 2017, where the nationals were estimated at 947,997 in 2010, noting that more than 200 nationalities were living and working in the country (The UAE Government Portal 2019b). The number of births of UAE nationals was 34,296 versus 2,547 deaths in 2017 (FCSA 2019).

Since its establishment, the UAE has given great importance to the health sector through the development of health services and combating diseases that lead to disability. The "Minister of Health, emphasised that the UAE is polio-free and did not register any cases since 1992" (MOHAP 2014, p. 1). In addition, the country has made great efforts in human resources development and education in general. This interest has been reflected in the progression of special education services provided in public education.

In line with these successive developments in various fields, the country has its strategic ambitions to be an active part of nations through a range of long-term plans and strategies to accomplish further development in different spheres (The UAE Government Portal 2019c).

The Ministry of Education (MOE) manages all stages of education in the UAE (The UAE Government Portal (2019d). However, The Knowledge and Human Development Authority (KHDA) was established in 2006 to enhance the education system and human development in Dubai through supervising private education institutions and other educational services in the Dubai free zone, while the government schools in Dubai are under the MOE administration. The government is committed to offering highly qualified health and education to citizen children; therefore, education is compulsory in the primary stage from six years old, and free at all government schools (Bradshaw, Tennant, & Lydiatt, 2004; KHDA 2006).

The UAE will celebrate the golden jubilee of the union with the achievement of the UAE Vision 2021 that was launched by H.H. Sheikh Mohammed bin Rashid Al Maktoum, Vice-President and Prime Minister of the UAE and Ruler of Dubai, in 2010. The vision has six pillars that represent the key focus sectors of government action in the coming years. These pillars comprise a "[c]ohesive society and preserved identity, safe public and fair judiciary, first-rate education system, competitive knowledge economy, world-class healthcare, sustainable environment and infrastructure" (UAE Vision 2018a pp. 2-3).

Based on the cohesive society and preserved identity in the National Agenda 2021, The Ministry of Community Development (MOCD) is a sponsor of the family cohesion index, which:

> measures the social bond between family members. Its main perspectives cover relations between parents, parents' relations with children, relations among children, relations with bigger families, and the upbringing of a new generation. (UAE Vision 2018b, p.1).

1.1.2 Special Education Provision:

The UAE has identified the categories of disabilities under the unified national classification for *"people of determination"* (POD). The term POD is used in the UAE to refer to persons with disabilities (PWD), which includes eleven types of disabilities based on the best international practices in this area, in particular, the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

The purpose of the classification is to respond to the needs of the PWDs and facilitate their access to necessary services, taking into account the individual needs of each case. The classification raises the level of coordination and collaboration among the concerned authorities to unify the assessment identifying PWD's needs.

The first group in the classification comprises neurodevelopmental disorders, including intellectual disabilities, communication disorders, autism spectrum disorder (ASD), attention-deficit/ hyperactive disorder, and specific learning disorders. Meanwhile, the second group includes sensory impairments (visual impairments, hearing impairments), in addition to physical disabilities, psycho/emotional disorders, and multiple disabilities (Cabinet Decree 2018). This classification includes global developmental delays in children under five years old when their intellectual disabilities cannot be surely decided during early childhood. This category is diagnosed when children are not accomplishing the expected developmental skills appropriate to their age group, or when children cannot respond to standardised tests due to their young age (APA 2013). Moreover, this category is considered to be one of the most important groups to benefit from early childhood intervention (ECI) services.

The unified classification also mentioned the diagnostic criterion for each type of disability and the professionals who are eligible to diagnose it, as well as the required documents that support the authenticity of the diagnostic process. In addition to that, the classification identified the eligibility of POD for services they need according to the type of disability, such as early intervention services, education, health, special education, vocational rehabilitation and employment (Cabinet Decree 2018).

The MOCD, which was formerly called the Ministry of Social Affairs (MSA), in collaboration with other bodies in the country, is responsible for establishing centres and institutions for the care and rehabilitation of children with disabilities. The goal is to enable them and support their integration into society through the provision of special education, as well as the training for their parents. These centres undertake the function of rehabilitation of children with disabilities so that they can adapt to society, and they also provide educational programmes for them as well as train their families in how to deal with their children (MSA 2006).

The first federal government rehabilitation centre was founded in 1981 after the establishment of Sharjah City for Humanitarian Services (SCHS) in 1979; these centres provided

rehabilitation and educational services for students with physical disabilities and visual, hearing and intellectual disabilities (MOCD 2015; SCHS 2019a; Bradshaw, Tennant, & Lydiatt 2004).

At present, special education is mainly provided by six federal centres in Emirates of Dubai, Ajman, Umm Al Quwain, Ras Al Khaimah and Fujairah, which are affiliated with the MOCD. It serves students from four to eighteen-years-old who have intellectual disabilities, autism and multiple, severe disabilities only. According to the MSA 2008–2010 strategy outcomes, students with visual disabilities were included in regular schools and were no longer being enrolled into special education centres (MSA 2008); afterwards, the 2011–2013 strategy stopped the enrolment of new students with hearing impairments in the same centres to push them forward into the MOE public schools. This started preparing regular schools in collaboration with the MOE to include them into public education (MSA 2011). Rehabilitation and special education centres are mainly providing assessment, special education classes, and therapeutic services, in addition to vocational training and social integration services for older students.

In 2004, the Zayed Higher Organization for People of Determination (ZHO) was established to serve as an umbrella for all humanitarian and people of determination services in the Emirate of Abu Dhabi. The organisation provides various services to POD, including education, training, therapeutic services, vocational training, and other social and psychological services that aim at integrating them into the wide community. These services extended to all sections and rehabilitation centres in Abu Dhabi, Al Ain, and the Western Region (ZHO 2019).

In the Emirate of Sharjah, the SCHS has served people with disabilities in the UAE since 1979. During this time, the SCHS has succeeded in paving the way for them to have equal opportunities in the community. Throughout its branches and divisions scattered in the Emirate of Sharjah, it provides a wide range of services, such as educational, training, rehabilitation, awareness, and social services, as well as family counselling, employment and follow-up visits to empower and integrate the PWDs into society (SCHS 2019).

The private sector also provides care and rehabilitation services through private centres that are authorised and licensed by the MOCD. According to the Ministry's policies, the services of the federal and private centres are limited to specific types of disabilities, which are intellectual disabilities, autism, and multiple disabilities. Meanwhile, students with physical disabilities,

hearing impairments, and visual impairments are not allowed to be enrolled in rehabilitation centres due to their right to integrate into public schools (MSA 2011). At the same time, the MOE and the MOCD are making great efforts and continuous coordination to overcome obstacles and include students with cognitive disabilities in public education (MOE & MOCD 2016).

Statistics of the MOCD (2019a) show that there are a total of 96 federal governmental, local governmental, semi-government, and private POD centres, providing educational, therapeutic, and vocational rehabilitation services for 4695 students with disabilities across the country. These centres serve mainly three types of disabilities: intellectual disability, ASD, and multiple disabilities. Some of these centres are following the standard curricula of the MOE with little accommodations to meet the children's needs, particularly with mild disabilities. However, other centres are following special education curriculums to meet the needs of students mostly with moderate and severe disabilities. Table 1 shows the special education centres in the UAE and the students enrolled in it:

Type of Centre	Number	Students
Federal government	7	768
Local government	22	2061
Semi-Government	8	828
Private centres	59	1038
Total	96	4695

Table 1: Statistics of People of Determination (POD) Centres in the UAE (MOCD 2019a)

1.1.3 Inclusive Education in the UAE

Since the establishment of the UAE in the 1970s, the government realised the importance of PWDs enjoying the same rights as other citizens, particularly in education. The philosophy behind education in the UAE depends on the Islamic view of human rights, the right to equality, social welfare and the right of education (Gaad 2011).

The UAE has begun enacting legislation that supports the rights of persons with disabilities, especially regarding their education. Article (14) in The UAE Constitution emphasises social equality, fairness, safety and security for all citizens, at the same time that article (16) emphasises the protection of minors and others who are unable to take care of themselves for any reason, such as disability. Meanwhile, article (17) guarantees education for every person in the society without any discrimination. It stipulates that:

> Education is a fundamental factor in social progress. It shall be compulsory at the primary stage, and free of charge at all stages, within the federation. Legal provision shall be made for the plans needed to propagate universal education at all levels and to eradicate illiteracy. (The Cabinet 2013, p. 6).

The early landmark law related to special education in the UAE was in 1977, when the Cabinet issued resolution No. (1) that provides governmental support for persons with disabilities. Then, in 1979, the government ensured the right of education for PWDs through the establishment of rehabilitation centres for this purpose. In the same year, the MOE started opening special education classes in only four public schools with a small number of students who were taught with each other, which was after the preparation of teachers through specialised courses by UAE University (Alahbabi 2009).

The development of the first guidelines for special education classes within public education was in 1988 (Alahbabi 2009), where special learners had been offered educational provision within special classes in mainstream schools. Extra support had been given to students who were struggling with the mainstream curriculum (Gaad 2011). After that, mainstream schools extended the acceptance of special needs categories to include students with emotional and behavioural disturbances, specific learning disabilities, communication challenges and even mild mental disabilities. However, students with other types of intellectual challenges such as Down syndrome and autism faced the narrow selective acceptance system that didn't include them easily in public schools (Elhoweris 2008; Gaad 2011).

In 2006, the federal law number (29) concerning the rights of persons with disabilities was issued to ensure their rights in different aspects, including the right to education. Article twelve stipulates that "[d]isability do [sic] not represent an obstacle preventing an individual from applying to or joining any government or private educational institution of any kind" (MSA 2006, p. 7). In addition to that, the law calls for equal opportunities for persons with disabilities

to receive inclusive education in regular schools, with necessary adaptation to the academic syllabus to meet the students' needs using suitable teaching methods such as sign language, Braille system, in addition to assistive technology devices when needed to enhance the education process for students with special educational need and disability (SEND).The law provides for the establishment of the specialised committee for teaching PWDs, chaired by the MOE, and includes members from other concerned entities. The main roles and responsibilities of the committee are to ensure equal educational opportunities for students with SEND in all stages and regulate the education procedures, such as admission, teaching adaptations and evaluation. In addition, to establish policies for the qualifications of staff working with students with SEND, to support institutions that receive them in their classes and to ensure that educational environments are appropriate and equipped to meet the students' needs (MSA, 2006).

Special and inclusive education services for students with SEND are offered in the government schools under the supervision of the Special Education Department in the MOE since 2008. The department makes every effort to enrol students with special needs in public education and to ensure their access to equal education opportunities with other students. Over the past years, the department was providing reasonable accommodations in public schools to suit students with special needs. It trained a group of teachers across the emirates on the mechanisms of teaching students with special needs, as well as established support centres which include teams of specialists to ensure the success of inclusive education. Special and inclusive services in public schools include assessment, individual educational plans (IEP)s, early detection in kindergartens, examination adaptations, supporting therapeutic services, assistive technology in classes, mainstreaming, family counselling and awareness, physical accommodations on schools' environments, diversifying teaching methods, as well as academic and social services that enhance students' skills. The department served 6559 students from 13 categories of SEND during the academic year 2016/2017 (MOE 2017).

Category of SEND	Percentage
Specific learning disabilities	35%
Communication and interaction disorders	3%

Speech and language disorders	12%
Socio-emotional disorders	2%
Sensory disabilities	7%
Multiple and severe disabilities	1%
Motor or physical disability	7%
Intellectual disability	7%
Health conditions	1%
Slow learning	21%
Temporary cases	0.015%
Not classified	3%
Total	100%

Table 2: Inclusive Education Statistics of POD
(Adapted from MOE 2017, p. 169).

The MOE, as the responsible entity for the education system, continued its efforts to educate students with SEND in public education. Accordingly, the UAE has recently made a lot of achievements in education, including reforms in the educational system that integrate students with SEND in public education, as well as progress in human development. However, progress in special and inclusive education is difficult to be investigated due to limitations in special and inclusive literature in the UAE as a young nation compared to other parts of the world (Alobeidli 2017; Gaad, 2011).

The qualitative leap in the special and inclusive education system had already taken place when the general rules for special education services were issued by the MOE in 2010. The "School for All" initiative is the official documentation to promote and regulate inclusive services in public schools and to enforce the rights of education for PWD that had been mentioned in Federal Law 29/2006. The guidelines included procedures for the provision of special education services and the structure of the programme, as well as the responsibilities and qualifications

of the staff. The guidelines also mentioned the rights of parents and their expected duties as partners during the provision (MOE 2010).

"School for All" opened the way for gradual transition for students with special needs to the public education system with the provision of appropriate learning tools and the use of differential education that takes into account the individual needs of every student, with necessary accommodations in optimal environments and diversity of teaching methods, in addition to appropriate adaptations of the curriculum and assessment system.

It is worth noting that the terms inclusion, integration and mainstreaming were often used interchangeably in the country to reflect the same meaning at the time when special education systems had been developing even in disability centres or public education over the years (Alahbabi, 2009). The concept of inclusion gradually has evolved in the UAE over the past four decades, under the umbrella of public education. Several ministers of education followed several reforms on the educational system in general, which had an impact on the special education system. However, the biggest transformation was on the general educational system, which received more focus, with a few attempts aimed at developing the special education system (Elhoweris 2008).

In a very new attempt to improve the provision of inclusive education within the public educational system, the MOE has drafted the Policy Framework for Inclusive Education to ensure sustainable, inclusive education services for students in the UAE from early childhood to higher education (MOE 2018). In another attempt to promote inclusion, the KHDA has launched the Dubai Inclusive Education Policy Framework to enable a fully inclusive education system for children with SEND across the Emirate of Dubai (KHDA 2017).

Although there are policies and rules that support inclusion in the UAE, there is still a gap between policy and practice, as these rules are fairly new and need a clear follow-up framework. Moreover, the understanding of the inclusion concept and how stakeholders implement it in the field is still another challenge (Alborno 2013; Alobeidli 2017). Accordingly, some sort of integration was implemented in public schools, such as allowing students with multiple ages and disabilities to be enrolled in specific classes; however, these arrangements are no longer the best practices in many countries that introduce social inclusion for these students, based on their right of full participation with their peers and school community (Alahbabi 2009).

1.1.4 Early Childhood Intervention in the UAE

Previous research provides sufficient evidence about the importance of early child age for the development of future abilities and the establishment of the mother-child relationship in supporting the child's exploratory activities to the surrounding environment, which ultimately improves their developmental skills. This attitude justifies the role of the family in ECI services (Franco et al. 2017).

ECI refers to "the provision of educational or therapeutic services" (Bruder 2010, p. 339) to children with confirmed disabilities, those who are developmentally delayed or at risk of being disabled at some point in life (Massachusetts Department of Public Health 2013), and their families (Zheng et al. 2016). These services are crucial for preventing disabilities or reducing their effects on children and their families and for helping the children to transition to the next stage of education with their peers in public schools (Rous, Myers, & Stricklin 2007). For Guralnick (2001), ECI refers to designed programmes that empower families to best promote children's developmental abilities, with specific emphasis on parent-child transactions and family experiences that help them reinforce the children's health. Meanwhile, ECI's main goal is to prevent or reduce any physical, cognitive, or emotional deterioration in young children who have environmental or biological risk factors. Also, the family's role is a fundamental factor in the intervention's success (Odom et al. 2003).

There has been a growing concern about families' roles as key partners in ECI programmes, particularly the transition process after early interventions, because parents are the primary caregivers and have unique information about their children that can facilitate their development (Kohler, 1999). Their participation is a major component of effective intervention (Hart et al. 2016). Parents of children with special needs are worried about the acceptance of their children and their ability to cope with the new educational settings after ECI, which have new staff, regulations, and procedures (Starr, Martini, & Kuo 2017). Their detailed knowledge of their children with special needs and their experiences in early intervention can be shared with the staff to understand the effectiveness of the provided services concerning their children's needs (Jinnah & Walters, 2008; Ngui & Flores, 2006). Moreover, special education literature suggests that parents can be expert informants in the field as they develop better perspectives over time regarding the services provided to their children with SEND in early ages (Law et al. 2003). Therefore, the success of the transition process from ECI to public

educational contexts requires a clear understanding of parents' concerns and expectations of the transition process after the early intervention stage (Bowen 2016).

The UAE government realises the importance of early detection of disabilities and developmental delay in children to provide them early education and rehabilitation services; therefore, the government has taken care to set ECI programmes for children with confirmed disabilities, developmental delay or at risk of being disabled at any stage of their life, and to serve their families as well. As a response, the federal government, as well as local governments in Abu Dhabi, Dubai and Sharjah, has established early intervention centres in different emirates which are serving children less than six years of age across a variety of therapeutic and related rehabilitation services. Specialists and family counselling workers also conduct field visits to the children in their homes and natural environments and train parents to support their children and perform their roles towards them.

Many initiatives and projects had been undertaken in the UAE to detect children and follow up on their development at an early age. "We are all children" is a collaborative initiative between The Children's Department and The Care and Rehabilitation of POD Department in the MSA. It had been launched in 2011 to ensure the inclusion of children with disabilities less than three years of age in kindergarten through the provision of necessary educational services and facilities for them to ensure their inclusion. The initiative's framework included a comprehensive set of criteria that outlined the inclusion of children with disabilities, including intellectual, physical, hearing, visual and autism. To supervise this process, the initiative comprised a monitoring system for accurate and systematic manner, of which kindergartens were encouraged to be part.

The initial version of early intervention started from Emirate of Ras Al Khaimah in 2010 in the federal budget initiative under the theme "My First Steps". The aim was to detect any developmental delays in children as old as six years in order to provide them with related therapeutic and educational services in addition to family counselling at home and other natural environments. This programme expanded in 2015 under the name of Emirates Early Childhood Intervention Programme (EECIP) to include Emirates of Dubai, Ajman and Fujairah. The MOCD drew up its regulations and quality standards to ensure the procedures were monitored and provide high-quality services (MOCD 2014).

At the local government level, ZHO in the Emirate of Abu Dhabi operates an early intervention programme within the rehabilitation centres that targets children with disabilities or developmental delays in early ages and provides them with rehabilitation that supports their learning, independence and integration (ZHO 2019). Another early intervention programme is acting in Emirate of Dubai by the Community Development Authority (CDA) since 2009 to provide family-focused, trans-disciplinary assessment and early intervention services to children with disabilities or at risk for disability from birth to six years of age, in addition to family support in natural environments through routine-based activities. The programme targets the children at the appropriate time to improve their development gain and learning capabilities as well as the family's understanding of their children's strengths and needs (CDA 2018). Sharjah early intervention centre, also in the Emirate of Sharjah which is managed by SCHS, provides early rehabilitation services for children up to five years of age, whether they have disabilities or are at risk for disabilities, and their families. Services include prevention, treatment and rehabilitation to avoid any further complications that may appear later, which facilitate social and educational inclusion in the following stages. Thus, the centre was the first to introduce early detection and intervention service in the Arabian Gulf region, which started in 1993 and was opened by His Highness the Ruler of Sharjah and His Highness Prince Talal bin Abdulaziz Al Saud, President of the Arab Programme for the supporting United Nations organisations in 1994 (SCHS 2019b).

The governmental rehabilitation centres for persons with disabilities under the MOCD also are allowed to receive children ages four years and above, which is another opportunity for children with disabilities to benefit from therapeutic and rehabilitation services at an early age, particularly when there is no centre or section for early intervention in the area where the child lives.

Non-governmental associations in the UAE have also played a role in the development of early intervention programmes. The Emirates Down Syndrome Association in the Emirate of Dubai has opened a centre in which all children with Down syndrome have access to speech, occupational, and physical therapy. Non-governmental rehabilitation centres can also provide early intervention services to children with disabilities or developmental delay up to the age of six years old after licensing the service from the MOCD and complying with the requirements of ECI provision (see Table 3).

Type of ECI Centre/Unit	Number	Emirates
Federal government	4	Dubai, Ajman, Ras Al Khaimah, Fujairah
Local government	3	Abu Dhabi, Dubai, Sharjah
Private centres	3	Abu Dhabi (2), Ajman (1)
Total	10	Abu Dhabi, Dubai, Sharjah, Ajman, Ras Al Khaimah, Fujairah

Table 3: The Distribution of Early Intervention Centres/ Units in the UAE (MOCD 2019a)

Accordingly, the MOCD in the UAE realised the importance of the parents' role and embedded it in the quality standards of early childhood intervention (Al Khatib 2016) to empower them to take part in different stages of ECI, particularly the transition process. This is considered a fundamental priority for parents, who are usually concerned about a seamless transition when they prepare their children with SEND for the next educational stage (Fontil & Petrakos 2015; Russell, 2003).

1.2 Problem Statement and Rationale

Special and inclusive education has, in recent years, brought more attention toward parents as partners in the rehabilitation process, as they are experts in their children's needs. Parents also understand the importance of being part of any decision related to their children's transition process (Spencer-Brown 2015).

The transition from ECI is an ongoing process, which starts at the pre-school stage, to ensure the smooth flow of children to the next educational setting. It needs a designed plan to prepare the child for the subsequent phase of education (Siddiqua 2014) that includes all stakeholders. Researchers have pointed out the importance of parents' participation in transition planning as a fundamental element, particularly in their concern about their children's needs being met in the transition plans and their roles in the whole process (DeMeures, 2000; Russell, 2003). Their perspectives toward the service provide the staff with rich feedback to adjust rehabilitation plans to suit their children's needs (Bruder 2010; Zheng et al. 2016).

Researchers have studied this critical stage to understand the parents' involvement in the transition. Many of them showcase the parents' concerns toward the transition process as an important stage that needs specific measurements and support to reach the next educational placement (Trach 2012). Others focused on the importance of collaboration with the parents to achieve a seamless transition (Schischka, Rawlinson & Hamilton 2012) or to study parents' roles and satisfaction regarding the transition process (Podvey, Hinojosa & Koenig 2011). Many of these authors used different theoretical models and approaches. However, most of them used a qualitative approach, such as Pang (2010), Schischka, Rawlinson and Hamilton (2012), and Spencer-Brown (2015), who used the Ecological Theory conceptual framework or biological system model. Gatling (2009) used the six dimension's model of collaborative transition. More recently, Leadbitter et al. (2018) highlighted the discussion among parents about the transition. Petrakos (2015) and Starr, Martini and Kuo (2016) focused on understanding the facilitators and obstacles to transition without explaining the roles of parents or their perceptions.

Accordingly, although there have been advancements in parent participation in the transition process, more research is needed to address the parents' perspectives towards the transition from ECI to other educational settings within an ecological framework in order to clarify the complexity surrounding the process (Starr, Martini, & Kuo 2016). Therefore, additional research is needed to provide a better understanding of parents' roles in the transition and how they perceive the process from the perspective of parents of children with SEND. More emphasis needs to be placed on the family culture surrounding the children, the patterns of interaction with other contexts, and the relationships between these contexts (Curle et al. 2017a), including policies that affect the transition to disability centres or public schools.

On the personal level, the researcher has been working in the EECIP since its establishment in 2010. During that, he listened to some touching stories from parents who experienced challenges in the transition stage, particularly when trying to transition their children with SEND to public education. So that motivated the researcher to conduct this research study, hoping to voice up the parents' views and to reveal their perspectives towards the transition to the policymakers.

This research study adds the parents' perspectives to the body of literature in the UAE, which is needed to fill the gap in the transition process. Therefore, the findings would be

a considerable contribution to the Emirates' ECI programmes and might help in forming new policies, changing current policies in rehabilitation procedures, and strengthening levels of cooperation between the concerned entities for a seamless transition after the early intervention stage.

The rationale for choosing the federal government's early intervention programme is that it is implemented in four emirates which is covers more areas than the local programmes that are implemented in only one emirate. The federal programme is also working in alignment with the National Policy of Empowering People of Determination within the pillar of health and rehabilitation.

1.3 Purpose and Objectives

The purpose of the study is to investigate parents' perspectives and roles as participants in the transition process from ECI to other educational contexts. In addition to the role of policies and procedures in empowering them for a suitable transition that meets their children's educational needs, the study also will attempt to investigate any differences in parent perspectives in terms of the transitioned educational settings for their children, whether it is disability centres or inclusive settings. The focus is on the parents' perspectives on the transition of their children after the early intervention phase, and the role of the parents during the transition process to ensure the appropriate place for their children, in addition to whether the parents are satisfied with the placement.

While many international studies have focused on transition, very limited research has been done according to types of special needs and educational settings. This research study considered the parents of children with different types of SEND, whether their children have transitioned from ECI or are in the process of transitioning. It covered the parents of children who have transitioned to regular schools or POD centres.

One of the main aims of this research study is to improve the literature on ECI in general, particularly the transition from ECI to other educational settings in the UAE, and in the Arab region as well. Furthermore, understating the parents' perspectives and roles in the transition process, and how the policies and surrounding environments support children and their parents at this stage. All of this will help in recognising the challenges of including young children with SEND to public education. It will also assist service providers and deferent concerned bodies

in the UAE to provide a foundation for planned transition programmes to inclusive education. In fact, understanding the transition from parents' perspectives will help to address obstacles facing their children with SEND to move to inclusive education.

In line with the abovementioned consideration, the main research aim is to gain knowledge about parents' perspectives towards transition of their children with SEND from early childhood intervention facilities to public schools and POD centres, and to know about their roles during the transition process in light of early education policies in the UAE.

The following research objectives have been formulated to facilitate the present study:

1- Understand how parents of children with SEND in ECI view their roles during the transition process.
2- Explore how the early education policies and environments surrounding ECI children support them and their parents.
3- Develop an understanding of parents' views towards the transition of their children with SEND from the ECI to other educational settings.
4- Investigate the differences among parents' perspectives according to different demographic variables.

1.4. Research Questions

The present study aims to explore how parents of children with SEND view their roles in the transition process of ECI and their perspectives towards the transition in general from ECI to educational contexts following it such as public schools and POD centres. In line with the discussed considerations, the present study has designed a main research question and a total of four sub-questions to achieve the established research aim:

How parents of children with SEND perceive the transition from early intervention to inclusive or special education facilities and how do they view their roles during the transition process?

In order to achieve the established research aim the following questions have been designed:

- **RQ1:** How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

- **RQ2:** To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

- **RQ3:** How do parents of children with SEND perceive the transition process in early childhood intervention?

- **RQ4:** Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?

1.4 Significance

Research in the field of early intervention for children with SEND in the UAE or Arabian Gulf countries is very rare; moreover, researchers have never touched on the area of transition process, particularly from the parents' perspective. Internationally, some scholars pursued questions similar to the current study but did it differently. For instance, Kruse (2012) focused on parents' points of view regarding the ideal partnership between families and professionals in early intervention and highlighted the effects of interconnections between ecosystems on children with SEND. Similarly, Pang (2010), Schischka, Rawlinson, and Hamilton (2012) all used the concepts of ecosystems to follow home-school partnerships to conquer challenges families might face during transition. Janus et al. (2008) pursued the parents' experiences in this stage using the empirical approach. Furthermore, Gatling (2009) specified the scope of her study in terms of the facilitators and obstacles to transition without explaining the roles of parents or their perceptions.

Previous studies focused on the transition to inclusive education; meanwhile, there is a shortage of research globally about the transition from early intervention to special education centres from parents' perspective. At the time that education of people with disabilities in the world is moving towards inclusion (United Nations 2006), the education in the UAE has taken a consistent course through launching initiatives supporting inclusive education (MOCD 2017; MOE 2010; KHDA 2017). However, POD centres are still existing and receiving part of ECI children who are being transitioned after six years old, particularly students with intellectual disabilities, autism and multiple disabilities (MOCD 2015). Therefore, the researcher empirically investigated differences between parents' perspectives towards ECI transition.

It is significant that parents are key factors in the success of ECI services, due to their roles in transition plans design and implementation, since these plans based on family concerns and needs (Al Khatib 2016; MDPH 2013). Thus, it is important to investigate the parents' perspectives in the transition from early intervention to the next educational stage.

It is also important to investigate the factors related to parents and their children, such as the new placement after early intervention, type of disability and type of programme to which the child is enrolled during the intervention phase. This consequently will help support family involvement in the transition process and the clarity of their roles during it, as well as the improvement of the level of coordination between the intervention stage and the next stages.

Moreover, this study compiles to the literature on the topic of early childhood intervention in the UAE and the Arab world, which will contribute to the effectiveness of the parents' role during the early intervention phase in general and the transition process in particular, and give them the way to be part of decisions regarding their children's new educational placement, which is compatible with their concerns and needs.

Hopefully, the findings of the study will be relevant to early intervention staff and special education teachers in public schools, as well as policymakers in the MOCD and MOE, who aim to achieve better inclusion opportunities for SEND students moving from the federal early intervention programme to schools. The study is also significant for highlighting how the early intervention programme in the UAE responded to new national policies and standards based on best practices with respect to family perspectives during the transition process that leads to ideal educational placements.

1.5 Design of the Study

This study is a mixed-method (qualitative and quantitative) research approach with more focus on qualitative methods. This approach was used to explore the educational settings in early childhood intervention and the parents' perspectives on the transition process. To address research questions, data were collected using a combination of qualitative and quantitative methodology. The mixed-method approach empowered the quality of the research, supported the findings, and was considered as a triangulation tool to enrich the data (Johnson & Christensen, 2012).

The researcher investigated the parents' perspectives towards the transition from the early intervention stage to other educational settings, whether an inclusion contest or special education centres. The ecological system surrounding the process in the UAE culture, including educational policies, laws, and legislation related to persons with SEND, was taken into consideration.

The study used semi-structured interviews, document analysis and a questionnaire with closed- and open-ended items. Using more than only quantitative or qualitative data collection methods helped to produce rich information about the parents' perspectives towards the transition in the early intervention stage.

The researcher implemented the interviews on a purposive sample of parents whose children have transitioned to different educational settings, in addition to conducting the survey on all parents whose children were enrolled in the Emirates' Early Intervention Programme. Therefore, it was expected that in-depth knowledge could be obtained from parents' experiences in such contexts. The researcher investigated parents' roles in the transition process and their perspectives on this matter, with more focus on the echo systems in the educational field and how they affected the children's transition in early intervention.

1.6 Structure of the Thesis

The current study is divided into five chapters. This chapter comprises a background about the UAE, the status of early intervention and special education services, the educational choices after early childhood intervention and policies related to the services provided to students with SEND in the country. This chapter also introduces the problem statement and rationale, the purpose and the significance of the study, the research questions and design. The second chapter includes two sections: the first consists of the theoretical framework that the study is founded on, and the second is a review of the literature on early intervention and transition to the inclusive settings, as well as special education services with the contest of the history of disability in the UAE, in addition to a review of previous studies on transition and the parents' roles and perspectives.

The third chapter explains the methodology and research approach as well as data collection methods, including sites and participants, in addition to the role of the researcher during the field visits, ethical considerations, trustworthiness and validity of the results.

The fourth chapter displays the findings of the study and answers the research questions. Meanwhile, the fifth and final chapter contains the discussion of the parents' perspectives towards transition and draws conclusions, implications of the study in addition to recommendations for the enhancement of parents' participation in the transition, available choices for their children after the early childhood intervention stage, and the suggested further research areas in ECI in the UAE.

1.7 List of Definitions

Children at Risk for Developmental Delay: This category includes infants and young children who have had any problems with the nervous system in prenatal, perinatal or postnatal stages. In addition to infants and young children who appear to be biologically normal but have had experienced conditions in early life within the maternal and family care, health care, nutrition, adaptive behaviour, physical and social stimulation, to a sufficient degree that may lead to developmental delays. Therefore, the ECI programme should monitor these children for one year to ensure their normal development and mitigate risk factors. Follow-up often relies on family communication and counselling to stimulate the child's development in natural environments and to help the family benefit from community resources (MOCD 2019b).

Developmental Delay: It means that the child has not reached the expected developmental stage of his or her age group in one or more of the following developmental areas; cognitive, physical (including vision and hearing), communication, socio-emotional, or adaptive skills. Developmental delay is measured by qualified staff, using procedures or tools that may include metrics, observation and interviews with families (MOCD 2019b).

Disability: Disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others. (United Nations 2006, p. 2).

Disability Medical Model: It is also known as the defect or the "within-child model". In the context of learning difficulties, it points to practices that call on pathology (Clough 2000). It is also based on the assumption that the learning difficulties lie within the child. Accordingly, in order to help the child, we need to assess his or her strengths and weaknesses (diagnose) and plan intervention based on this analysis. The aim is to help the child to fit the system in order to benefit from what the school has to offer. There is no assumption that the school needs to change to accommodate or respond to the diversity of the student population. (Mittler 2000, p. 4 & p. 10).

Disability Social Model: "Disability Social Model key elements are the distinction between disability (social exclusion) and impairment (physical limitation) and the claim that disabled people are an oppressed group" (Shakespeare 2006, p. 198).

Early Childhood Intervention: "The term EI generally refers to services provided to young children (birth to six years) at risk of or who have developmental disabilities or delays" (Carroll 2016, p. 2). It is a set of specialised services and supports for children (with disabilities, developmental delays, or at risk for developmental delays) up to the age of six years old and their families. ECI services are implemented to support the children's development and participation within the family and community life (MOCD 2019b).

Equity: Ensuring that there is a concern with fairness, such that the education of all learners is seen as being of equal importance.

Inclusion: A process that helps to overcome barriers limiting the presence, participation and achievement of learners (UNESCO 2017).

Inclusive Education: Inclusive education is about ensuring access to quality education for all students by effectively meeting their diverse needs in a way that is responsive, accepting, respectful and supportive. This is evident through student engagement and participation in an education programme within a common learning environment, with the benefit of targeted support which enables the reduction and removal of barriers that may lead to exclusion. (KHDA 2017, p. 53).

Perspectives: a particular way of thinking about something, especially one that is influenced by your beliefs or experiences. for the purpose of the current study, perspectives

are how parents view the transition based on their experiences with their children during the process.

People of Determination (Persons with Disability): Each person with an incapacity, total or partial, permanent or temporary, in his physical, sensory, mental, communication, educational or psychological abilities to an extent of being unable to fulfil his regular requirements. (MSA 2006, p. 3).

Special Education: Special education provides students with identified disabilities specialised instruction designed to meet their unique learning needs, giving them the opportunity to develop to their fullest potential.

Special Educational Need and Disability (SEND): A need which occurs when a student identified with an impairment requires the school to make specific modifications or provide specific supports to prevent, remove or reduce any potential disability from occurring and to ensure that the student can access education on an equitable basis and within a common learning environment with same-aged peers. (KHDA 2017, p. 53).

The Emirates Early Childhood Intervention Programme (EECIP): A preventive, rehabilitative and training programme provides comprehensive therapeutic, educational and training services for children younger than six years old, who are with or at risk of developmental delay or disability, and their families as well. ECI centres and units are located in Dubai, Ajman, Ras Al Khaimah and Fujairah. The programme targets children with confirmed disabilities, children with developmental delay, and children at risk of developmental delay (MOCD 2019b).

Transition: "The movement of children and families from one service-delivery setting to another" (Gatling 2009, p. 5). Chronological transitions that may be experienced by children and families include hospital to home, home to early intervention, early intervention programme, and preschool to kindergarten or primary grade transition.

Transition in Early Intervention: "A move from preschool special education services to public school kindergarten programming when a child reaches school-age" (Foster 2013, p. 14). The EECIP begins the transition process when the child completes their third year to prepare

them to receive educational services among their peers in the next setting, which can be a kindergarten, school or a POD centre (MOCD 2019b).

CHAPTER TWO: THEORETICAL FRAMEWORK AND LITERATURE REVIEW

This chapter is divided into two main sections to highlight the theoretical framework of the study and the literature review. The first section, which is devoted to discussing the theoretical framework is divided into three subsections: The Bioecological Theory of Development, Vygotsky Sociocultural Theory, and The Ecological and Dynamic Model of Transition. Meanwhile, the second section is divided into five subsections: The model shift in disability, the development of federal ECI Services in UAE, parents of children in ECI and the ecosystems, parents in the transition process, and the literature review summary.

2.1 Theoretical Framework

Parents can observe their children's development in different areas as they spend time with them in naturally based situations, so they know the changing and ongoing needs of their children in

different contexts (Acar & Akamoğlu 2014). The rationale that underpinned the study is that families and parents, in particular, are cornerstones in their children's development, and their concerns and priorities are most important for guiding the specialists in designing suitable education and rehabilitation plans that meet their children's needs (Bruder 2010; Zheng et al. 2016). Therefore, understanding their perspectives about transition would enhance the suitable placement of their children after the ECI phase.

Accordingly, this study used the ecosystems framework, Vygotsky's sociocultural theory, and the ecological and dynamic model of transition to focus on parents of children with SEND and their roles in the transition process. Taking into consideration the support the child gets from parents and policies in the UAE that empower parents in the rehabilitation journey, the study sheds light on parents' roles during the transition, how they perceive changes in these roles after transitioning to a new ecosystem, and how they view their children's adjustment to the new environment.

2.1.1 The Bioecological Theory of Development

Investigating transition in ECI from the perspective of the parents requires considering the ecosystems in which these parents and their children live since parents represent a microsystem that interacts with other systems containing the ECI programme, regular schools, and POD centres. To identify parents' roles in the transition process, we need to understand their dynamic interactions in the multiple systems surrounding them and their children, and how these systems affect the transition process. Therefore, it is essential to understand the basis of the bioecological theory of development.

In the 1970s, Urie Bronfenbrenner came up with the ecosystems theory in child development that is applied by developmental psychologists (Bronfenbrenner, 1994). This theory suggests the importance of understanding the contexts in which the child lives and interacts, such as family, school, and neighbourhood. The interactions between these ecosystems are important for the child's development, as well as for transitions from one ecosystem to another (Bronfenbrenner & Morris 1998).

Bronfenbrenner (1979) placed the child at the centre of an ecosystem's layers, which affect his or her development. This starts with the *Microsystems* level, which is close to the child and in which the child interacts with people such as parents, teachers, and relatives, or with places

such as school and home. Bronfenbrenner, in most of his studies, has focused on the family role in childhood development, with limited dealing with other significant developmental microsystems. He defined a microsystem as:

> a pattern of activities, social roles, and interpersonal relations experienced by the developing person in a given face to face setting with a particular physical, social, and symbolic features that invite, permit, or inhibit engagement in sustained, progressively more complex interaction with, and activity in, the immediate environment. (Bronfenbrenner 1994, p. 39).

The second level is the *Mesosystems,* which refer to the interactions that take place between two or more microsystems containing the developing person, which can directly influence the child's development, for instance, the interaction between home and school or other educational settings. "In other words, a mesosystem is a system of microsystems" (Bronfenbrenner 1994, p. 39). Therefore, the on-going interaction and communication between families and educators make the staff more aware of families' culture and their needs, so they can provide services that meet parents' expectations (Spencer-Brown 2015).

Moreover, the child can be indirectly affected by the *Exosystems*, which is the next level in the Bioecological Theory. This layer represents the relations that take place between two or more environments; at least one of them does not include the developing person. This includes factors such as policies, mass media, family social networks, and neighbourhood-community settings. Additionally, the far layer represents the *Macrosystems*, which refer to the culture in which the child lives, including beliefs, lifestyle, bodies of knowledge, and traditions. This indicates the importance of going beyond the culture to recognise more social and psychological elements at the macrosystem layer that impact microsystems.

Chronosystems are also added to the theory as a third dimension that interacts with all of the previously mentioned ecosystems and encompasses changes over time in the child. "A chronosystem encompasses change or consistency over time, not only in the characteristics of the person but also of the environment in which that person lives" (Bronfenbrenner 1994, p. 40). These can include changes in family structure, social status, economic status, or place of living. According to this dimension, these transitions and changes that take place in the child's lifespan affect his or her development (Bronfenbrenner 1994). These multiple contexts and changes that the child is going through can offer an excellent chance for new learning experiences, whether it is pre-planned or accidental. From which the child gain in-depth

knowledge from different ecosystems, particularly family life, community life, and ECI services (Dunst, Bruder, Trivette, and McLean 2001).
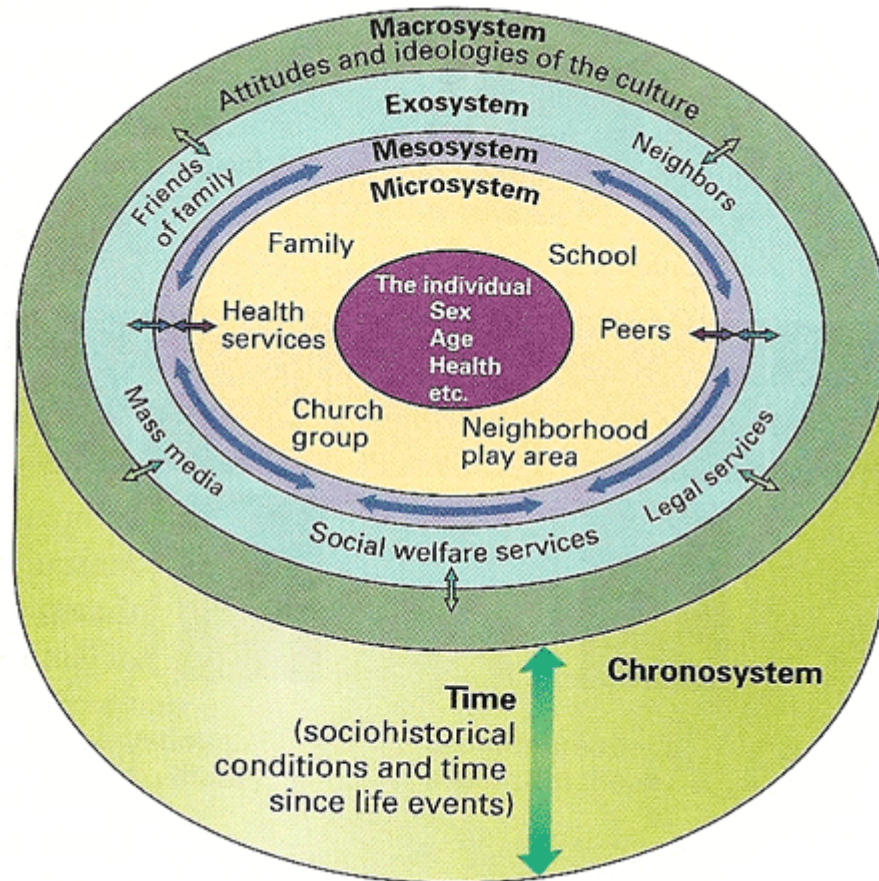
Figure 1: The Bioecological Model of Development (Hayes, O'toole & Halpenny 2017, P. 14)

Based on The Bioecological Theory of Development, Bronfenbrenner and Evans (2001) suggested a bioecological model that explains the child's development within the reciprocal interaction with people and things in the surrounding environment. The researchers regarded fields that impact the child's ability to adapt to new settings such as family, school, teachers, peers, and society in general. These changes in the environments that take place in the children's life span reflect the transition process from preschool to kindergarten for all students, including those with SEND. Accordingly, families should be actively involved in the transition process and support it through strong connections with educators and influential spheres in the child's development to ensure a smooth process and enhance their learning (Spencer-Brown 2015).

2.1.2 Vygotsky Sociocultural Theory

This study also looks at the socio-cultural theory of Vygotsky to understand the role of culture surrounding young children and their development. Vygotsky (1896–1934) was a Russian theorist whose ideas have influenced the field of psychology and education. Based on Vygotsky's thoughts, the child is affected by the sociocultural environment in the early stages of the lifespan through the tasks and demands to which she is exposed by parents and other people close to her. Parents who are part of the culture that the child lives in provide instructions to the child and influence her way of doing things, how to do them, and what not to do. (Lantolf 2000).

Wertsch (1985) states that the first understanding of the knowledge comes from the child's interactions with people in the social context (interpsychological plane). Then, the child adds this knowledge to his personal views to assimilate it in the second stage (intrapsychological plane). This process represents a transition of knowledge from the social to the personal level after the child's interaction with the surrounding environment.

Williams and Burden (1997) argue that sociocultural theory has a wide perspective of child development, as opposed to viewing it as a discrete process of skills separated from each other. This emphasises the importance of continuing ECI services after transition as a process connected to the child's ongoing development.

Vygotsky introduced the notion of the Zone of Proximal Development (ZPD), which refers to the space between the child's actual developmental level, as specified by the independent performance in figuring out problems, and the child's potential developmental level, as specified by adult supervision or participation with peers (Wertsch 1985). This emphasises the role of parents in children's development as parents spend more time with their children in natural environments. In addition, the potential skills that a child might master in the next educational setting are embedded in the transition plan based on his or her current performance level.

Williams and Burden (1997) argued that Vygotsky also mentioned mediation as that would be controlled by the people who are very close to the child, such as the parents. Through this process, parents facilitate their child's development by exposing him or her to suitable experiences, situations, and people who have different levels of knowledge; this is the secret to

teaching a child new skills and helping him or her transition to the next level of development. Therefore, Brown and Guralnick (2012) placed families in the centre of the ECI support approach that targets parents to facilitate their day-to-day interactions with society, and then to be able to reinforce their children's development by exposing them to new learning experiences. These concepts from Vygotsky's theory fit the framework of this study as they explain how parents influence their children's learning at an early age.

2.1.3 The Ecological and Dynamic Model of Transition

Rimm-Kauffman and Pianta (2000) suggested the ecological and dynamic model of transition as a key to understanding relationships between all parties engaged in the transition process (parents, teachers, peers, etc.) and how these interactions affect the child.

This model combines the child's characteristics to predict the adjustment to school (such as cognitive readiness, language abilities, and temperament) with the contexts that directly affect the child's adjustment, particularly in relation to the family, and the indirect influence of the family members, school, neighbourhood, and peers, as well as the interactions between these contexts over time.
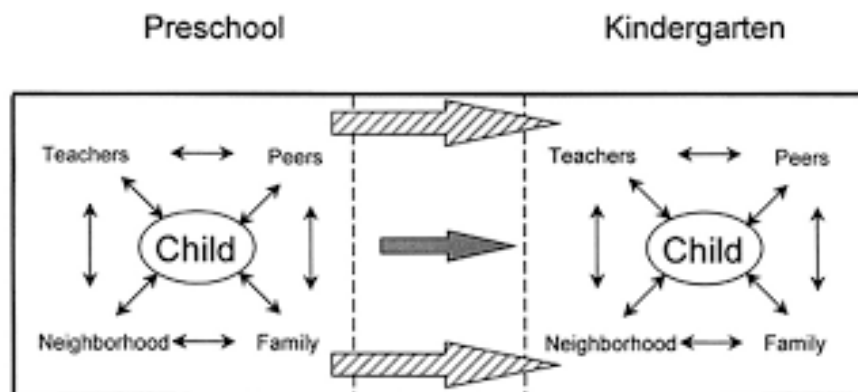
Figure 2: The Ecological and Dynamic Model of Transition
(Rimm-Kauffman & Pianta, 2000, p. 497)

Kraft-Sayre and Pianta (2000) explained key concepts of this model; most importantly, it builds essential relationships for transition success and focuses on the enhancement of the family's role in the transition. Therefore, Bronfenbrenner (1994) asserted that it is the continuous interaction between the adult and the child that takes place within a family or other microsystems that fosters the child's development.

The cornerstone of this model is its focus on the improvement of relationships between contexts over time, while parents' and teachers' involvement is a good example of the development of interactions over time that directly affect the child's adjustment and early schooling after the transition. The successful transition from home to school is also connected with parents' expectations of the educational system and how it will cooperate with parents to support the continuity between home and school. These relationships are also vital for parents of children at risk, which can reduce stress during the transition process and ensure successful transition (Rimm-Kauffman & Pianta 2000).

This model of transition combines the child's skills, the environment where they live, and the connections between surrounding settings, with more assertion on collaboration between different environments over time, as well as individualising a transition plan that meets the unique child's needs and their family (Rimm-Kaufman and Pianta 2001). The idea of developing a community of practice in early intervention is emphasised recently by Rabinowicz (2018) that includes all stakeholders to make every effort to respond to the children and their parents' needs. By doing this, stakeholders can exchange knowledge among them to improve the level of care and required services Carroll (2016).

Pianta et al. (2001) conducted a study about partners' collaboration and its impact on the transition to kindergarten for children with and without disabilities. The researcher collected data from parents, teachers, and other partners working with families during the transition process using rating scales, questionnaires, and interviews. As a result, the study found positive views shared by parents and teachers regarding mutual collaboration prior to the transition. Moreover, parents considered the preschool educators the most significant source of knowledge and assistance during the transition procedures. They likewise pointed out that the receiving teachers in kindergarten were less involved in the process and seemed to be less collaborative with parents and preschool staff. Accordingly, the researchers concluded that positive attitudes among stakeholders regarding the roles of sending and receiving staff, parents, and service providers improve the collaboration for a smooth transition. Therefore, this model emphasises the collaborative partnerships among stakeholders, with more focus on families' and children's strengths and adapting transition procedures to meet the individual needs. In addition to offering informal support systems that enable families to generate their own individual support style.

However, little is known about the implementation of this model with families of children with ASD during their transition to school (Pianta et al. 2001).

2.1.4 Summary of the Theoretical Framework

In summary and after presenting the main two theories and the model that are related to roles of parents in supporting their children's development, it is important to show how these theories used to underpin this research work together to form the theoretical formwork.

Bronfenbrenner's theory focuses on people and places that the child lives in and the reciprocal interactions between theses settings that impact the child's development. Parents are microsystems that interact with the ECI facilities and public schools, and their active interaction leads to a successful transition from early intervention to the next educational stage. Another important component of Bronfenbrenner's approach is that, elements in the exosystems and macrosystems layers that can affect the child's development indirectly. Among them are policies and culture surrounding the child. Therefore, it is necessary to understand the transition process and the roles of parents in it, in light of the early education policies in the UAE and the culture in general.

Similarly, Rimm-Kauffman and Pianta's model emphasise the improvement of relationships between parents and the new staff overtime. In addition to the active roles that parents play in the joint transition plans, as they can provide the educational staff with informative feedback on the child's progress during the transition to the new setting. Therefore, engaging parents in all stages of the transition process would facilitate the transition and reduce the stress caused by the challenges children and parents face in the new educational environment (Rimm-Kauffman and Pianta 2000). Moreover, Vygotsky introduced the parents as early educators for their children by exposing them with the new experiences that improve their development in their lifespan. So parents play a crucial role in facilitating the knowledge transportation from the sociocultural context to the personal context. Therefore, parents are essential partners in the transition plans from ECI to other educational settings, in terms of preparation and implementation, particularly their roles in following-up the educational goals mentioned in these plans with their children in the natural environments

To sum up, this theoretical framework considers essential dimensions of children's development and transition from one setting to another. The framework's substantial

dimensions include the context, the parents' role, the transition of knowledge, and dynamic interactions between partners. Bronfenbrenner's work focused on the understanding of the context surrounding parents and their children as well as the dynamic interactions between multiple systems and how these systems affect the children's transition process. This is also emphasised by Vygotsky's theory by showing how the sociocultural environments impact the children's development, considering parents among the most influencers who can influence the children ways of learning and development. Consistently, the ecological and dynamic model of transition asserted the growing relationship between parents and other staff in the new educational contexts, and how these interactions affect the child's adjustment in the new transition setting over time.

Thus, Vygotsky's theory in general, the Bioecological Theory of Development, and the ecological and dynamic model of transition in particular are the guiding framework for this study. The transition from ECI based on Bronfenbrenner's work was explored by several researchers (e.g. Starr, Martini, & Kuo 2016; Spencer-Brown 2015; Schischka, Rawlinson, & Hamilton 2012; Pang 2010). A thorough analysis of the findings of those studies is presented in the literature review section.

2.2 Literature Review

The literature review plays a crucial role in educational research by discussing former research studies and taking advantage of the resulting knowledge, reviewing previous studies explaining and determining thoughts and theories linked to the studied phenomenon. Moreover, it helps the researcher in determining appropriate methodologies to drive the study towards achieving its objectives. And finally, it provides the researcher with a deeper understanding of the achieved results and the ability to discuss and interpret it (Ary et al. 2013).

The aim of the literature review section in the current study is to brief the development of the UAE's early intervention services and focus on targeted children and parents by these services within the country's ecosystems. Additionally, to provide a summary of the cultural and educational policies in which children with SEND and their families live. Also, to give more attention to the transition procedures in ECI and how parents viewed their roles in it through the previous studies, as well as the parents' perspectives towards the transition process in general.

In order to review previous studies about ECI transition and parents' views about the process, the researcher searched several databases, mainly WorldCat and Google Scholar to find relevant studies which serve the main research aim and objectives. The researcher used several keywords which are: early intervention, early childhood, transition, families, parents, and people with SEND to find related studies. The most important two factors the researcher was looking for in each study are the transition in ECI, and parents, knowing that the study aims to investigate the parents' perspectives during the transition, due to their significant role in the process.

The literature review of the study was divided into five sections. The first one explained the model shift in disability across the world. The second section sheds light on the development of ECI services in UAE. The third section discussed the conceptual framework related to parents as well as the ecosystems surrounding them and their children since the second question of this study is to come up with the implications of ecological systems for the transition process. Meanwhile, the fourth section of the review focused on previous research that was directly concerned about parents' roles and perspectives in the early intervention transition process, which is connected directly to the research purpose and questions. The researcher added in this study a fifth section as a literature review summary to showcase how the current study is situated within the previous literature.

2.2.1 The Model Shift in Disability

In order to analyse how parents view the transition of their children from ECI facilities to other educational settings in the UAE, it is essential to understand how disability was viewed historically around the world and how this view evolved over time through shifts in disability models, as well as to recognise the prevailing perspectives on disability in the UAE as mentioned in previous literature. Therefore, the researcher has explained the shift in disability models around the world from the medical to the social model, and recently to the rights model.

The medical model viewed disability as physical defects of psychological limitations that need treatment by the medical professionals who can make decisions on behalf of the person with disability, while the social model refers to the disability to the environmental obstacles and social barriers, which hinder the person from full access to the environment on equal basis with other people in the community (Oliver 1990). More recently, the rights model of disability is founded on the basis of human rights concepts. It emphasises the need to improve social policies

and legislation adopted by institutions to ensure that persons with disabilities have full inclusion in different aspects (Waddington & Diller 2002).

2.2.1.1 Shifting from medical to social model of disability

According to the medical model, the individual with a disability is responsible for the functional defects or psychological limitations; it considered the disability as a problem that needs to be cured by doctors or medical professionals who are experts and can make decisions on behalf of the person with the disability. This view was mentioned by Oliver (1990, p. 2) as "[t]he personal tragedy theory of disability".

This model refers back to doctors who tried to control people's lives using medications (Oliver 1990). Then, the World Health Organization was influenced by this view in 1980 through the definition of disability which had been refused by persons with disabilities for its concentration on physical limitation instead of social context and environmental obstacles (Barnes and Mercer 1996). According to the medical model, disability is an individual problem due to physical or sensory dysfunction that needs medical treatment; it views disability as a constant state with no regard for any changeable environmental conditions (Alshamsi 2010). Brisenden (1986) pointed out the negative effects when the disabled person was referred to medical categorisation and described as a person who needs sympathy. He emphasised the need to get to "the real person inside the image of disability" Brisenden (1986, p. 2).

In a different view towards disability, the social model emerged, which has its roots in the 1960s, during a widespread feeling of oppression by disabled persons that urged activists to call for perspective-shifting across disability within the social context instead of medical conditions associated with the person (Bampi, Guilhem & Alves 2010). In the next decade, the Union of the Physically Impaired Against Segregation (UPIAS) in the UK tried to explain how the terms of disability in relation with their experiences as disabled persons exist in social contexts that exclude them from full participation and physical obstacles around them that hinder them from accessing facilities and services (UPIAS 1975).

Prominent academics (Oliver 1990, 2004) developed the idea of disability against impairment and kept away from focusing on limitations related to physical or sensory impairment to instead focus on environmental obstacles and social attitudes that hinder the person from full accessibility on an equal basis with others. Following that argument, service providers should

adopt new policies that ensure equal opportunities for all in the community, rather than trying just to cure disabled people of their personal limitations (Bampi, Guilhem & Alves 2010).

Oliver (2004) argues that the social model is a fundamental shift in how people perceive disability, from deficits in physical functioning to the environmental and social obstacles that hinder the person's abilities. Hence, modifications to the surroundings are crucial to guarantee full participation in educational and social life. These changes could be physical or social to create barriers-free lives. So, this model challenged the medical model that looks at disability as a disease that needs treatment. (Gallagher, Connor & Ferri 2014). To solve this argument, people must place the focus not on therapy but on creating new policies that achieve equity for all because disability is not a personal dilemma but a result of unsupportive environmental and social arrangements (Bampi, Guilhem & Alves 2010). Meanwhile, "[t]his social perspective of disability… is generally not shared by the UAE community" (Alborno & Gaad 2014, p.3). The medical perspective is still dominant in the used language among people or in the media. Even services provided to persons with disabilities are based on a charity perspective (Alshamsi 2010; Gaad 2011).

In the recent decades, there was a change in paradigms of development and disability. The medical model viewed disability from a biomedical perspective, with great focus on therapy and rehabilitation of the child, while the social model shifted this focus to a public social approach, which "framed in terms of the reduction of risk factors and the removal of barriers to functioning" (Rune 2003, p. 5). The preamble to the UNCRPD acknowledges that disability as "an evolving concept", but also stresses that "[d]isability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others" (United Nations 2006, p. 1). Therefore, defining disability as an interaction means that disability is not an attribute of the person.

Based on the new understanding of disability, the concept of ECI moved away from perceiving disability as a medical problem to a problem related to social constructions, at the time that the social model is still valid for more than thirty years in facilitating daily lives of PWDs (Oliver 2013). Depending on that, the rehabilitation process within the environment and family participation are significant rather than the focus on children and centre-based services.

2.2.1.2 The rights-based approach to disability

The approach is founded on the basic concepts of the Universal Declaration of Human Rights (1948), which stressed that "[a]ll human beings are born free and equal in rights and dignity" (United Nations 1948, p. 2). It implies that humans have the right to participate in all aspects of life on an equal basis with other people irrespective of their disabilities. So, disability is part of human diversity, and no one should be excluded as a result of it.

This model refused the premise that excluding PWD from full participation in society is a certain result of a disability and proposed the idea that institutions have failed to meet PWD's basic needs for a long time, so they have been excluded (Waddington & Diller 2002). Supporters of this model ensure that the inability to accommodate these needs stems from conscious and unconscious negative attitudes towards disability, which consider discrimination instead of the need to cure the existing medical deficits in disability (Shapiro 1993).

As laws have margined people with disabilities from participation, governments are responsible for fixing that and ensuring the equality of their rights with other citizens as part of removing other physical and social obstacles (Kanter 2003). The rights model emphasises the need to improve social policies and legislation adopted by institutions to ensure persons with disabilities full inclusion in different aspects (Waddington & Diller 2002).

The United Nations welcomed this approach through the adoption of the UNCRPD that widened the area of the human rights principles and stressed the "[r]espect for difference and acceptance of persons with disabilities as part of human diversity and humanity" (United Nations 2006, p. 5) instead of the focus on impairment.

2.2.2 The Development of Federal ECI Services in UAE

In order to understand the journey that parents experience in ECI during services provision, this section provides detailed information on ECI approaches internationally, as well as the development of the EECIP in terms of the categories it serves and the families' roles in different stages of intervention, with more focus on the transition process.

Early intervention has different approaches across the world. Even in most developed countries, such as in the USA, ECI services are delivered for infants and toddlers who have confirmed disabilities or at-risk factors from birth to five years old using a home-based system provided in inclusive settings rather than specialised centres. Meanwhile, the special educational needs of young children in England are met normally in public mainstream educational systems within pre-schools and nurseries, accompanied by extra therapeutic and support services from

specialists when a child doesn't develop enough. Moreover, the Australian ECI approach is applying home- and centre-based services or combining both systems together (Alliston 2007).

Guralnick (2001) suggested a comprehensive family-centred approach in early intervention that consists of early screening, referral, admission, assessment, observation, intervention, and transition to other facilities that serve vulnerable children biologically and environmentally at early ages.

In the UAE, the first early intervention centre was launched by the Sharjah local government in 1992 using the same approach, with which therapeutic and educational services are provided to children in the centre in addition to outreach family training and support delivered in homes (SCHS 2013). On the federal government level, the EECIP was launched by the MOCD and moderated by the Department of People of Determination. It started in Ras Al Khaimah when the "My First Steps" initiative started in 2010 and extended to other Emirates. The programme created was in response to parents who demanded therapeutic services for their children under six years old; at the time, rehabilitation centres did not accept children under that age. Therefore, the MOCD has provided comprehensive services for children and their families through opening independent ECI units in the federal rehabilitation centres.

The EECIP has extended its services to reach four emirates in the UAE through the Dubai Early Intervention Centre (DEIC), as well as the early intervention units in emirates of Ras Al Khaimah, Ajman, and Fujairah, which operate under the umbrella of the rehabilitation centres. The programme was mainly founded on the idea of centre-based services. Meanwhile, part of these services is provided to children and their families in natural environments. The programme also targets three main categories of children with SEND below six years old and their families; they are the children with a confirmed disability, children with developmental delay, and children at risk for developmental delay at some point in their lives as a result of health, social, or cultural factors (MOCD 2015).

The concept of ECI in the federal government programme in the UAE is drawn from the centre-based approach that provides different therapeutic and educational services inside the centre premises. These services include educational classes that teach children academic skills adapted from the kindergartens' curriculum to suit individual educational needs, in addition to related therapeutic sessions to support children's physical, cognitive, communication, and sensory development (Ministry of Social Affairs 2014; Al-Khatib 2016).

2.2.2.1 Referral to the ECI programme:

Children are referred to the EECIP from various sources, the most important of which are the parents themselves, medical clinics in the country, maternity and childhood centres, nurseries and kindergartens, public and private hospitals, and other early intervention centres. Field screening campaigns by early intervention professionals in nurseries and kindergartens are among the most important sources for referring children to the programme.

The *"Nomow"* smart application also helps parents to identify the level of developmental skills in their children compared to other children of the same age in six domains (Gross motor, Fine motor, Problem-solving, Social skills, Communication, and the Behavioural aspect). The aim behind the Nomow App is the early detection of any developmental delay in children under six years old and to compare their global development with their peers in order to provide them early intervention services that would develop their skills as well as to provide training and counselling for their families. Therefore, Nomow is a screening tool of child development that can be used by families before the child is referred to full assessment by an interdisciplinary team. So, it is the initial step towards referring children with developmental delays into the EECIP (MOCD 2019b; MOCD 2015). Table 4 represents the number of children that have been screened by the EECIP using Nomow, and the results of the screening:

Year of screening	Number of screened children	Results	
		Suspected developmental delay	Developmental delay
2015	142	16	31
2016	339	45	29
2017	357	36	35
2018	723	63	46
2019	725	42	70

Table 4: Nomow Screening Results (MOCD 2019a)

The EECIP provides family counselling for children who have suspected developmental delay, enabling their families to improve their skills; meanwhile, children with developmental delay are referred directly to the early intervention programme. The referred children are subjected to a full assessment by an interdisciplinary team, where parents play an integral part. The results are then endorsed by the placement committee in the MOCD which issues the service eligibility decision. Parents are informed of the assessment results through a special form, so they can approve or reject the assessment results. If the child is eligible for the ECI services, an individual plan is formulated by the interdisciplinary team to meet his or her needs along with the parents' priorities, who sign the plan (MSA 2014).

The services in the EECIP are divided into two main programmes: The individual family services programme, which provides supportive therapeutic services to children from birth to three years old, including physical, occupational, and language therapy, as well as training for their parents. This programme focuses mainly on parents to enable them to practice broader roles with their children in natural environments. This programme also includes training goals for parents through individual family services plans (IFSP)s. During that, parents receive counselling and training within centres premises, as well as supportive home visits to follow up on the implementation of the plans in natural environments (MSA 2014; MOCD 2015).

The second programme targets children between the ages of three and six years and is based on special education classes that consist of a number of students between three and seven (Al Khatib 2016) so that each child has their IEP that meets their needs, including precise objectives in several areas (gross motor, fine motor, social skills, communication and cognitive skills). The aim of this programme is to prepare children for the next stage, whether it is inclusion in schools or transition to POD centres.

2.2.2.2 Educational context:

The early intervention centre or unit in which students are enrolled provides educational and rehabilitation services for Emirati children with SEND under six years old through the two main programmes. The last year in the centre is the transition year, which links ECI to the next educational stage.

When the children are around five years old, they are prepared in the education classes for the next stage, which is the transition to schools after one year of preparation. ECI centres have pre-inclusion classes, each of which contains about five children from different SEND. These children are being educated for inclusion through IEPs that meet each child's needs. In these classes, teachers use the KG 2 curriculum to set individual goals for each student, focusing on the academic skills needed for grade one and pre-writing skills in addition to basic general concepts that help children to understand the surrounding environment. Moreover, therapeutic services such as speech therapy and occupational therapy are provided to these students when needed.

The EECIP follows an interdisciplinary team approach in which the team assesses the child in the presence of his or her parents during the same session. Thus, the team can observe the child's behaviour and interaction at the same time, afterwards discussing the child's abilities and needs as well as the family's needs to write a single report that reflects the views of the team as a whole and determines the eligibility for services. This system saves a lot of time and effort as the assessment is conducted in a single session and mostly involves all team members. Consequently, a single plan is designed to cover all the required services for the child and the family.

All ECI centres provide educational and therapeutic services for children as well as counselling services, training, and home visits for the families. There are other supporting services such as hearing tests, hearing aid support (when necessary), and a prosthetic device consultation for children with physical challenges. ECI centres strive to provide various integral services to children and their families through the premises and natural environments in which the children live.

Although the EECIP is following a centre-based approach, the programme believes in the importance of the natural environment in which children live and its impact on developmental abilities as children spend most of the time in it. Thus, the centres use the children's daily routine as an opportunity to develop their skills in collaboration with parents at home or other natural settings. In order to achieve this, the programme provides services through field visits aimed at making accommodations at home or other educational environments, such as nurseries and kindergartens, to support child inclusion. The programme is also keen on investing natural

resources that might support child development, including the ecosystem in which the child and his family live (MSA 2014; MOCD 2015, 2019).

2.2.2.3 Transition services:

By following a three-term system, the ECI team starts designing transition plans for pre-inclusion class students in the third term. These plans comprise academic goals that needed each child before inclusion. To achieve these goals, both the ECI team and the public school team, as well as parents, work together to provide children with the required skills during the third term. The transition plans to inclusive settings often prepared for children with developmental delay, sensory, physical, or mild disabilities in general. Meanwhile, for children with ASD and intellectual disabilities, plans are mostly designed to transition them to POD centres following the special education system, knowing that they represent the largest proportion of transitioned children from early intervention.

The early intervention team participates in the transition plan, as well as the new team that receives the child in the new setting so that the transition plan is implemented during the third term within the ECI premises and the proposed educational environment. Both the sending and receiving teams are involved in implementing the plan to ensure that the child and their family are prepared for the new educational setting, and in guaranteeing the success of the transition process gradually and safely (MOCD 2015; MOCD 2019).

The transition decision is a joint statement of the interdisciplinary team that works with the child and their parents who should agree upon the transition destination; however, the final approval of transitioning children to regular schools is the responsibility of the "Joint Committee" by the MOCD and MOE. The committee has been formed between the two entities to diagnose and evaluate students with disabilities for inclusion eligibility. It is also responsible for coordinating and collaborating on the transition mechanisms from ECI to regular schools for students with various categories of disabilities (MOE & MOCD 2016).

It is worth noting that, during the past years, the percentage of those who have been transitioned from the EECIP to POD centres represent the majority of those who transitioned, compared with those who have been transitioned to regular schools, as shown in the following table 5:

Academic Year	Percentage

40

2015/2016	12.3%
2016/2017	19.1%
2017/2018	16%
2018/2019	17.5%

Table 5: Percentages of Children in EECIP Transitioned to Regular Education System (MOCD 2019a)

2.2.3 Parents of Children in ECI and the Ecosystems

A large body of evidence points out the importance of early educational experiences on children's outcomes, particularly when different entities in ecosystems collaborate to facilitate the best educational environment that supports children's learning and smooth transition from one system to another (Koenig 2011; Curle et al. 2017b; Malatsi, Mpuang & Mukhopadhyay 2015; Franco et al. 2017). Having the interaction take place among multiple stakeholders in the community can spread knowledge about the best ways to serve children at early ages and create a better understanding of the entities' roles in the ecosystem supporting children's development. Service providers in ECI are responsible for bringing parents together to formulate individual plans, and actively contribute to implementing the plans that respond to the children's and family's needs (Rabinowicz 2018).

Professionals also should have ongoing communication with parents about children's progress and share knowledge on the latest developments in children's abilities. They should also ask parents about their views on the provided services, as well as their children's strengths and needs, in order to include their feedback within the services and types of supports (U. S. Department of HHS & Department of ED 2016).

Rabinowicz (2018) pointed out that any opportunity for change in early intervention would require collaborative efforts among professionals and service providers or anybody in the community linked to children and parents. Researchers, educators, agencies and the local government are fundamental stakeholders to demonstrate innovative practices in ECI through developing a community of practice. This community would share knowledge to bridge gaps and develop new evidence-based strategies and implement them in the field.

Previous research provided evidence about the role of high-quality environments where children and families live in the achievement of positive academic and social outcomes in ECI,

particularly in public education classrooms. The literature also considered the role of collaboration among stakeholders and coordination between programmes as critical for parents to experience a successful transition.

In order to establish a communication system between multiple entities responsible for the transition, the designation of focal points to play facilitating roles in both sending and receiving parties is critical. Families need open communication channels with the ECI programme, including the management and professionals, as well as the relevant bodies in the community that might influence the transition (Rous & Hallam 2012).

Since transition is a process that needs multiple agency efforts to achieve it effectively, Rous and Hallam (2012) recommended the involvement of appropriate entities and persons in the transition to increase its quality. Parents of children with SEND and extended families are an integral part of the process. The wider society, including culture, policies, institutions, and media, all play an influential role in the success of the transition from preschool services to other facilities. Therefore, the collective transition framework with specific practices involving all those in circles surrounding the child and his/her family would impact the intensity of transition.

ECI needs to work with people from different ranges of disciplines, such as medical, educational, social, and developmental areas since they have the expertise they can offer to achieve joint goals. However, these professionals might follow different philosophical models or services provisions, so they need to align their approaches and work closely with parents in joint work that uses understandable language that is easy to follow.

There are many potential types of teams that can work together in ECI to serve children and families, which are mainly multidisciplinary, interdisciplinary, or transdisciplinary. In any of these forms, the ECI team should work collaboratively and closely with parents within the social context. To do so, positive relationships between professionals in ECI and schools, entities, and communities in general, as well as with families, should be established to contribute to the transition (Alliston 2007).

Carroll (2016) supports creating a partnership approach that includes parents, stakeholders, and service providers that work with each other through a collaborative process serving children in ECI. All stakeholders establish a communication system through which they can share their

knowledge and provide contextual evidence to improve the level of care and required services. Using relationship trajectory is crucial to give parents a strong position that enables them to take part in decision-making and the influencing involvement within the relationship in all stages of the early intervention process.

In a study about a national ECI system as a strategy to promote inclusion and academic achievement in Portugal, Franco et al. (2017) indicated the importance of networking in ECI and placed the family at the centre of this collaboration. It supports interaction and communication skills and helps families adapt easily to surrounding environments, in addition to alleviating any stress caused by the transition. Building formal and informal networks between families and agencies in the community can strengthen family inclusion and increases the opportunities of a successful transition. This also can reinforce the articulation among service providers, bring them together nearby the customers, and promote the quality of services. The transition of children with SEND to regular schools is a critical issue that needs monitoring and follow-up by related entities to ensure the child has real inclusion in the new setting and family support.

Dunst, Bruder, Trivette, and McLean (2001) believe in the importance of the context in promoting new learning opportunities for children and various experiences. So, they suggested a learning model based on natural environment practice. This model includes three main sources of learning experiences that children can get in-depth knowledge from it which are family life, community life, and early childhood programmes. They provide examples of learning opportunities that may arise during these situations, either as pre-planned events or accidental, knowing that these three contexts overlap with each other to produce new learning experiences. Part of these examples are as follows:

- Family context: includes learning opportunities that occur within the family members and home facilities such as bath times, mealtimes, watching TV, family gatherings, and playing with family members or any activities within the family.
- Community context: includes learning opportunities that occur within the broader community, whether with a variety of people or places such as visiting extended family or friends, greeting a neighbour, playing in a park, or interacting with people in a shopping mall.

- Early childhood context: includes any learning opportunities provided to the child during early childhood education or ECI programmes.

In a literature review study for the ministry of education in New Zealand regarding the principles and practices in early intervention, Alliston (2007) stressed the importance of a natural environment approach to ease the transition between settings. The concept includes not only where ECI services are provided but also how they reach the customers. It is known that children spend more time at home, so engaging the family in the intervention is crucial to achieving better outcomes. In addition, outcomes can be improved by embedding interventions into every single activity that children experience at home or in other natural environments.

The presence of interventions in natural environments helps to generalise the acquired skills in all of the child's ecosystem settings since it teaches the child to respond to the various conditions in which they live. It also incorporates the role of the family to build functional skills, which help children interact with and adapt to surrounding environments, as well as convey the learning experiences from one setting to another.

Research proves the impact of formal and informal support on families' quality of life and their ability to serve their children within natural settings. However, parents of children with SEND need more support to face the challenges they experience in the community, such as the isolation, public attitudes towards their children, stigma, and anxiety for their children's safety. Therefore, ECI professionals can support parents to recognise appropriate events and activities in the community that promote new learning experiences for the child, increase family integration, and alleviate stress during the early intervention (Fontil & Petrakos 2015).

Brown and Guralnick (2012) put families in the centre of the support approach that targets parents to facilitate their day-to-day interactions with society, to optimally be able to reinforce their children's development. One of the main ways to do this is by meeting the family's needs and providing professionals assistance by encouraging family engagement in cultural events and community-based experiences that enlarge the learning opportunities. Families should work with the larger society to reduce any distress that may be caused by surrounding environments and profit from social resources and initiatives that enable them to carry out their responsibilities towards children with SEND.

In his recent review of the ECI in the United States, Guralnick (2017) emphasised on social support as a fundamental protective factor for families of young children with special needs that restrain parent-related stress from surging. For future directions in the ECI, the researcher suggested a group of principles that emerged from this review, from among them is:

> [e]nsuring high levels of coordination and accountability, individualising interventions, focusing on families, using evidence-based strategies, establishing surveillance procedures, ensuring participation in inclusive settings, developing programmes and intervention strategies that are culturally appropriate, and ensuring that the professional workforce is well trained. (Guralnick 2017, p. 222).

The author concluded that the ultimate goal of ECI is to empower the family intervention style, which includes strong relationships with community, comprehensiveness and consistency of services, and bringing the family to the centre of the process.

2.2.3.1 People with SEND in the UAE culture:

According to the POD card issued by the MOCD until November 2019, there are 23,263 people already registered in the system who are from different ages and nationalities. These people are distributed by emirate as follows:

Emirate	Total
Abu Dhabi	8984
Dubai	4913
Sharjah	4421
Ajman	1576
Umm Al Quwain	380
Ras Al Khaimah	1743
Fujairah	1246
Total	23263

Table 6: Statistic of POD Card in the UAE (MOCD 2019a)

According to the POD card system, the number of people with intellectual disability represents the largest number of disabilities (7088, 30.5%), followed by a physical disability (6954, 29.9%) and ASD (3055, 13.1%), noting that children with developmental delays are not included within the POD cards system, as they are still young and do not meet the definition of disability. However, they receive the needed services and rehabilitation to support their

development. To elaborate, children with confirmed disabilities registered on the card system under six years old are 1,890, of whom 992 are Emirati citizens.

In the UAE, the term *persons with disabilities* has been changed to *people of determination* during the launch of the National Policy to Empower People of Determination (2017). The idea behind changing the term was to send a positive message to society. The new term indicates these people's strong motivation to contribute, create, achieve, and face the challenges of life with a positive spirit. At the same time, people have a strong culture, and Islamic values play a major role in society. Various fields-cultural, social, moral, legal, and economic- refer back to the faith and instructions of Islam, dominating different aspects of people's lives. So, it is a crucial factor that motivates people to behave towards people with disabilities from a charitable perspective as they are vulnerable individuals and need empathy (Gaad 2015).

In regards to the local culture, disability is still viewed from the medical perspective rather than environmental obstacles that limit a person from fully participating in society. It is the charity-based model that dominated in how issues of disabilities have been addressed, not the rights-based one. Children with disabilities are stereotyped and stigmatised in the culture. An example of that is the language used towards them, which reflects the cultural attitudes. Negative terms such as 'retarded', 'suffering', and 'disadvantaged' were documented in the media. It was also noted in regular schools as well as progressive reports sent to parents (Alborno & Gaad 2014).

Dukmak (2009) investigated parents' views towards rehabilitation services provided in the UAE, using a mixed-method approach. The study concluded three types of challenges facing rehabilitation services: challenges of service providers, lack of awareness, and the UAE culture. A large number of parents pointed out the lack of awareness about the services provided in rehabilitation centres, in addition to the negative influence of the culture on these services. Moreover, the study indicated the absence of awareness campaigns in the field of ECI and the promotion of services related to this stage.

In the UAE, early studies showed negative attitudes towards including persons with disabilities in regular schools. Gaad (2001) indicated the impact of social culture on creating people's attitudes towards children with disabilities and the limitations the people use while treating them. The study found nothing documented about including children with Down syndrome in

regular schools; however, the most likely setting presented to these children is to place them at special education centres without discussing other options with their parents, such as schools.

Alghazo and Gaad (2004) found that general education teachers in the UAE have negative attitudes towards including students with disabilities in public schools. Moreover, in 2006, Gadd indicated the importance of changing parental attitudes towards inclusion in the country. She explained how parents' support groups could play a critical role in changing social attitudes towards persons with Down syndrome and support educational and social inclusion. The study proved the roles of support groups in enhancing the quality of the lives of children and their families, as well as changing cultural myths about children with Down syndrome and SEND in general.

Gaad (2004) explained how the UAE culture affected teachers' attitudes towards including students with intellectual disabilities in the educational system. The study showed that teachers are less accepting of the idea of inclusion. The researcher attributed this rejection to the cultural beliefs about disability. She recommended a cultural understanding of the idea of inclusion, which will be reflected directly in the educational environments. This was also reinforced by Gaad and Khan (2007) regarding cultural attitudes towards inclusion. The researchers found that culture plays a very important role in the UAE. Therefore, regular schools are following the traditional thought, which includes a belief in sending students with SEND to special education centres rather than inclusive classes with their peers. This judgment is part of the cultural beliefs that the community holds against disability, so the change in school approach also needs a change in the cultural views with which the children live and learn.

Furthermore, Gaad (2015) uncovered that persons with intellectual disabilities were misunderstood and even ignored in the Emirati culture. People have misconceptions regarding their behaviours and how they interact with other people in society and schools. The researcher referred these negative attitudes to a lack of knowledge about POD capabilities and what they can do to participate in society. Additionally, the Gaad and Thabet (2016) mixed-method approach study found a great impact of parental support on attitudes towards children with ASD. The study showed how parents are in desperate need of support and training. They need society to hear them and to understand their needs and struggles with their children. The study also proved how parents can learn from each other's experiences and change their views towards these children and how they respond to their needs in different ways.

Alobeidli (2017) supports the previous research results and adds that most public education teachers in Dubai do not find that schools are the appropriate settings for children with intellectual disabilities, preferring special education centres or special classes within public schools. She found that the teachers attached a social stigma to POD in general.

It is obvious from the previous literature in the UAE that even the disability issue is viewed within the context of Islamic culture, which urges anyone in the community to take care of the disabled and empathise with them. However, the charitable approach is dominant in dealing with POD issues rather than the right-based approach. It is clear that societal culture does not support educational inclusion at the time when the community in general and educators believe that special education centres are the ideal settings for POD, in particular, children with intellectual disabilities, autism, and severe disabilities (Gaad & Thabet 2016; Gaad 2015; Alobeidli 2017).

International studies obviously declared that a large proportion of the early intervention children were transitioned to inclusive schools or mainstream settings (Eapen et al. 2017). Meanwhile, special education centres are still another option after ECI in the UAE. In addition, these centres still receive the largest portion of transitioned children from ECI. Therefore, understanding the perspectives of the parents is highly important since parents play crucial roles in their children's development and have their own views towards the appropriate educational settings for their children. This comes within the framework of the ecosystems surrounding children and families and the extent to which the UAE culture (including policies and educational settings) supports the inclusion of children with SEND and empowers their parents.

2.2.3.2 Early education and intervention policies in the UAE

Education policies can impact inclusive practices by encouraging the concept of equal opportunities for everyone to access education and establishing teaching strategies and leadership styles that respond to all children in the education system. UNESCO emphasises this central message of inclusive education, stating, "simple: every learner matters and matters equally" (UNESCO 2017, p. 12). However, children with SEND are still marginalised and deprived of their right to quality education. Therefore, education policies play a critical role in giving these children the opportunity to learn side by side with their peers in various settings: special education centres, special classes in regular schools, or in an inclusive education system

that facilitates learning opportunities in supportive environments to help each student achieve regardless of their abilities.

Founding inclusive schools are widely supported, as it has huge educational, emotional, and social impacts on children and their families, and it represents the commitment to human rights for all (UNESCO, 2001). Inclusive education practices can be supported or hindered by many elements, some of them linked to the school environment, such as teachers, infrastructure, or educational strategies. Other factors related to the social system and culture include the family's participation, culture, attitudes, and policies. Therefore, concerned entities such as education ministries should control these variables in order to facilitate equitable practices in schools by promoting inclusive education policies (UNESCO 2017).

In the UAE, there are many policies to empower POD in general and their early education in particular. In the exosystem layer that surrounds children with SEND and their families, policies play a critical role in regulating the services provided and establishing a collaborative network with entities that serve children as well as families.

The UAE has signed and ratified the UNCRPD, which reflects its laws, ministerial decisions, and national policies. In addition, there are laws and policies that affect ECI children and their families in the UAE. Most important is Federal Law No. 29, concerning the rights of people with disabilities. The law outlines a wide range of rights in education and other areas in addition to defining the obligations of ministries, institutions, and other government bodies towards them. One of the law aims is to "secure the means for early specialised intervention in the area of disability" (MSA 2006, p. 7).

In 2017, His Highness Sheikh Mohammed bin Rashid Al Maktoum, Vice President and Prime Minister of the UAE, and ruler of the Emirate of Dubai, launched the National Policy to Empower People of Determination (the new term for persons with disabilities in the UAE).The policy is based on six pillars: health rehabilitation, education, vocational training and employment, accessibility, social protection and family empowerment, and public life, culture and sports. This policy aims to create a barrier-free, inclusive society that allows persons with disabilities and their families to lead fulfilling lives through developing an effective support system. The national policy stresses the importance of establishing a national early detection programme that can diagnose any disability or developmental delay in early age. At the same

time, the national policy specified the goal of improving an inclusive educational system under the pillar of education. One of the initiatives under the education pillar is "redesigning and adapting the curricula to respond to the needs of people of determination" (MOCD 2017, p.14).

Going back to 2014, The MSA issued the regulation on implementing the early intervention programme in the UAE that includes transition services for children and their families in EECIP (MSA 2014). After that, in 2016, the MOCD has launched the Quality Standards for ECI Services in the UAE as regulations promoting early intervention services in rehabilitation centres and unites in the federal government. The standards determine the eligible children for services: children with confirmed disability, children with developmental delay and children who are at risk for disability. Although these standards are not launched as a "policy", the MOCD is considering it as the primary policy that is followed by the rehabilitation and early intervention centres that serve children under six years old. Based on Downey (1988), the policy can be identified basically as guidelines used by a governing entity which have public value. Sometimes, a policy might be a philosophy or broad guidelines that found a general rule or simple tools for practising power by a particular institution (Campbell 1998). Therefore, the Quality Standards for ECI Services in the UAE can be viewed as a policy for promoting early intervention services by the federal government, which lead to a smooth transition of young children into inclusion in public education.

The standards organise the ECI process from the starting point of a case's referral through the assessment and individualised plan, then a transition plan at the end of the programme. The standards also mention the staff working in ECI and their relation with families and distinguish between two sub-programmes that provide counselling services for families of infants and toddlers under three years old and educational classes for children between three to six years old. Besides, the standards have clear indications of high-quality services in comparison with best practices across the world. The series of standards and rules were issued in a book of about 96 pages in Arabic contained eight pillars and 162 standards. The first pillar explains the early intervention vision, mission, and goals, and meanwhile, the second pillar includes the early intervention policies. The third one identifies the administrative roles and responsibilities followed by the staff job description that is mentioned in the fourth pillar. The family's roles as partners are explained in more detail through the fifth pillar, then the individualised family services plan in the seventh pillar. The last two pillars are related to the referral, detection, and

assessment in addition to the services provided in early childhood intervention. The document has been appended with a glossary of terms and definitions used by the MOCD (Al Khatib 2016).

The ECI centres and units follow the ECI quality standards, which contain all necessary procedures to enable students to transition to schools. The standards elaborate roles of senders' team (ECI) and receivers team in the transition stage, differentiated instruction, required adaptations and teaching methods to ensure seamless transition, as well as the follow up needed to the student in schools to guarantee their adaptation with new environments and provide support when needed (Al Khatib 2016).

To facilitate the inclusion of children with SEND in early ages, the MSA launched the *"We Are All Children"* policy, which aimed at enabling nurseries to admit children with developmental delays or disabilities. Several criteria have been drawn up based on sound scientific bases. Such criteria are mandatory for all nurseries that admit children with disabilities or developmental delays. This policy serves as a guide for including children with disabilities in nurseries to ensure the provision of services that meet their individual needs and the success of inclusion in early age (MSA 2010).

After the child transition from the ECI programme to the inclusion schools, the MOE organises the inclusive process in public schools through *"School for All"* general rules that support special education provision for every student with special educational needs. These rules covered specialised staff working with students, such as their qualifications, duties and responsibilities, in addition to the IEPs assigned for each student and parents' roles in it. Moreover, this policy elaborated on the educational considerations for educating students with disabilities, and the strategies can be implemented to assess their achievements. The rules also mentioned that the adaptations and teaching methods should be applied to ensure an accessible, supportive environment for special education students on equal bases with others (MOE 2010). The rules were recently followed by a Draft Policy Framework for Inclusive Education in 2018 to ensure sustainable, inclusive education services for students with special needs in the UAE from early childhood to higher education.

The government of the UAE works relentlessly to provide equal opportunities for people of determination and their families to take on positions of responsibility, including their inclusion

into leadership programmes, youth councils, and other volunteer activities that allow them to contribute to the community (Buhumaid 2018). Therefore, the MOCD established the Advisory Council for the People of Determination, which enables people of determination, their families, relevant associations, and members of the public to participate in the development and implementation of national policies and initiatives for people of determination. The council comprises (15) representatives of federal and local government, in addition to parents and non-government association, six of these members are people of determination. It offers a platform for people of determination and their families to advise on the challenges they face and suggest the most effective solutions. The council has the following functions:

- To express opinions on programmers and initiatives carried out by the relevant authorities in the country regarding people of determination and the resulting plans and activities.
- Follow up progress in the implementation of the national policies and strategies of people of determination; review and follow up their implementation in coordination with the relevant authorities to improve the quality of services provided to this category.
- Participate with relevant authorities in the development of national programmes and plans aimed at disability prevention and reduction.
- Contribute to the establishment of the necessary standards for high-quality programmes and services provided by the State entities to people of determination in coordination with relevant authorities.
- Participate in the efforts to achieve the objectives of international and regional conventions and agreements concerning people of determination, which the country has ratified (The Cabinet 2017).

To ensure that people of determination receive services they need by different entities as easily as other members in the community, the UAE has imposed on all government service agencies to appoint *"Service Officers"* for people of determination in each entity. The aim is to provide seamless services for customers with disabilities and use suitable communication methods to respond to their needs. These officers should work as a link between POD customers and service providers in government and private entities, and establish positive attitudes towards them. More important is to simplify the procedures and stages of service delivery in line with the nature of the difficulties that POD are facing to find the best solutions that improve the quality of services (The Cabinet 2017).

At the local government level, the Dubai Inclusive Policy Framework assigned ten operational standards to ensure a high quality of inclusive education services in Dubai. The first standard of identification and early intervention is to early identify any children with SEND, in order to provide educational interventions that can enhance the children's development and learning. Accordingly, education providers should use screening tools to identify any children with SEND to determine the required level of support for each child using universal design strategies and IEPs (Knowledge and Human Development Authority 2017).

The Dubai Health Inclusive Policy is an ambitious document considering the status of children with SEND in early ages and the support their families need to cope with the challenges related to disability. The policy has three main pillars: early detection of disabilities, early intervention, and rehabilitation. It has a special consideration of the disability impact on family, particularly in early ages, which requires a proportion of parents' counselling programmes to mitigate the disability impact on the child and their families (Dubai Health Authority 2016).

To ensure high-quality service provision for POD in collaboration with concerned governmental entities, the Cabinet of UAE issued a decree in May 2019 to establish *"The Higher Committee for POD Services in the Country"*. A representative from the MOCD is the head of the committee, in addition to the membership of representatives of other ministries and local bodies. The committee aims to assess and examine the current status and challenges facing POD in various fields in order to propose legislation, policies and initiatives that protect their rights and to follow up on the implementation of the initiatives of the national policy to empower POD. In addition to activate the communication mechanisms between the concerned authorities and to approve the cooperation and coordination frameworks between them (The Cabinet 2019).

It is noticeable through the policies and the previous legislative system related to education and early intervention, both at the federal level of the UAE or at the local level in the Emirate of Dubai, that parents are part of these ecosystem changes and influenced by them at the time. They are playing a fundamental role with their children with SEND. Therefore, many authors recently confirmed their focus on families while providing services as the children are with their families most of the time. The family-centred early intervention model is ideal in the early years for its training provision to families that improve their children's abilities at home and in other environments (Dunst 2002). This model is underpinned with the belief that not only

do the children have special needs, but their families also have additional and different needs than others that need to be met (Tomasello, Manning & Dulmus 2010). Considering the ECI international models, the EECIP has been following a centre-based approach that suits the local culture, with more concern towards families as partners in the programme (Al Khatib 2016; MOCD 2014).

2.2.3.3 Children with SEND and families in early education policies

The researcher has reviewed previous research related to ECI policies and how these policies address the family and its roles in early education, in order to support the current study. For instance, in a recent study in Ireland, Connolly and Devaney (2018) aimed at understanding the parenting support policy in different environments, and how this policy considers parents of children with disabilities. The study found the importance of involving parents of children with disabilities, especially fathers, to access services anytime, and to increase collaboration and integrate ECI service providers to achieve common goals towards educational inclusion.

The efficiency of ECI programmes, family environments, and the policies in childhood development were investigated by Wodon (2016) in the USA, to provide an evidence-based practice on the importance of drawing up early intervention policies in the long term. The researcher stressed the importance of investment in ECI, as it has an economic benefit in the long run and increases the quality of life of children and their families. Therefore, the study suggested on-going governmental support for the development of ECI policies within family contexts. This study is consistent with another study conducted in the USA by Niles and Byers (2008), which aimed at understanding the implications of ECI policies on indigenous people in the US and the requirements that improve these policies to meet evidenced-based practices. The study concluded the need to enhance ECI practices to meet all people's needs and expectations, especially the indigenous people and the necessity for inclusive ECI design, and the implementation that considers all communities.

Furthermore, Jaco, Olisaemeka, and Edozie (2015) conducted a study in Nigeria to explore the importance of ECI policies in helping children with intellectual disabilities to be placed in an inclusive setting and to identify the benefits of ECI in children's social, academic and communication skills. They found that early intervention reduces the need for special education and helps the child to be an independent and productive member as well as enhances his/her

academic achievement at school. In the meantime, Malatsi, Mpuang and Mukhopadhyay (2015) analysed the ECI policies regarding disabled children in Botswana and investigated governmental and non-governmental authorities' perceptions towards these policies. The authors declared that ECI is inefficient because of limited coordination and an unbalanced distribution of services. Moreover, early childhood policies are not covering children with developmental delay or at risk of disability, which means they need to be developed to meet all children's needs.

Another study in Australia was implemented by Ziviani et al. (2011) to understand how three policies of ECI for children with physical disabilities were implemented differently according to each policy's aims and how these policies affected types of provided services to children and their families. The study emphasised the need for early intervention policies that were consistent with the context in which they were implemented to evaluate one's effectiveness. Staff, equipment and approach are essential factors that help in evaluating these policies, in addition to family support and individualisation.

Vargas-Barón, Janson and Mufel (2009) evaluated the early intervention programmes in Belarus and their policies, in addition to the types of approaches used and significant lessons learned from these services. The aim was to suggest guidelines that improve policies and establish useful ECI for children with disabilities and other developmental conditions. The study found that although the national health, social protection and education policies support ECI services, there is a lack of focus on disability and still more to do to align these policies with each other and achieve a common ground early intervention policy.

The researcher noticed from the previous studies that there are evidence bases for the implications of ECI policies on educational inclusion as these policies support children and their parents to settle in inclusive environments and help children for better achievement. Moreover, the benefit of early intervention policies is not only reflected in the children and their families but also have societal and economic implications because early intervention reduces the financial burden of the government towards persons with disabilities, and empowers the targeted children for smooth integration in the community.

2.2.4 Parents in the Transition Process

The ultimate goal of ECI is the transition of these children to inclusive settings (Zheng et al. 2016). However, this is not the only option in the UAE, since the majority of children with SEND still transition from EECIP to POD centres (MOCD 2019a).

According to the UNESCO (2017), parents of children with SEND are too often are forced to select between two only options, the first one is to meet their children's needs within special education schools, and the second option is to ensure that their children get the same learning opportunities and rights similarly to other peers through the enrolment in mainstream education. Therefore, these parents need to be involved in inclusion advocacy project to support developing an educational system that includes their children. This can be achieved by working with them to build support networks, establishing support groups, provide training in dealing with children and provide them with skills that can they can use it to advocate for their children inclusion.

2.2.4.1 Transition to inclusive settings:

A very recent debate is going nowadays which represents a fundamental shift in the concept of disability education. It is the concept of equity that stems from human rights tenet, which aims to empower the educational system to meet all students' needs in society, regardless of their abilities or differences. This contemporary principle should be part of the educational measures outline (Ainscow 2016). Equity includes both inclusion and fairness. It implies that:

> personal or social circumstances such as gender, ethnic origin or family background, are not obstacles to achieving educational potential (fairness) and that all individuals reach at least a basic minimum level of skills (inclusion). (Organisation, E.C. & Development 2012, p.9).

Accordingly, a new perspective should focus on removing barriers that facing children learning and making them excluded, as well as the sensitivity to the students' diversity (Ainscow 2007). In early intervention, this means that every child has the right to receive services that cater to the individualised needs within the natural context. This inclusive model in ECI has recently emphasised by Guralnick and Bruder (2016), the authors suggested the need of educational programmes that provide continuum services that consider all children capabilities and their developmental needs, rather than focusing on disabled children versus nondisabled. Therefore, a paradigm shift in early childhood education is required from the placement of children with SEND into dedicated premises to offer specialised services for them, to promote a comprehensive educational programme for all children in early ages that meets all their diverse

needs and considers their wide range of abilities. Such a programme should "promote the goals of access, accommodation, developmental progress, and social integration for all children, regardless of disability status" (Guralnick and Bruder 2016, p. 171),

In one study, Franco et al. (2017) presented the system of early intervention in Portugal and its role in the promotion of full education inclusion in public schools. The network is based on collaborative services provided by the health, education, and social governmental entities in the country, in addition to the NGOs that ensure full coordination and supervision. Professionals in many rehabilitation areas are responsive to services with more concentration on family empowerment to take part in the intervention system. This approach shows how it has facilitated the transition to full inclusion on different levels and reinforced family interaction skills with other teams. The system strengthened the family network and provided social support, which minimised family stress or any exclusion. At the community level, the system created strong bonds among early intervention service providers and made them much closer and responsive to the community needs.

Zheng et al. (2016) explained that ECI targets preschool children in different environments to promote their developmental abilities to the degree that helps them to be integrated into the community. There is strong evidence of the effects of ECI on inclusion, as it empowers children skills needed in public schools and prepares them to adapt to the new educational environment (Quah 2006).

Positive experiences that the child is exposed to at early ages can pave the way for academic success, so early identification can prevent further learning challenges that might face the child at school (Jaco, Olisaemeka, & Edozie 2015). More studies declared that ECI also supports child abilities and opens new opportunities for independent academic school life and the minimum need for special education services (Hackman & Jones 2005). However, offering transitional inclusive settings remains a challenge to be solved for ECI programmes (McWilliam 2016).

2.2.4.2 Parents' roles during the transition:

Understanding ECI transition requires learning about the roles of the key players in the process. Parents play a unique role at this stage as they spend time with their children at different times and in different environments, which are not limited to the ECI premises. Therefore, discussing

parents' expected roles or the roles they actually play in the transition process is important. Kang (2010) clarifies the role of parents in reducing anxiety in their children and helping them to adapt to the new setting through visits to the classrooms before the transition starts and meetings with teachers after the transition. Carlson et al. (2009) emphasise the importance of visiting the new educational setting prior to transition and getting knowledge about inclusion procedures. More recently, Leadbitter et al. (2018) argue that parents' roles in ECI start from the observation of any initial signs of developmental delays and reporting them to professionals. This early engagement helps parents undertake their responsibilities during the services as well as during the transition.

The policy statement on inclusion of children with disabilities in early childhood programmes by the U.S. Department of HHS and the Department of ED (2016, p. 19) emphasised that "families are young children's first and most important teachers and advocates". Therefore, ECI programmes and families should establish strong partnerships to ensure that families are aware of all stages of intervention and have adequate knowledge about it. Families need to know how to navigate the programme that supports their children, to understand their rights and duties, and to build relationships with schools that their children would be transferred to.

Wildenger and McIntyre (2010) examined parents' level of participation during the transition to kindergarten by asking them to fill out a questionnaire on the transition process. The results revealed that parents were involved in many transition activities, such as visiting the kindergarten, attending meetings, and receiving information about processes. However, only 5% of the parents reported engagement in high-intensity transition activities, which are critical to their children and educational plans.

In order to study families' participation in ECI and how service providers listen to their voices, Lee (2015) followed a qualitative case study design to get a deep understanding of families' roles. The researcher concluded that the relationship between the ECI programme and families was unbalanced due to the fact that administrators and professionals act as they are more knowledgeable than families. Consequently, families feel that they are surrounded by professionals that have the knowledge and competence, so they adapt their opinions to be consistent with the team, and they even fine-tune their needs to be aligned with the professionals' positions .Moreover, professionals control the decision-making process during the meetings, so even families have the right to take part in the process. They are not always

given the opportunity to participate meaningfully. The researcher stressed the importance of paying attention to family as the centre of the process in all stages of intervention instead of over-emphasis on the procedures.

An important work by Carroll and Sixsmith (2016) in Ireland aimed to explore the relationship between parents and ECI professionals and how the parents' roles and perspectives change in each stage. The study used a grounded theory methodology with a group of children with developmental disabilities, parents and ECI's professionals. The authors suggested five stages of relationships as follows:

- Initiating Stage: when the parents are getting to know about the programme and needed support.
- Experimenting Stage: the beginning of relationship development between parents and professionals.
- Integrating Stage: when parents feel that they are not alone, and they are supported, and their needs are understood by professionals.
- Intensifying Stage: when families started supporting each other and extended families supported other families.
- Transitioning Stage: this stage refers to ending the relationship when children transitioned to schools. Parents feel fear and anxiety after a strong bond developed with the ECI team. When families develop relationships with professionals, they feel happy with the system; then they found it difficult to move to another environment where they need to form new relations with a new team. Therefore, the authors suggested that professionals should plan for the transition by meeting with parents to help them get to know the new system. The authors explained that when professionals work jointly with families before the transition, the process becomes smooth. So, they suggested that:

    [p]rogressing through the developmental trajectory will allow for all participants to reach the Transitioning Stage feeling empowered, looking forward to the future and ready for another journey with a new team and onto the next phase of the child's life. (Carroll and Sixsmith 2016, p. 18).

One source of stress that parents feel in this stage is the transition from the ECI team to another team when their children reach six years old. This comes after parents have developed a strong emotional bond with the first team, which makes it difficult for them to shift to the other team.

Relations between parents and professionals grow over time as they share resources and ideas; they understand their needs and respond to them. This is in line with the idea of early intervention as an ongoing process in which parents should be prepared for the next stage, and being informed about major transition points gradually through a plan prepared in advance for this purpose (Carroll 2016). This will eventually help them to exercise their roles during each stage and be ready to respond with any changes in staff relationships throughout the transition process.

According to Rosenkoetter (2007), transitioning to schools is challenging for children with disabilities and their families due to unfamiliarity with the new educational settings. The researcher suggested four key points about transition that parents should take into account:

- Transition is not a single step; it is a continuous process extending for months for the child and his or her family.
- Transition follows a designed plan prepared in advance between senders and potential receivers. The plan includes following up with the child in the new setting.
- Effective transition plans include all stakeholders, whether they are people such as family members and professionals or entities such as the ECI, schools, and regulatory bodies.
- ECI is not just a place where children receive services. rather, it is a programme that includes different kinds of support that children and their families need, whether it is delivered at home, at school, or in any natural setting.

Providing information to families is an important factor that encourages them to participate actively in the transition and prepare their children for the next stage. Professionals follow different practices to deliver information to families. Foster (2013) study in Southwestern Pennsylvania suggested distinguishing these practices according to their intensity. She explained that "*High Intensity Transition Practices*" demand considerable engagement of all entities that serve children with SEND as they shift from one setting to another, as well as active participation from parents. This includes exchange visits between sending and receiving staff to organise and coordinate transition steps, parents' visits to potential transition schools, effective communication with families before the start of the academic year, initial phone calls, and even home visits by school educators with parents whose children are expected to move from ECI.

Meanwhile, the "*Low Intensity Transition Practices*" demand the least engagement of service providers and families, such as sending letters to parents, reviewing students' documents, and giving the opportunity to parents to visit schools but after the academic year starts. However, it is worth noting that parents play active roles in high-intensity practices more than low-intensity practices, which positively impacts the transition to regular schools.

Curle et al. (2017) investigated the organisational policies, procedures, and guidelines that facilitate or hinder the transition from ECI to schools for children who are deaf or hard of hearing. The researchers pointed out the importance of regular collaboration and frequent communication with parents during and after the transition. In spite of that, the researchers noted little evidence of collaboration between staff and parents, particularly teachers of regular schools. Meanwhile, ECI staff are relatively more involved in the transition.

The review of previous research in transition assert effective parents' roles to ensure the likelihood of successful transition; among these practices, Janus et al. (2008) and Gatling (2009) emphasised the importance of effective communication and collaboration with all stakeholders. Most important is the parents' roles in decision-making and what's best for their children. Therefore, the researchers recommend encouraging the practice of meeting the children and their parents before the transition to understand their needs and clarify parents' responsibilities. Other studies identified the preparation for children and families as one of the requirements of successful transition in particular, the initial meetings that start early prior to the process. Following-up these meetings is also recommended to ensure the implementation of tasks mentioned in the transition plan (Rosenkoetter 2007; Carroll 2016).

In terms of parents' role after the transition, Guralnick and Bruder (2016) and Carroll (2016) indicated that parents need to follow-up their children in the new settings, as children with SEND may need more time to adapt with the new environment. Therefore, parents play a significant role in supporting the stability and adaptation of their children. Hanson et al. (2000) also suggested that parents can play a role that goes beyond the participation of the process, which is monitoring the transition procedures to make sure that the ECI programme is following policies and regulations. This includes monitoring the process, evaluating children's progress at school, and suggesting any modifications needed.

Brown (2016) examined family-centred ECI and the transition to school services for children who are deaf and hard of hearing. The researcher pointed out the stress that parents experience as a result of programme or placement changes, which require them to develop new relationships with new receiving professionals. One of the elements of successful collaboration with families is understanding their needs, goals, concerns, and roles. On top of that is respecting their choices related to their children's communication options and their future education. The researcher also emphasised the parents' need for clear information by providing them comprehensive written materials and support during the transition process, which enabled them to make suitable decisions.

2.2.4.3 Parents' perspectives towards the transition

To understand parents' perspectives, one must learn about their satisfaction regarding the transition procedures, such as training, transition plans, education, and rehabilitation, that take place in both sending and receiving contexts. Thus, parents' satisfaction represents their contentment towards the final placement of their child, whether settled in an inclusive or a special education setting. The literature review indicates some factors related to parents' satisfaction as part of their perceptions of transition; one of them is the parents' perspectives (Burford 2005). For instance, Rous et al. (2007) argued that encouraging families to take part in the transition and helping children to adapt to new settings led to achieving transition outcomes. Meanwhile, Janus et al. (2008) took into account the educational stage the child is going through. They declared that families of children with special educational needs who are still in ECI are more satisfied with services than families of transitioned children to kindergartens, as the families reported to be less positive towards care procedures as a result of the low level of communication with them after the transition.

Ahtola et al. (2011) investigated the transition practices used by regular teachers with children during the first year of enrolment and how it affected their academic achievement. The researchers found that collaboration and communication between sending and receiving staff are highly helpful, particularly the written information shared between them as well as the accommodations on the new curriculum. Parents suggest that individual meetings with staff and gradual entry to school are also fruitful practices. However, the majority of parents of

transitioned children notified that they had not received sufficient information about the new school and even how their children were progressing.

Rosenkoetter et al. (2009) conducted a study in the USA to review child and family studies in early childhood transition with more focus on children with special needs and their families. The researchers reviewed related studies published between 1990 and 2006. The key findings regarding children in transition include:

- Social adjustment to the new educational setting after the transition is linked with high-quality child care.

- Ecological factors related to families are connected to child academic and social achievement after the transition.
- The importance of child-teacher relationships before and after the transition
- The collaboration between sending and receiving educational settings which result in positive outcomes for the transitioned children.

The researchers declared more results related to families as follows:
- Transition is a stressful stage for families, as it is a dynamic, not static process, so supporting families and building relationships with them can reduce their stress.
- Parents feel that they are efficient in the transition process when they engage more in school activities.
- Meeting families' needs in order to enable them to supporting their children towards transition.

A large body of previous studies found that transition from ECI to schools is stressful for parents; even transition from home-based ECI to centre-based preschool is stressful for parents and causes anxiety for some of them, as it is considered a shift in the service provider and place of service. Therefore, parents need maximum support to adapt to these changes (Lovett & Haring 2003; Rous, Meyers & Striklin 2007). Previous studies investigated parents' experiences through the journey of transitioning from different angles, while few of them were derived from eco theories that explained how the environment in which the child lives can affect the transition to the next educational stage.

In a recent study, Starr, Martini and Kuo (2016) focused on the understanding of the successful transition from ECI to kindergarten for children with autism spectrum disorder. Parents were

one of the interviewed categories to understand their perspectives toward the transition process. The authors used Bronfenbrenner's ecological systems theory as a conceptual framework to clarify interrelationships involved in the transition process. The results showed four major themes that emerged from the focus groups: relationship-building, communication, knowledge, and support. More importantly, authors found out that parents are facing challenges in all ecological systems levels, wherefore they pointed out the need for consistency in the transition process between all parties in the system and stages of the process and the importance of early preparation for it. This was also emphasised by Fontil and Petrakos (2015), who found that a number of challenges face parents of children with autism during the transition process, such as communication and trust-building relations with the staff and a lack of support after the transition to public schools in comparison with support before the transition.

Leadbitter et al. (2018) focused on the discussion among parents of children with ASD about the transition to school and the problems they face due to a lack of routine-based structure in the new educational setting. The authors also noted the challenges that parents experience with extended family members regarding the lack of understanding and acceptance for their children, which makes them avoid extended family activities and events.

Kyn et al. (2013) carried out a qualitative study in Norway to investigate differences in parents' experience of stress with an early intervention programme. The researchers advocated for the support programme given to the parents of children with developmental delay to reduce stress and concern regarding caring for their children. Interviewed parents reported that the emotional support, information, and advice offered to them during the intervention programme minimised stressful feelings and increased the parents' ability and competence to care for their children. They felt that they were better able to respond to their children's needs and more confident in performing their parental roles. Meanwhile, Spencer-Brown (2015) in the United States utilised a qualitative, methodological approach with semi-structured and open-ended interviews to examine the parents of children with special educational needs' perspectives during the transition process. The researcher used the biological system model to explain factors that affect children's development in early intervention and how strong relations between contextual systems can drive positive developmental potential. The majority of the twenty parents interviewed indicated the importance of communication and cooperation between families and educators. They perceived their engagement in the transition as adding value to the outcome of

the process as well as familiarising them with their children's rights. They insisted that educators should be aware of families' culture so as to offer better services. Moreover, parents considered children categorisation, being dismissed, and a lack of knowledge to be the main barriers facing the transition to kindergarten. However, the number of participants was small.

Similarly, Schischka, Rawlinson, and Hamilton (2012) from the University of Auckland undertook a qualitative study to identify the factors that contributed to children with a range of disabilities transitioning to public schools. The study used the ecological system's model framework for its connection between educational and home environments that might affect the child's development. The author used the purposive sampling of 17 children with different disabilities and utilised different types of interviews to explore stakeholders' views on the transition process from the early intervention stage to the school placement. Thematic analysis showed that parents expressed some concerns regarding their children's disabilities and the forms of communication used with them after the transition.

The indirect effects model was used by Siddiqua (2014) in Ontario to understand interactions among parents, staff, and peers, in addition to the effects of the interactions on the success of the transition of children with special needs to kindergarten. The researcher utilised a longitudinal mixed-method approach, including semi-structured interviews with parents and teachers, to investigate parents' satisfaction with and perceptions of services. The study found pre- and post-transition differences in parents' views. The quantitative results showed that parents reported more general information was provided to them before the transition, so they had more positive perceptions and satisfaction about service pre-transition than post-transition. Parents' educational level did not significantly affect their perceptions of transition. The qualitative findings indicated that parents had positive perceptions of their children's teachers in general. However, they had negative perceptions about the public schools' education system. In addition, parents of transitioned children expressed their concern regarding a lack of information about their children, as well as regarding a disorganised education system.

One interesting study by Pang (2010) used family-centred practices and family systems theory to investigate families' needs and concerns regarding their children with special needs in early intervention. The study was guided by the ecological theory conceptual framework, which helps with the better exploration of challenges that families and the staff working with them might face in order to build fruitful cooperation and develop high-quality transitions. The

researcher followed a case study method for a three-year-old child with autism who was transitioning from an ECI programme to a public school. After an in-depth exploration of surrounding educational and social environments, results proved that the deployment of the conceptual framework based on family-centred practices and environmental context surrounded the child, helped the staff to understand family priorities and push toward family engagement in transition. The study came up with key issues regarding family roles in transition; the most important one is to encourage the family to decide about intervention strategies they want to follow, the child's placement, and transition plan. So, every family member should be trained and included in the transition process.

Other researchers used other models that are different from that of the current study to understand the transition from ECI to a special education setting. For instance, Gatling (2009) implemented a qualitative multiple case study in the USA to investigate obstacles and factors that assist transition through the eyes of parents and service providers. The study used purposeful sampling to select cases that were subsequently interviewed. The researcher found that factors that may obstruct smooth transition are: parents' worries about services, the ambiguity when meetings with professionals and insufficient knowledge about the transition process. Meanwhile, factors that may support a smooth transition are parents' effective communication, participation and providing parents with sufficient knowledge that helps them in decision-making.

Another study in the USA by Kruse (2012) focused on families' experiences during the transition process in ECI programmes. The researcher used a qualitative approach with a critical ethnography methodology to navigate the voice of the parents of children with SEND in ECI. The researcher utilised convenience sampling to recruit parents that corresponded to the criteria of interviews, with three mothers who were interviewed to understand the context surrounding them. The results of the study indicated that parents experienced conflicts with the overall system during the transition that could be referred to imbalance of power between themselves and the system. They expressed their concern regarding the lack of placement options for their children, explained their roles to advocate for their child and keep them progressing, and demanded the need for external support.

To explore families' and service providers' experiences during the transition from ECI services to school education, Hanson et al. (2000) conducted a study using a qualitative cross-site

approach. The study focused on children's transition from the third year of age to the pre-school age to provide information about families' choices after the early intervention stage. To collect data, the researchers used observation, document analysis, and tailored, semi-structured interviews with a sample of 22 families as they entered, participated in, and exited the transition process. The key finding here was that parents lack specific knowledge about the transition process. They often expressed concern regarding the shift in service between the ECI and public schools, so they did not prefer to move from one system to another because they move from ''known'' to the ''unknown''. So they preferred to keep their children in the ECI. Scaling up, the parents declared that they were given limited choices or no choices at all in regards to the new educational settings, as the professionals mainly made the choice of transition. Moreover, parents explained that the transition of their children to the inclusion had been affected by the readiness of the child and type of special needs such as autism, which make inclusion not always an option for parents but for professionals.

In a similar vein, Podvey, Hinojosa, and Koenig (2011) conducted a qualitative study in New Jersey. The researchers used semi-structured interviews with six families over three months to focus on their changing roles after the transition. The results showed that families' role towards their children had been changed after the transition to schools from insider to outsider, as they become less engaged in the school stage than they were in the ECI stage. Accordingly, they do not have sufficient understanding of their role shifting.

Very few studies followed quantitative or mixed-method designs. In Canada, a comprehensive four-year research project was applied in three provinces by Villeneuve et al. (2013) to cater to the inclusive needs of young children with disabilities. One of the outcomes of the project was a study focused on parents' perspectives during the transition from early intervention to school. The researchers used quantitative research methods with three case studies chosen through purposive sampling. Findings reported that parents faced difficulties organising frequent meetings with teachers to exchange knowledge about the transition process. They experienced a lack of communication with the staff, and most of the time, they had to initiate follow-up procedures relating to the transition. They needed more information about their children's needs and more details about the new context.

Walker, Carrington and Nicholson's (2012) study aimed at investigating parents' and teachers' perceptions of the transition of their children after ECI in Queensland, Australia. The

researchers moved one step further in using both qualitative and quantitative data collection through phone calls, interviews, and questionnaires during a mainstream preparatory programme. The parents of 54 children were asked about the pros and cons of the programme, in which the children were allowed to attend two or three days in mainstream schools before full inclusion. However, the study was conducted before the transition process was completed, and all of the children were supposed to be included in public education. Results indicated that the majority of parents had concerns about the preparatory programme to inclusive settings, particularly in terms of support and supervision. They viewed schools as unprepared for children with SEND and resist to include them. On the other hand, parents were satisfied about the support provided to their children by teachers and the help they were receiving to gain skills and knowledge. They also felt that teachers respected their viewpoints.

The body of ECI transition studies that has been reviewed has shown that most of them were qualitative and followed the transition from ECI to public education, while none of them pursued children and families who transitioned to disability centres. Therefore, no comparisons investigated different parental perspectives according to their children's new placement after ECI. Moreover, most studies were restricted to reporting parents' views in only one setting, such as an ECI centre, kindergarten, or school. However, they did not include the perspectives of parents of children with SEND in different educational settings.

2.2.4.4 Family outcomes in ECI

Focusing on family roles and the importance of parents' perspectives towards ECI programmes as an essential indicator for evaluating these services, the researcher reviewed a set of studies related to how parents view the outcomes of early intervention. And whether these programmes do their job in serving families and parents in particular, and not just children with SEND. Having a child with a disability can influence the family's quality of life and lead to negative impacts due to pressure and emotional feelings, such as hopelessness and depression, while raising the child with special needs (Bailey et al. 2006). As a result, services provided to families are significant in helping them to get rid of these feelings and respond to their child's needs in a proper way.

Bailey, Raspa, and Fox (2011) stressed the importance of doing more research to identify family outcomes in ECI as a crucial component in child development. Therefore, learning about levels of family outcomes in various domains might help in determining ECI programme

effectiveness. Besides, knowing about these outcomes according to different types of disabilities and programme approaches might lead to the design of feasible family-services plans which consider the unique needs of both the child and the family.

Based on the significance of the ECI for children with SEND, the family plays a vital role in child developmental abilities, as the family can observe the child's daily skills in their natural context (Acar & Akamoğlu 2014). It is possible to identify a problem area, which is the fact that even though the family is a pivotal part of ECI services, unfortunately, the concentration of these services focus on the child; however, the family outcomes are less obvious (Bailey, Raspa and Fox, 2011).

The focus on family outcomes in early intervention remains under-research (Gavidia-Payne, Meddis & Mahar 2015); even the researchers consider it a fundamental element in the effectiveness of the provided services (Epley, Summers & Turnbull 2011).
Previously, Smith (1988) suggested that earlier intervention leads to effective benefit, in addition to the parents' involvement in the child programme, which reflected on the child and family outcomes. Furthermore, families benefit from ECI by learning new skills in dealing with their children and get family backing and other societal advantages (Raspa et al. 2010).

Raspa et al. (2010) conducted a study survey targeting (1.666) parents to measure the outcomes of early intervention using the Family Outcomes Survey (FOS). Descriptive statistics showed positive family outcomes in general; the families reported that they have achieved many of the family outcomes. Higher scores were rated on the access of health care services, the new skills that their children performed, their participation in meetings with the specialists, and realising their children's demands. While parents rated themselves less positive regarding their knowledge about the available services their children, the children's engagement in activities, and the time spent in ECI.

Another study by (Epley, Summers & Turnbull 2011) conducted the FOS, a cross-sectional survey of 77 parents of infants and toddlers with disabilities obtaining ECI services. Results revealed that FOS scores were between (2.8-7.0) with a mean of (5.5), which is above the cut-off point, while the family outcomes were not correlated with the child's type of disability or the duration of ECI services.

Furthermore, Noyes-Grosser et al. (2014) carried out a mixed-methods study approach about families' outcomes in early childhood services provided for children with autism, the quantitative part used a cross-sectional survey design with a purposeful sample of 84 family members whose children were receiving or had received services in the former three years, and 216 stakeholders, the participants were invited to respond to the questionnaire via email and paper materials. The results yield a positive impact on family interaction skills, understanding their children's status and their rights as well; meanwhile, parents are less likely to obtain skills that can be transferred to other extended family members. These results also supported recently by Gavidia-Payne, Meddis and Mahars' (2015) study, which investigated outcomes within both families and children in ECI in Australia. Participants were 29 families that responded to the FOS with children aged between 24 to 71 months. After descriptive and inferential analysis, the study proved the correlation between family and child outcomes, in addition to the parents' high scores on understanding their children conditions, helpfulness of the services, and knowledge of their children's rights, and the significance of the family participation through family-focus services on the outcomes. Moreover, the outcomes were obvious in families that have younger children with autism.

2.2.5 Literature Review Summary

The literature review shows the importance of the transition process in ECI as a major shift in a child's lifespan. This process involves several parties that play important roles; however, the parents' roles are more important as they spend more time with their children in various situations, particularly in natural environments.

As early intervention programmes target not only children but also their families as a whole to create long-term support for them and facilitate their inclusion with surrounding environments, and therefore, parents' perspectives towards transition are crucial as they experience all stages of the process. Meanwhile, parents are partners in the transition decision that determines their child's future destiny. To do so, the new educational environment should meet the family's expectations and ambitions concerning their child (McIntyre et al. 2007).

Interconnections between family and other educational contexts such as ECI centres, special-needs centres, kindergartens, and schools as ecosystems, might affect the transition to the next education level and the child's adaptation (Curle et al. 2017b). Based on that, parents represent

the closest microsystems to their children that interact with other microsystems to provide them with seamless transitions and better education.

After reviewing the research in transition for children with SEND, Rosenkoetter et al. (2009) suggested that more research is needed for young children with disabilities and their families to understand the flow of transition process throughout different educational settings and social contexts. The researchers emphasised the need for an in-depth understanding of parents' and children's experiences during and after transition through further investigation of the transition process.

Lee (2015) argued that the area of ECI for children with special needs requires more effort to investigate challenges and practice from the families' points of view. The researcher concluded that more research is needed to listen to the narration and stories from families' perspectives as they are the key stakeholders in the system. To understand this area from different angles, further in-depth research should consider various families' backgrounds related to multiple cultures, types of special needs, and social conditions. Similarly, Rous and Hallam (2012) highlighted that even if the research has been focused on early intervention transition, more research and practice are needed. Furthermore, following high-intensity transition procedures studied by Foster (2013), the author suggested more research in ECI transition practices for preschool children with SEND as they transition to school programmes.

Although some scholars have pursued questions similar to the current study, they did it differently. Kruse (2012) focused on parents' points of view regarding the ideal partnership between families and professionals and highlighted the effects of interconnections between ecosystems on children with SEND. Similarly, Siddiqua's (2014) study aimed to understand interactions among parents, staff, and peers and how it affects the success of the transition.

Janus et al. (2008) pursued the parents' experiences in this stage using the empirical approach. In the same line, Leadbitter et al. (2018) highlighted the discussion among parents about the transition to school and the problems they face. Furthermore, Gatling (2009), Petrakos (2015) and Starr, Martini and Kuo (2016) focused on understanding the facilitators and obstacles to transition without explaining the roles of parents or their perceptions. Meanwhile, Pang (2010), Schischka, Rawlinson, and Hamilton (2012) all used the concepts of ecosystems to follow home-school partnerships to conquer challenges families might face during transition. More

researchers used a qualitative approach, such as Schischka, Rawlinson and Hamilton (2012), to identify the factors that contributed to children with disabilities' transition to public schools, as well as Spencer-Brown (2015), who investigated parents' perspectives during the transition process.

It is worth noting that previous literature has focused on families of children who transitioned to inclusive education and their satisfaction (Burford 2005). However, there isn't enough information about the parents of children who transitioned to disability centres. In the UAE, laws and policies encourage moving toward inclusion (MSA 2006, MOE 2010, MOCD 2017). However, disability centres are still an available option to receive ECI children older than six years old (MOCD 2015). The current study tried to bridge the gap by investigating differences among parents' perspectives on ECI transition with regard to their children's educational status and other demographic variables.

What distinguishes the current study from previous ones is its use of a mixed-method approach. Most of the previous studies used a qualitative approach. Moreover, the current study included parents of children with different types of SEND. The study went even further by investigating parents of children who have already transitioned and those who are under the transition process. Even for parents of children who have already transitioned, the study considered their new educational settings, whether in regular education or POD centres.

To sum up, the present chapter concludes that little is known about the parents' roles and perspectives during the transition of their children with SEND from ECI to other educational settings, in general, and to special education centres, in particular. Furthermore, virtually no research in the Arab world has investigated the parents' roles in the transition process, differences among parents' perspectives, and early education and intervention policies to facilitate the transition from ECI. Therefore, the present study tried to address the gap by carrying out an empirical study in the UAE, which is considered a genuine contribution to the ECI and the transition process in the country.

CHAPTER THREE: METHODOLOGY

3.1 Introduction

This chapter justifies the methodology and research approach design used in this research study, including its data collection methods and a fair description of the research procedures, ethical considerations, and limitations. Mertens and McLaughlin (1995) believe that research in special education has been influenced by social and contextual components, including inclusion movements that have an obvious impact on research methodology at various phases of the research process.

In this study, a mixed-method research approach with exploratory sequential design has been used to justify the objective of the research study, which is to investigate parents' perspectives and roles as participants in the transition process from ECI to other educational contexts. Recently, the use of mixed-method approaches has been increased significantly and become popular in social science; it includes a combination of quantitative and qualitative research methods (Bergman, 2008).

The chapter is divided into main sections and subsections. After this introduction comes, a general description of the research study′s approach and design, then followed by an explanation to the site, participants' selection, and sampling. Data collection methods are described, as well as a detailed discussion regarding trustworthiness, validity, and reliability. Furthermore, the chapter also entails illustration on data analysis approaches used in qualitative and quantitative data and designated a section for ethical procedures that were considered throughout this research study. The last section in this chapter is specified for methodology challenges and study limitations.

3.2 Research Approach and Design

In this section, the researcher identified and discussed the rationale behind the research approach choice, the paradigm that guides the research study, the study design that is suitable for the study purposes, and the type of analysis that can be adopted corresponding with the research questions.

It is worth mentioning that historically, disability research has been developed through diverse approaches along with the evolution in disciplines that view this phenomenon from different medical, educational, and social angles (Odom et al. 2005). Different changes in cultural and social contexts and inclusion development have implications for the approaches to studying special education (Mertens & McLaughlin 1995). In this study, the mixed method research approach would be used, which combines qualitative and quantitative methods to improve the reliability and significance of the study (Teddlie & Tashakkori 2009).

The mixed method research approach is considered a new methodology, which has its roots in the 1950s (Fraenkel & Wallen 2009). It went through several developmental stages by professionals in different fields; then spread into diverse disciplines globally (Teddlie & Tashakkori, 2009). Bergman (2008) argued that mixed method approaches have become more common recently in the field of social sciences research and have been used widely by including a set of qualitative and quantitative compounds. It enables the researcher to get in-depth data using one method to investigate and complement the findings by using another method that, in the end, improves the research in comparison to a single method (Teddlie & Tashakkori, 2009). Moreover, more insight into the research problem is provided when both qualitative and quantitative data are compiled in the same study (Creswell & Plano 2007).

The rationale behind using a mixed-method qualitative and quantitative approach in this research is based on several things. First, it provides the opportunity to investigate parents' perspectives regarding the transition from early intervention (ECI) to other educational contexts through in-depth qualitative participant data that is used to expand and elaborate upon quantitative results. The data helps the researcher to establish hypotheses that can be tested to generalise results relevant to the UAE federal ECI programme (Creswell, 2014).

Secondly, qualitative and quantitative analyses clarify and elaborate upon the research results to obtain a deep understanding of the parents' perspectives (Johnson & Christensen, 2008). The

researcher can be influenced by the participants' interactions in qualitative research and prejudge their responses, which might affect the way in which findings are analysed, so the complementarity of numerical analysis decreases bias in qualitative analysis (Lincoln, Lynham & Guba 2011).

Thirdly, as each methodology has its own limitations when used alone, combining mixed methods will eliminate bias, ensure validity during data collection through various methods and increase the reliability of the results (Johnson & Christensen 2008). This can be approached by data triangulation, which "involves using different methods and/or types of data to study the same research question. If the results are in agreement, they help validate the finding of each" (Fraenkel & Wallen 2009, p. 559). So that will help when investigating the parents' perspectives using qualitative and quantitative methods to compare their answers in each method, which will lead to valid and more reliable results.

Fourthly, this mixed method helps policymakers to establish their decisions and plans in the educational field, depending on numerical data supported by interpretations that make the findings more comprehensive and clear. Mixed methods offer results analysis that can be easily understood when the results are interpreted thoroughly beyond the statistical significance testing.

Finally, the ECI programme in the federal government is considered a new programme, so the mixed methods will help in evaluating its role in the inclusion movement in the UAE through the parents' eyes, as they would have the chance to express their feelings and perceptions during interviews and surveys.

Each quantitative and qualitative method of research has different assumptions or thoughts related to the paradigm that guides the researcher's way of investigating the phenomena, depending on their views toward the nature of reality. The constructivist paradigm assumes that reality can be found between people and can be socially constructed, so the research can't be separated from the people who produce it. In addition, reality can be changed between one time and another, according to the perceptions of the different mentalities of the people who construct it. Therefore, there is no objective reality when the researcher is trying to understand the diversity of meanings formulated by society (Mertens 1998). Accordingly, the concept of

"[d]isability is a socially constructed phenomenon that means different things to different people" (Mertens & McLaughlin 2004, p. 99).

Constructivists believe that people tend to understand the world around them and establish knowledge based on their experiences, which are complex and vary from one to another. These views are meaningful for the researcher to construct the reality (Creswell 2014). As people experience the world and engage with the culture, they construct meaning based on their understanding of the context in which they live; thus, the constructivist researcher tends to understand the phenomena within the context of the participants' interpretations (Crotty, 1998). This would help the researcher construct the realities of ECI transition practices through understanding parents' beliefs and true views of the UAE context. In addition to document parents' own perspectives regarding referring their children from ECI to other educational settings.

On the other hand, the post-positivist paradigm believes that "the social world can be studied in the same way as the natural world" (Mertens 1998, p. 7). Consequently, the objective reality is found in the world around us, so knowledge can be developed based on accurate measurements of human behaviour (Creswell 2014). So the researcher should stay neutral to avoid any interference or bias by following specific procedures accurately (Mertens 1998). This might work when the researcher aims to investigate differences among parents' perceptions regarding the transition process.

A third position comes from the pragmatism paradigm, which is interested in what works to figure out the research problem and derive knowledge about it by using different approaches instead of emphasising a specific method (Tashakkori and Teddlie 2003). Creswell (2014) indicated that a pragmatist does not stick to one philosophy and one source of reality; however, the researcher is free to combine both quantitative and qualitative inquiries in the same research and to choose the data collection and analysis methods that can work to answer the inquiries. Therefore, the pragmatist researcher uses mixed-method research to offer the best understanding of a research problem. Moreover, pragmatists believe that the research takes place in many different contexts, in addition to the independence of the mind, which opens the way for the modern theoretical view to the social reality through multiple assumptions, worldviews, and methods.

In this research study, the researcher used the pragmatism philosophical paradigm to establish a baseline for the methodology choice and research design (Fraenkel & Wallen 2009; Creswell 2014). This paradigm has accepted scientific results as it combines philosophies and techniques that enable the researcher to draw in-depth, clear, and strong arguments (Hanson et al. 2005; Collins, Onwuegbuzie & Sutton 2006).

Researchers identified several types of mixed-method designs; one of them is the exploratory sequential design, which is adopted in this research study. This design conceptualises the study that collects qualitative data first, followed by quantitative data, which is indicated by Morse (1991) through the notation (QUAL $\rightarrow$ quan) to emphasise the dominance of qualitative data.

In the exploratory sequential design, the researcher starts with the qualitative stage to explore the phenomena by collecting qualitative data from a specific sample in order to use its findings for the next quantitative stage. The aim of this sequential design is to build a suitable instrument that can be conducted on a sample of parents and check whether the qualitative data can be generalised to the population in the quantitative stage (Creswell 2014). Through this design, the researcher can choose measures based on actual data collected from the field (Creswell 2012).
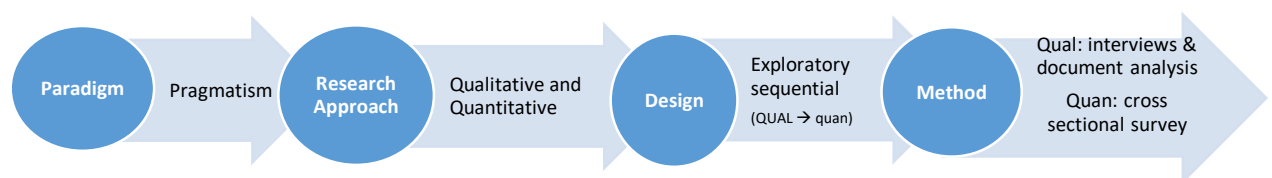
Figure 3: Approach Procedures

This design differs from the explanatory sequential approach, which starts with the quantitative phase to develop issues resulting from numerical data that serve the qualitative phase, in which more information will be obtained to follow up and perfect the quantitative results (Fraenkel & Wallen 2009).

The exploratory sequential approach is more appropriate for this study and harmonises with its purposes; for instance, one of the outcomes of this study is developing a measurement tool to collect depth data about parents' perspectives on ECI towards the transition process, a room about which there is limited knowledge (Kumar 2005).

Furthermore, it is important in this research study to give parents the opportunity to talk freely about their feelings towards transition and how they understand it as partners in the ECI programme, which requires in-depth collection and analysis of the data they provide. Therefore, the participants' views and opinions have been given priority to explore how they experience their roles during the transition of their children after ECI services because that determines the suitable method to be used in the study (Ivankova, Creswell & Stick 2006). Accordingly, the exploratory design meets the needs of deep data that can be reached in the qualitative phase.

Once the researcher needs to use the findings of the qualitative data in a sequential process to build the tool for the quantitative phase, it is crucial to explore parents' perspectives, as they understand it in their own language, by following up with a cross-sectional questionnaire that can be conducted on the sample. So the two databases were created at different times, one following the other (Creswell 2014).

In the special education field, the participants are unique and in low incidence conditions, so researchers deal with small or restricted samples. In response to that, a specific emphasis on qualitative data is needed to meet the uniqueness of the persons with disabilities and their families (Mertens & McLaughlin 2004). Moreover, this research study is conducted by a single researcher, who needs to collect data in two phases sequentially, so it is different from studies conducted by a team of researchers that can collect multiple data simultaneously as it is in the convergent design (Creswell 2014).

In the first phase of the study, the researcher applied the qualitative method, using interviews and document analysis, which is supported by Maxwell (2005), as it would strengthen the research data for its concentration on particular participants or situations, and paying more attention to written or verbal language than abstract numbers. The qualitative research provides a descriptive analysis through the implementation of different types of methods, such as interviews and document analysis (Ary et al. 2013), which leads to a deeper understanding of the transition process and the parents' roles in it.

In the second phase of the study, the researcher applied the quantitative method. In this phase, the researcher used a cross-sectional survey that was designed to investigate a large number of the parents' perspectives. Muijs (2011) and Creswell (2012) declared that it is the most popular in education and social science research, where the data is collected at one point in time. Thus,

it is appropriate for measuring how people perceive issues and their attitudes and opinions. Therefore, it is suitable to be implemented in this study to investigate the parents' perspectives regarding the transition process in ECI.

3.3 Site, Participant Selection and Sampling:

The research study was conducted in the ECI centres affiliated with the MOCD in the UAE. The ECI programme in the federal government started in 2008 in Ras Al Khaimah then spread to Fujairah and Ajman. In 2015, the DEIC was launched to provide early services for children from newborn to six years old who have confirmed disabilities, developmental delay, or are at risk for a developmental delay. The federal ECI programme was established in four Emirates (Dubai, Ajman, Ras Al Khaimah and Fujairah), serving children and families in these four Emirates. However, the programme is not implemented in the Emirates of Abu Dhabi and Sharjah, where the local governments operate their own early intervention programmes following different approaches to service provision.

The federal ECI programme serves children and their families from the early months until six years of age. Family services target parents of children up to three years of age; meanwhile, educational classes serve children from three to six years old. The transition process might start at any point between four and six years of age, during which children are prepared for the next educational level depending on their abilities and readiness for inclusion or based on the severity of intellectual disability for children who will be transitioned to POD centres.

The provision of services in the federal ECI programme does not stop after a child's transition. The follow-up process continues in the new educational setting to ensure the implementation of each transition plan, which supports children's adaptation in the new educational environment. At this stage, the early intervention team continues to coordinate with the new educational team, whether it is in an inclusive school or a POD centre, to facilitate any required accommodations, rehabilitation services, or additional support that could lead to success transition.

The sites' selection was based on being federal government rehabilitation centres following the EECI programme. These centres were located in Dubai, Ajman, Ras Al Khaimah, and Fujairah and mainly following centre-based services approach, supplemented by follow-up

field visits in natural environments to pursue the transitioned children to other educational settings.

The total number of children enrolled in these centres on transition-age (4–6) years old were (111) children, in addition to (120) children that were already transitioned to a disability centre, or inclusive settings in schools and kindergartens. The following table 7 illustrates the total study population distributed in terms of transition status (on transition, already transitioned) and transition setting (POD centre, inclusive setting):

Centre	On transition age	Already transitioned			Total number
		POD centre	Inclusion	Total	
Dubai ECI Centre	45	33	15	48	93
Ajman Rehabilitation Centre	12	8	7	15	27
Ras Al Khaimah Centre	40	19	28	47	87
Fujairah	14	10	0	10	24
Total	111	70	37	120	231

Table 7: Population of the Study Distributed in Terms of Centre and Transition Settings

Following an exploratory sequential design, the researcher selected a purposive sample in the qualitative part of the study; the participants are parents in which their children already transitioned from the federal ECI programme. Based on (Creswell 2012) explanation of the purposive sampling, researchers can intentionally select informative-rich participants or sites to understand and learn about particular phenomena. Therefore, the targeted purposive sample was selected from all four rehabilitation centres which provide ECI services under the federal government programme in Emirates of Dubai, Ajman, Ras Al Khaimah and Fujairah. These centres provide rehabilitation and educational services for children with different types of disabilities and developmental delays, and follow-up the transitioned children to other educational settings during the past years.

In terms of participants' sampling, the researcher employed maximal variation purposive sampling before starting the data collection. This sampling strategy helps to present multiple perspectives of participants, as they differ on some characteristic (Creswell 2012). Therefore, the researcher identified two groups of participants according to transitional settings, depending on whether it is a POD centre or an inclusive setting, and selected the purposive sampling from them (Table 7).

Eleven parents were selected purposively from the four centres in which all of their children have been transitioned from ECI during the past two years. Six of their children have been transitioned to disability centres and the other five to inclusive education. The largest participants' portion was selected from the Dubai and Ras Al Khaimah centres, as they include the largest number of enrolled children; however, there were no children transitioned from the Fujairah centre to inclusive education at the time of the study implementation. The following table 8 illustrates the purposive study sample in the qualitative phase:

Emirate	Type of SEND					Transition Place	
	Developmental Delay	Intellectual	Hearing	ASD	Multiple	POD centre	inclusion
Dubai	-	1	-	3	-	2	2
Ajman	1	0	0	0	1	1	1
Ras Al Khaimah	1	1	1	1	0	2	2
Fujairah	0	1	0	0	0	1	0
Total	2	3	1	4	1	6	5

Table 8: Purposive Sample of Participants for the Interviews

For the quantitative part of the exploratory sequential design study, all parents of ECI children aged four years and above were recruited, in addition to parents of the children who have been transitioned from ECI to inclusive schools or disability centres during the last couple of years, to ensure the representation of all parents who experienced various stages of transition. However, the participants' sample used in the qualitative part wasn't recruited in the

quantitative part as they already helped in the questionnaire development, and to avoid any confounding factors in the research (Creswell 2014).

Referring to Table 7, which represented the population of the study, (111) of children were on transition age; meanwhile (120) children were already transitioned. All of them were surveyed to ensure the collection of sufficient data related to the study purpose (Fraenkel & Wallen 2009). After reviewing the filled-out questionnaires received from the participants, it was found that (183) were valid for statistical analysis.

Accordingly, the sample size following Krejcie and Morgan (1970) and with a 95% confidence interval, the number of participants should be (86) parents of children on transition age, and (92) parents of children already transitioned. The following table 9 presents that the random sample used in the study exceeded the required numbers mentioned by Krejcie and Morgan (1970).

Transition status	On transition age	Already transitioned	Total
Minimum required numbers (Krejcie and Morgan 1970)	86	92	178
Collected numbers (Sample)	87	96	183

Table 9: Quantitative Sample of the Study Distributed in Terms of Centre and Transition Status

3.4 Data Collection Methods

The data collection instruments are consistent with the scope of the study and the questions to provide suitable answers. In the qualitative stage of the exploratory sequential design, in-depth semi-structured interviews were carried out in addition to document analysis. Meanwhile, in the quantitative phase, the researcher conducted a cross-sectional survey. Table 10 shows the alignment of the study questions, data collection methods, sampling, and analysis.

Questions	Qual/ Quan	Data collection methods	Site	Participants	Data analysis

RQ1: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?	Qual + Quan	Interviews + Survey	-DEIC -Ras Al Khaimah, Ajman and Fujairah Rehabilitation Centres	All the study population (231 parents)	Thematic analysis and SPSS analysis
RQ2: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?	Qual + Quan	Document analysis + Survey	-MOCD	Early education policies in the UAE	Document analysis and SPSS analysis
RQ3: How do parents of children with SEND perceive the transition process in early childhood intervention?	Qual + Quan	Interviews + Survey	-Dubai, Ajman, Ras Al Khaimah and Fujairah Centres.	All the study population (231 parents)	Thematic analysis and SPSS analysis
RQ4: Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?	Quan	Survey	-Dubai, Ajman, Ras Al Khaimah and Fujairah Centres.	All the study population (231 parents)	SPSS analysis

Table 10: Alignment of the Study Questions with the Methodology

In the following pages is a full explanation of each one of the data collection methods used in this research study, trustworthiness, as well as a discussion of the validity and reliability:

3.4.1 Semi-Structured Interviews

Interviews give participants the opportunity to express their opinions and perceptions of issues freely using their own words (Kvale 1996). It is a powerful tool in the educational field when used to gain an in-depth understanding of the engaged participants' experiences and insights regarding an issue (Seidman 2012), particularly when the researcher hasn't witnessed

the events and how they took place (Merriam 2009). For this purpose, the researcher used semi-structured interviews with open-ended questions for the parents to give them the opportunity to provide their perspectives on their roles in the ECI transition process and to elaborate on their feelings and experiences during the transition process. Interviews conducted through field visits to the rehabilitation centres over the first term of the academic year 2018/2019, during which the researcher interviewed the parents and collected the documentation (Appendix 1, 2).

The researcher provided the participants with an idea before recruiting them in the research and explained the research purposes for them. After that, the researcher assigned the appointments according to convenient times provided by the participants, while interviews took place on the centres' premises following the approximate time suggested by Glesne (2006), about one hour for each interview. The interviews have been conducted in Arabic, which is the participants' native language. Each interview was audio recorded by the researcher with the permission of the parents; the researcher also supplemented each interview by taking notes. After each interview, the researcher accurately transcribed the recording to create a written version before translating it into English.

3.4.2 Document Analysis

In the educational research, document analysis is distinguished by its ability to reveal conscious and unconscious perceptions, beliefs, and values that are held by individuals or groups. It gives the researcher the opportunity to dig through documents without affecting their contents (Fraenkel & Wallen 2009). Bowen (2009, p. 27) defined document analysis as "a systematic procedure for reviewing or evaluating documents," which mainly incorporated with other research methods to triangulate the collected data.

Since the research study focus is on analysis of the primary documents that were released as early education policies in the UAE, which direct provided services to children and their families in ECI stage, the first step of the document analysis process was to choose the suitable documents that directly serve the purpose of the study by examining these documents, their source, reasons for release, and in which context (Merriam 2009).

Accordingly, two types of documents were identified and analysed that include early education and intervention policies at the federal level of the UAE government, in addition to the policies at the local level of the Dubai government. The main two types of relevant documents included:

- The federal level: National Policy to Empower People of Determination, Minister resolution on the implementation of the early intervention programme, Quality Standards for Early Intervention Services, Minister resolution for integrating children with disabilities in nurseries, School for All General Rules, and Policy Framework for Inclusive Education – draft.

- The local level: Dubai Inclusive Education Policy Framework, and Health Inclusive Policy – draft.

Document analysis was guided by the research's second question about how early education policies and environments surrounding ECI children impact the transition process of children with SEND to inclusive settings or special education centres, in addition to understanding how these policies and environments empower parents to exercise their roles and responsibilities in ECI.

The second step of the document analysis was the qualitative content analysis which mainly followed the style of thematic analysis which comprises in-depth reading and re-reading the documents to generate codes then aggregate them to themes and sub-themes (e. g. inclusion, transition, and family engagement or family training) (Creswell 2008). More explanation is presented in the data analysis section. After themes identification, the researcher supplemented the document analysis with a quantitative approach that included counting the frequency of codes related to the emerged themes to provide a comprehensive overview of the number of times that sub-themes appear in the analysed texts.

3.4.3 Cross-Sectional Survey

The researcher developed a cross-sectional survey as a quantitative method to investigate the perspectives of a large number of parents of children with SEND in the ECI programme. The developed survey concluded a series of (27) close-ended questions, followed by five open questions at the end. The researcher considered the research questions while formulating the survey questions in order to remain consistent with them (Creswell 2013). Moreover, the questions were generated in relevance to the aim of the study, theoretical framework, and literature review. Researchers have suggested various variables related to the parents and their children with SEND in ECI and the importance of taking them into account when studying the transition process, such as parent's educational level, parent's gender, child's educational

status, and type of special needs (Leadbitter et al. 2018; Podvey, Hinojosa, & Koenig 2011; Siddiqua 2014; Connolly & Devaney 2018). Therefore, six demographic factors were taken into account in investigating parents' perspectives towards the transition from early intervention, including parent's gender, educational level of the parent, child's gender, child's educational status, type of SEND, and the place of services.

The researcher used the questionnaire as a collective data tool in the educational research for its multiple advantages. According to Hanson et al. (2005), questionnaires are a worthy tool to understand how an educational field is running in a specific setting and a period of time by taking a glimpse at the educational process. During the questionnaire design, implementation, and analysis, the researcher gives weight to every single question to shape the whole picture of the educational landscape (Cohen, Manion & Morrison 2007). Furthermore, it is helpful to get data from a large number of anonymous participants, which enhances the freedom of responses. In addition, questionnaires save time and money as participants can fill it in a short period of time with minimum effort. The collected data can be analysed easily by using a software programme to obtain quick results, which can be discussed by the researcher (Hanson et al. 2005)

Surveys have advantages in collecting quantitative data; they also have disadvantages, mainly in their ability to investigate opinions and perceptions that participants want to express. Additionally, the available options are limited and restrain participants' responses rather than giving them an opportunity to speak up verbally (Hanson et al. 2005). Moreover, capturing parents' perspectives of a multi-threaded issue as transition to educational environments after the early intervention stage through restricted choice response is a difficult job. It is worth noting that the researcher's understanding of the transition topic might differ from that of the parents as the researcher is immersed in the field for many years, which may make the parents comprehend the survey items in a manner different from the intended meaning.

To minimise the developed survey's disadvantages and maximise its advantages, the researcher added a set of five open-ended questions after the close-ended items to give the participants more space for the free and clear expression of their perspectives and to give comprehensive responses that might not be covered in the items (Rattray & Jones 2007). Besides, more precautions taken in consideration, such as anonymity of respondents and the choice to withdraw from the study, provide the opportunity for participants to inquire about any items

that are not understood and for these to be explained by the researcher himself, along with the possibility to contact the researcher for any further clarifications (Cohen, Manion & Morrison 2007).

The cross-sectional survey included twenty-seven close-ended questions arranged sequentially related to the topic, in addition to five open-ended questions (Appendix 3, 4). These questions were comprised of the research questions and the parents' perspectives understudy (Creswell, 2013). To measure the parents' distinguished responses that are consistent with the uniqueness of the early intervention programme and transition procedures in the UAE, the researcher developed the questionnaire to contain information about the aim of the study, response instructions, demographic information and questions.

The survey was formulated into three sections, which covered the themes that emerged from the qualitative study. The first section included demographic information of parents and their children enrolled in early intervention, and the parents' information involved gender and education. Meanwhile, the children's information covered gender, educational status, type of special needs and the Emirate in which they were enrolled to verify any significant differences in parents' perspectives according to these variables. The second middle-section of the survey represents close-ended questions, which were organised into four domains (parents' roles in transition stage, early childhood intervention policies, the transition journey, and environments around children). Furthermore, the third and last section contained five open-ended questions, considered as a complementary and more in-depth tool to provide the respondents further space for any other opinions, concerns or comments regarding the transition process.

The first domain of the close-ended questions represented the parents' perspectives toward their roles in early intervention that lead to a suitable transition for their children. Meanwhile, the second domain covers the parents' perspectives towards early intervention policies in the UAE and the extent to which these policies are supportive of their children's inclusion and empowerment. The third domain contains questions about parents' perspectives towards the children's journey from early intervention to other educational settings, whether it is an inclusive or a special education setting. Furthermore, the fourth domain focuses on the environments around early intervention children and their families, such as kindergartens, schools, extended families, and culture, to learn how these environments support children in their smooth transition to inclusive educational settings.

The multiple-choice questions used 5-point Likert scale answers according to the objective of the study, as the aim is to investigate the parents' perspectives. The participants were meant to respond on a scale from one to five, where a higher point means a more positive perspective towards the transition process in each domain. The domains are as follows:

−　Domain one: Point five means a high degree of effectiveness of parents' roles in the transition process; on the other hand, point one reflects a weakness of parents' roles.

−　Domain two: Point five means that early education policies are highly supportive of the transition stage, while point one reflects low support by policies.

−　Domain three: Point five means a smooth transition from early intervention, while point one implies difficulties in the transition journey.

−　Domain four: Point five means that environments around children support their transition in suitable educational settings; in contrast, point one reflects less support (see Table 11).

Section	Items	Dimensions	Response options				
			1	2	3	4	5
First	Questions 1-6	Parents' roles	Very weak	Weak	Uncertain	Effective	Extremely effective
Second	Questions 7-12	Policies in early childhood intervention	Not supportive at all	Not supportive	Uncertain	Support	Extremely support
Third	Questions 13-19	The transition journey	Very difficult	Difficult	Uncertain	Smooth	Very smooth

Fourth	Questions 20-27	Environments around the child	Not supportive at all	Not supportive	Uncertain	Support	Extremely support

Table 11: The Multiple Choice Survey Items Distributed on the four Main Domains

As the EECIP targets children and their families in the UAE community, where Arabic is the mother tongue language of the participants, the first draft of the developed questionnaire was in Arabic. At this stage, the researcher followed validity and reliability procedures to ensure the trustworthiness and accuracy of the Arabic version distributed to the participants (Appendix 3,4). Then, the questionnaire was translated into English and reviewed by two bilingual professionals in special education and research methodology to ensure that the items were given the closest meaning possible. One of the experts has expertise in early intervention and has worked extensively with parents and children with SEND. The other holds a PhD in special education from the USA and has a vigorous experience in educational research methodology and survey designing. The two most important things taken into account when translating the questionnaire were the compatibility of items' meanings in both Arabic and English versions and the clarity of the translation (Fraenkel & Wallen 2009).

The experts' minor modifications were taken into account to ensure the survey questions were in tune with English literature and the global terminology used in the early intervention and special needs field; based on the experts' feedback, amendments were made in the wording of terms and items. Furthermore, a back-translation was performed of the English questionnaire version in order to ensure that the meaning was not lost and validated the translation.

3.5 Trustworthiness, Validity, and Reliability

Methodological triangulation was obtained through multiple data collection methods of semi-structured interviews, cross-sectional surveys, and document analysis (Creswell & Miller 2000). In addition to peer debriefing, it gives other colleagues the opportunity to challenge the researcher methods, which supports the validity of the interview protocol. Moreover, member checking allows parents to review the interview accounts and give their feedback on it (Cohen, Manion & Morrison 2007).

It is worth noting that the researcher has been working in the UAE for fifteen years, so there are no cultural barriers with parents or anticipated assumptions toward them. In addition, all

instruments were developed and implemented in Arabic, which is the researcher's and the participants' native language; therefore, to increase trustworthiness, the researcher used forward and backward translations with the help of an independent bilingual professional translator.

3.5.1 The Trustworthiness of Open-Ended Interview Questions

In order to investigate the trustworthiness of the semi-structured interview questions, a panel of experts in early intervention and special education were asked to judge the validity of the instrument; including educational supervisors in early childhood, educators, formulation of the Arabic version of the open-ended questions because all the participants are Emirati, and they also reviewed the English translation. Three experts responded to the researcher and reviewed the questions; one of them is the director of Sharjah early intervention centre who has been working in early childhood intervention for 20 years, and the educational supervisor in DEIC, in addition to a professor in special education from the UAE University who also has a previous 27 years' experience in the teaching of special education courses.

Furthermore, piloting interviews were conducted with two parents for the specific purposes of ensuring that they understand the open-ended questions properly. The questions were modified in light of the study purpose, in a way that would help produce rich information in the area of the transition process in early childhood intervention. The supervisor of DEIC was contacted and asked if two parents of children who have been transitioned from the centre to different settings could be interviewed by the researcher for less than one hour. The supervisor chose two parents whose children have different types of special needs and have transitioned to inclusive and special education environments.

The pilot was carried out in DEIC with one parent of a child with intellectual disability, while the other parent preferred a phone interview as she was an employee and found it difficult to take a leave or receive the researcher at her workplace. The participant selection was based on the current educational settings that the child has transitioned to, as well as the special needs the child has. Therefore, one child has an intellectual disability and has been transitioned to a disability centre, while the other one has autism spectrum disorder and has been transitioned to an inclusive school.

The phone interview lasted for approximately ten minutes before the mother asked to be allowed to continue answering the questions on her own, after which she would type it herself and send the script to the researcher via e-mail. Meanwhile, the face to face interview lasted for approximately one hour. Both interviews were conducted in Arabic, as it is the participants' mother tongue; then, the interview protocol was edited after piloting.

After the educational experts' feedback and the two participants' trial interviews, two questions were reformulated to increase the convenience of the participants and adjust the sequence of the questions to meet the objectives of the study. One example includes *"How the social environment that the child lives in (parents, family, community...) affects his or her transition to public education or disability centres?"* was modified to *"Does the social environment in which the child lives (parents, family, community ...) support the child transition to public education or to disability centres? How?"*

The final sequence of the questions was structured to meet the sequence of the transition process, including the preparation, the deployment and the following up to encourage the participants to recall the series of events they experienced during the transition process and give their perceptions about it. The arrangement helps an easier flow for the participants and makes the interview closely connected with the study objectives. For example, the questions, *"How was the decision made to transition your child from early childhood intervention? Have you participated in this decision? If yes, how?"* were ordered after the questions, *"Did you understand your role as a parent towards your child in the early intervention phase to ensure a better transition to the next phase? If yes, what is it?"* because the transition decision to the next educational setting is supposed to be based on parents' understanding of their roles in the early intervention stage.

Moreover, other modifications to the questions were made to clarify words, correct grammar and spelling errors, and avoid overlapping. Additionally, some questions were edited in forms that prompted participants to talk, such as *"how would you describe your experience . . ."* instead of *"have you enjoyed your experience . . ."*

The pilot study gave the researcher the opportunity to obtain experience in interviewing parents, particularly when dealing with sensitive questions related to their feelings toward their child's educational settings. It also provided me a chance to learn how to produce follow-up questions

to urge the participants to give in-depth answers. For the face to face interview, the participant was given the option of being audio recorded, and she agreed to let the researcher record her voice. Notes were also taken as a supplement during the interview. Before the interviews started, both interviewees were provided a general idea about the study purpose and asked to sign the consent form that explained the study and assured anonymity.

It is important noting that there were no substantive changes made in the interview protocol after the pilot study, and the modifications made were limited to wording and sequencing, as well as the final number of the protocol questions stay 17 as in the blueprint version. Therefore, the two participants' interviews were considered as part of the study purposive sample.

3.5.2 Validity of the Developed Questionnaire

To assess the trustworthiness of the developed questionnaire as a data collection instrument, the instrument was assessed using multiple tests to ensure its validity. Tavakol and Dennick (2011) explained the importance of validity on the trustworthiness of a questionnaire, where it cannot be considered valid until it is reliable, it is the assessment to ensure that the instrument measures up what aims to measure it. Johnson and Christensen (2012, p. 245) refer to validity as "the correctness or truthfulness of the inferences that are made from the results of the study" while Fraenkel and Wallen (2009) insisted that it is the most important thing that should be considered when developing an instrument or choosing it for use than anything else.

In this current study, to validate the developed survey, multiple procedures were followed to assess and ensure its appropriateness for the research purposes, the research questions, and the participants. Therefore, content validity was carried out by experts to judge whether the items of the survey were adequately representing the area of interest, which is the parents' perspectives towards transition, in addition to a pilot study on a group of participants. Furthermore, the homogeneity test examined the internal structure of the survey and how its items measure the same construct of the trait (Johnson & Christensen 2014).

In the first stage of validation, a panel of experts in the field of special education and early intervention were invited to judge the content validity and context of the questions and its relation to the research questions (Simon 2011; Muijs 2011). Nine educational experts responded to the researcher; six of them were faculty members, and three were practitioners in early childhood intervention.

Based on experts' recommendations, a number of similar questions were omitted to make the questionnaire shorter and prevent the participants from feeling bored while responding. Moreover, one open-ended question was added, which was, "*What age do you think is appropriate for transitioning your child from early intervention to subsequent educational environment? Why?*" to give the parents a wider view of their perspectives on the subject matter and to get more recommendations to improve the transition process. More appropriate modifications were made on terminology and used language to ensure that the questions are appropriately comprehensible by parents before conducting the pilot study. For example, the question "*The teachers' support in inclusive environments (kindergartens or schools) when receiving a child referred from early intervention,*" was reformulated from the original question "*The role of school teachers in the reception of the child transitioning from early intervention and the support for their inclusion,*" *in order* to simplify it for the participant and to provide examples of inclusive environments. In addition, more examples of natural environments, such as school, kindergarten, and home, were provided with the questions. Finally, the number of survey items was reduced from thirty-four in the draft version to twenty-seven in the final version after experts recommended the omission of seven items.

The second stage of validity was the pilot study, as it was a valuable way to assess the clarity of the research's statement and questions (Glesne 2006) and to provide a precious insight into the methods of research used, which enhanced the research's likelihood of success. The pilot study can be considered as a feasibility study and represents a micro-copy of the entire study (Teijlingen & Hundley 2002).

The aim of the pilot study was to assess the appropriateness of the questionnaire developed for participants with regard to its visibility, validity, and reliability in obtaining confidence in the generated results (Williams et al. 2015). It is also important to refine the instrument wording to be clear and understandable (Rattray & Jones 2007). Therefore, the pilot study was conducted to ensure that the survey was able to collect the required data from the participants in line with the study objectives and to confirm the relevance of the questions.

Creswell (2012) suggested that a pilot study be conducted on a small number of participants where they respond to and judge the survey to provide their feedback about it; then, a researcher makes amendments based on the given feedback. Meanwhile, Muijs (2011) used the term face

validity for the procedure of asking participants whether the instrument seems valid to them because the participants assess whether the instrument looks feasible to them.

Accordingly, the questionnaire was piloted on a sample of 22 parents from all the federal early intervention facilities, using a homogeneous convenience sampling that covered parents of children with different types of disabilities and transition status. The targeted sample size was chosen by using 10% of the 220 participants in the quantitative phase of the study (Kotrlik & Higgins, 2001). Eleven participants in the qualitative phase of the study were excluded from the quantitative sample to avoid any confounding factors in the research (Creswell 2014). Similarly, the pilot group was also excluded because these participants had provided their opinions on the survey, which has been revised accordingly (Creswell 2012).

The first draft surveys were conducted manually among the four rehabilitation centres in the UAE; then, a careful review of the parents' feedback was implemented, with more changes in the questions' format made to make it understandable for them and a simpler terminology embedded to encourage response. Also, a number of questions were omitted, as they had similar meanings.

The researcher was keen to distribute the questionnaire himself to the participants and listen to their inquiries, particularly when it was found that some terms were difficult for them to understand. The researcher was ready to explain the items and respond to the inquiries. Then the questions were modified based on the participants' feedback, and the final draft was submitted to and approved by the director of studies (Appendix 3 & 4).

The other validity procedure was examining the internal structure of the survey through the homogeneity test to ensure that the items measure the same construct. Correlation scores were obtained on each item with the scores of its domain (Johnson & Christensen 2014). The results are as follows:

- The first domain coefficient alpha scores were between 0.713 and 0.890.
- The second domain coefficient alpha scores were between 0.707 and 0.812.
- The third domain coefficient alpha scores were between 0.703 and 0.827.
- The fourth domain coefficient alpha scores were between 0.726 and 0.870.

Appendix (5) shows that all the survey items were correlated with its domain, which provides evidence that the survey is internally consistent and measures the construct of the parents' perspectives. Johnson and Christensen (2014) suggested that coefficient alpha should be above 0.70 for all the items.

3.5.3 Reliability of the Developed Questionnaire

Reliability, on the other hand, is related to the ability of an instrument to obtain consistently the same results when a study is repeated using the same instrument under similar conditions (Johnson & Christensen 2014; Tavakol & Dennick 2011). The reliability in the research study was calculated using Cronbach's alpha coefficients test, which is one of the most robust tests used in surveys' evaluation when the researcher uses it in quantitative data collection to obtain reliability and accuracy for the developed survey. Moreover, the test used correlations within items to decide whether the items were measuring the same domain.

To test the internal consistency reliability, the reliability coefficient was calculated using SPSS software for the four main domains of the survey separately and then calculated the alpha coefficient for the whole test score (Tavakol and Dennick 2011). The rationale behind that is to detect how strongly each item is correlated with its domain and with the whole survey score in relation to other items in it. The reliability scores range between 0.00 and 1.00, so the internal consistency gets higher when it comes closer to 1.00, while correlation scores above 0.7 are usually required for research purposes to say that the instrument is internally consistent (Muijs 2011). Table 12 displays the correlation for each domain of the survey and for the total score test.

Domains	Items' number	Reliability Score
Parents' role in transition	6	0.895
ECI policies	6	0.898
Transition journey	7	0.905
Environments around children	8	0.947
Total Score	27	0.827

Table 12: Cronbach's Alpha Coefficient for each Dimension and for the Total Score Test

Table 12 represents the reliability coefficient values for each domain, which ranged from 0.850 to 0.899. Meanwhile, the same table illustrates that the calculated Cronbach's alpha reliability coefficient of the total survey items score was 0.827. According to Rattray and Jones (2007) and Muijs (2011), for good internal consistency, Cronbach's alpha test should score greater than 0.7 for a newly-developed survey and 0.8 for a previously established one. This supported the achieved Cronbach's alpha test score obtained from the developed survey, which exceeded 0.7, securing an acceptable level of internal consistency for the instrument. Therefore, the researcher decided that the instrument is good enough for quantitative data collection and can be used in the main study.

3.6 Data Analysis

Johnson and Onwuegbuzie (2004) suggested considerations in the parallel mixed analysis that ensure separated analysis for both qualitative and quantitative data without any integration in the results until the completion of both sets of the data analysis. In line with the exploratory sequential design, a separated database was created using Microsoft Excel software to analyse the qualitative data with vigorous attention to the analysis process in order to explore the generated themes and use it in the quantitative questionnaire (Creswell 2014), which is the most popular usage of qualitative data to provide fundamental grounds for the quantitative instruments that the researcher intends to develop in the next phase (Creswell 2012).

The heavily-collected qualitative information from the in-depth interviews was analysed using content analysis to recognise prevailing themes (Stake 2006; Glesne 2006). The analysis process was approached through following five main stages explained by Creswell (2008) that are commonly used in qualitative research analysis. However, this approach was also used for the field notes, text files, and five open-ended questions at the end of the conducted survey, in order to brief accomplished results.
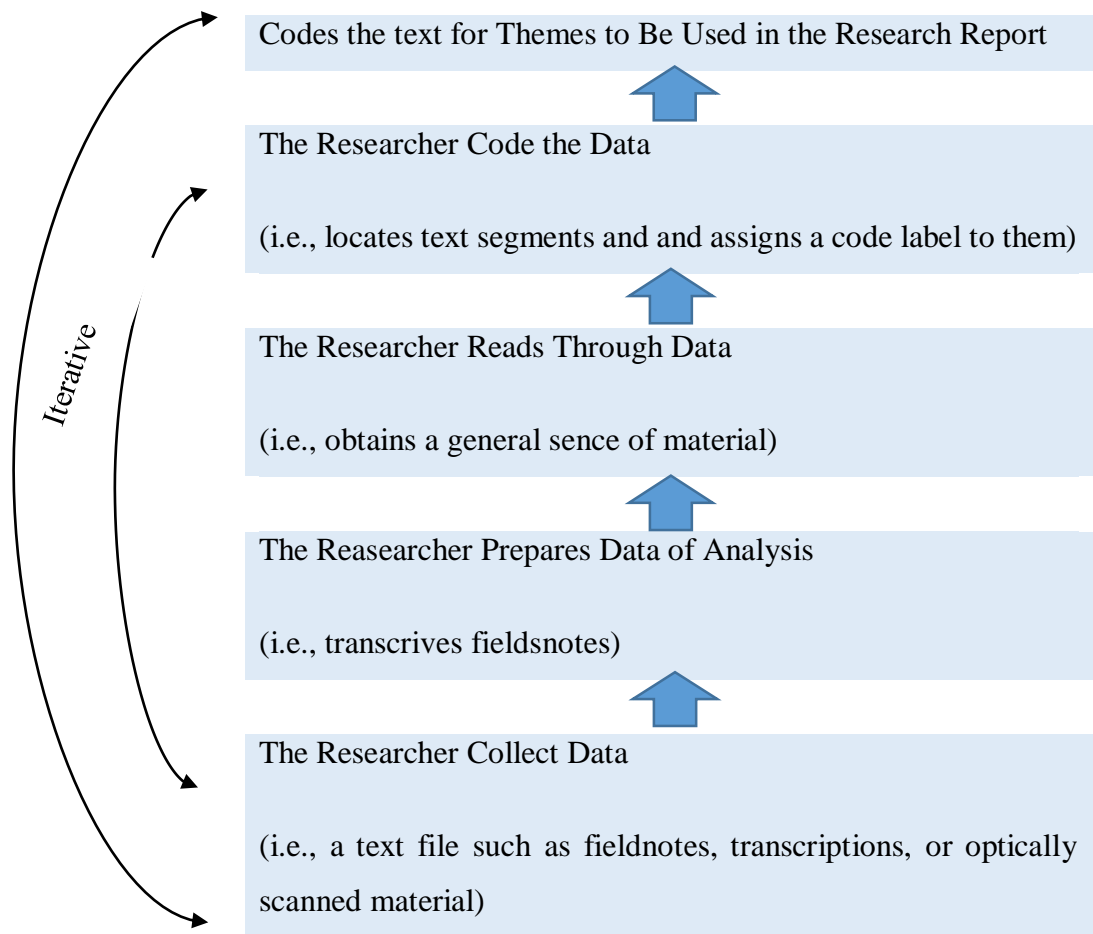
Figure 4: The Qualitative Process of Data Analysis
(Adapted from Creswell 2008, p.244)

The qualitative process of data analysis illustrated in the bottom-up approach in Figure (4) included the five main steps. This analysis mainly starts with a general data collection, then identifying text segments to generate codes, then aggregating codes to themes (Creswell 2008).

In order to provide more detail, the first step, which is the data collection stage, ensured all policies related to early childhood intervention in the UAE were collected, whether issued by the federal or local governments, as well as open-ended interviews, participant responses to the open-ended questions at the end of the survey, and supplemental notes taken during the interviews.

In the second step, which is known as data preparation, the large amount of data was organised into folders and files. All interview recordings were transcribed in Arabic to capture the details of the interviews, then translated into English. The collected policies and open-ended answers were treated in the same way as the majority of policies; because they were in Arabic, they were

translated into English carefully, with much attention given to the translation process to ensure the original meaning conveyed.

The goal of the third step was to get a general sense of the collected data; therefore, the researcher read and reread the interviews accounts, policies, and notes, as well as the answers to the open-ended questions, found in the quantitative stage of the study, that were collected through survey distribution.

The fourth step refers to data coding; text segments were identified by highlighting them and giving code labels that accurately described their meanings. The codes were examined for overlap redundancy.

Finally, the codes were clustered together into relevant themes that reflect major ideas of the research, to investigate parents' perspectives towards transition and policies related to early childhood intervention in the UAE. At this stage, huge amounts of data were summarised and presented in an understandable style. Visual diagrams were made to summarise the main themes found in parent interviews, notes, and content analysis, including parents' responses to the open-ended questions attached to the survey.

It is important to note that the previously explained steps were implemented as a simultaneous process; data collection and analysis occurred at the same time. That gave the researcher the time to read the data several times and perform a more in-depth analysis at the time of collecting new data from other participants (Creswell 2008).

On the other hand, the quantitative data were analysed using Statistical Packages for Social Science (SPSS 23.0) software to produce descriptive statistics including frequencies, percentages, means and standard deviations, and inferential analysis using independent T-test and analysis of variance (ANOVA) (Muijs 2011). Statistical analysis in the quantitative part started with refining data and generating descriptives for the rate of parents' perspectives towards the transition from ECI in the federal government of the UAE. Moreover, testing any statistical differences among parents' perspectives based on the six demographic variables, including the parent's gender, the parent's educational level, the child's gender, the child's educational status, the type of SEND, and the place of services.

3.7 Ethical Considerations

The researcher was careful about the following ethical procedures considered throughout the exploratory sequential design of the study to ensure the validity of the study and protect the participating parents:

- The researcher obtained a permission letter from the MOCD to conduct the study in the rehabilitation centres and access the sites to collect the data, after a letter was directed to the ministry from the BUiD that mentioned the purpose of the study and the required data (Appendix 6, 7).

- The researcher explained to the participants the purpose of the study to gain from them a voluntary and written consent to take part in the study prior to the field visits (Appendix 8).

- The appointments with the parents who agreed to be interviewed were scheduled according to their convenience.

- Before the data collection, the researcher prepared a formal introduction about himself and the study purposes.

- The researcher used pseudonyms for the participants and informed them that they could withdraw from the study at any time without any consequences.

- The participants were reassured that their involvement in the research would not affect the services provided to their children, and the collected data will be confidential and used only for research purposes.

- One of the study risks was that the survey was designed in English and then translated into Arabic, as the participants are native Arabic speakers, so the challenge was on whether the translation would match the original meaning. To mitigate this risk, the researcher offered more care and caution during the translation to avoid literal translation; to do this, the researcher formulated some items to make it equivalent and familiar to the local Emirati culture.

- To ensure that the parents understand the content of the questionnaire and will cooperate in filling it out, the researcher visited the centres and conducted it himself and answered the parents' inquiries.

- The researcher gave more time to those parents who did not visit the centres during the distribution of the questionnaire, and sent to them the questionnaires to their homes by the centres. Meanwhile, other parents were asked to fill it out during their routine visits to the centres. Moreover, to improve the response rate, the educational supervisors in the ECI centres called more parents to take part and fill out the questionnaire.

- The researcher was ready to answer any questions about the research posed by the participants or to provide more clarification regarding the instrument's questions. This is to ensure that the participants are fully aware of the research's aspects, and that their concerns are taken into account without any deception (Fraenkel & Wallen 2009).

- The researcher made every possible effort to avoid any personal bias that could arise during the research, developing from the fact that he works in the MOCD and is heavily involved in the field. So the researcher challenged himself to be away from any personal views that might affect the data collection process, the results analysis, and interpretation.

3.8 Methodology Challenges and Limitations

The current research study has a number of challenges and limitations that might affect its findings as follows:

First, the scope of the study included the federal ECI programme affiliated to the MOCD; therefore, generalising the results to all ECI programmes under the local governments in the UAE will be difficult.

Second, the study is limited by the conducted instruments and their validation. Therefore, the in-depth information that is provided by participants in the qualitative part of the exploratory sequential design study is unique to the participants from the four emirates and will not be generalised to other participants in the other emirates.

Furthermore, the quantitative phase of the study used a cross-sectional survey that measured parents' perspectives at a specific point in time. However, these perspectives about the transition process in ECI might change over time. Therefore, further instances are required to understand their points of view and beliefs over time.

Translation as Methodology Challenge

Since the context in which the study was conducted was part of the Arabic culture, where all participants were from the Emirates, and the Arabic language was their mother tongue, as well as the documents needed for analysis were in Arabic also, the researcher found that the translation from both Arabic and English languages was an important challenge during data collection and analysis. The used instruments in this study, including the semi-structured interview questions and survey items, were designed in Arabic and then translated into English. The interviews and supplemented field notes were implemented with participants in Arabic, and the Arabic survey version also was used for quantitative data collection, including the open-ended questions. Moreover, the vast majority of needed policy documents for content analysis were also in Arabic format. Therefore, the researcher understands the importance of giving the translation process great concern during data collection and analysis.

It is a challenging task when translating texts to another language and trying to find similar meanings. One of these challenges is the difference between the social context of the original texts and the audience of the translated language. The role of the translator here is to provide appropriate contextual effects in a way that helps readers to understand the texts without much effort and considers the cultural meanings embedded in the language (Ghanooni 2012).

Acknowledging that for this study, the researcher identified the participants of the study and explained the UAE context they are living in within the methodology. The researcher is sharing almost the same Arabic culture and has been living in the UAE for seventeen years, and working in the field of SEND with Emirates families during that time. Accordingly, great concern was also given to the translation from Arabic to English within the UAE culture that the researcher lives in, taking into account in-depth meaning that texts carry in certain conditions without ignoring the sociocultural context.

Another factor is avoiding literal translation following word-to-word style, as this might lead to dead translation or misunderstanding, which would be far away from the intended meaning.

Despite the fact that literal translation is the initial step for all translation, literal translation is a relative concept and difficult to achieve, and at the time, it was not the intention behind the text's interpretation (Lu & Fang 2012). Therefore, the researcher paid more attention to the implicit meanings when interpreting different quotes and expressions provided by parents in the local dialect during the interviews. Moreover, the researcher challenged himself during the translation task to avoid any influence on text interpretations or any possible bias while listening to the participants' perspectives, taking field notes or reading answers to open-ended questions.

Based on the explained translation challenges, the researcher implemented two exercises to secure the compatibility of his interpretations with the context. In the first task, the researcher took an original quote from one of the parents' answers during the semi-structured interviews. Then, he sent the original Arabic quote to a group of five people who shared almost the same experiences as the researcher. The members of the group were all male, their ages between 30 and 45 years old, all were bachelor's or master's degree holders, and all were either Jordanians or Palestinians living in the UAE for more than ten years and have been working with Emirati children with SEND and their families.

All the volunteers had worked or still work in people of determination rehabilitation centres; four of them have worked in the federal government, and one works in the private sector. The researcher asked all of them to translate one of the parents' statements during the interviews from Arabic to the English language to compare their translation with the researcher's translation of the same statement.

Following is a parent's exact statement as part of her response to one of the open-ended interview questions, which says: "How was the decision made to transition your child from early intervention? Have you contributed in this decision? If yes, how?"

"لقد رفضت المدرسة قبول ابني، لذلك توجهتُ إلى وزارة التربية والتعليم، لم يكن الرفض من قبل وزارة التربية ولكن كان من المدرسه، حيث قال المسؤولون في المدرسة أنه لا يوجد لدينا معلمات تربية خاصة، وأن المعلمات لا يعرفون التعامل مع مثل هذه الحالات"

Participant code: P11- Q6

The statement was extracted literally from the parent's interview transcript and reformed in simple Arabic to make it more appropriate for translation and free of any informal words. Then the researcher translated it within the context to make it more understandable to an English-speaking audience, as follows:

> *"The school didn't accept my son, so I went to the Ministry of Education; the rejection wasn't from the Ministry but from the school. The supervisors at the school said that they don't have special education teachers, and their teachers do not know how to deal with such cases".*

In the next step, the researcher reviewed the translations carried out by the five volunteers as follows:

Volunteer 1:

> *"My son is refused by the school, so I went to the ministry of education. It wasn't from the ministry of education but from the school, where the responsible persons on school said we don't have special education teachers, beside our teachers don't know how to deal with these cases."*

Volunteer 2:

> *"The school not accepted my son, so I went to the Ministry of Education, There I was informed that not accepting my son made by school and not Ministry of Education. School officials said that they do not have special education teachers and teachers do not know how to deal with such cases."*

Volunteer 3:

> *"The school rejected my son, so I went to ministry of education, the rejection was not from the ministry, but from the school, the Administration at the school said that they don't have special education teachers, and the school teachers don't know how to deal with these cases."*

Volunteer 4:

"The school rejected my son, for that I contacted MOE, the rejection was from the school not from the MOE. The school administrators said that we don't have special education teachers, and the teachers they don't know who to deal with such cases."

Volunteers 5*:*

"The school rejected my son, so I went to ministry of education, the rejection was not from the ministry, but from the school, the supervisors at the school said that they don't have special education teachers, and the school teachers don't know how to deal with such cases."

In reviewing the five different translations, it is worth noting that each one of the volunteers used his own understanding of the text to translate it without using words to give synonymous meaning. For example, three out of five volunteers used the word "rejected' to indicate that the child was not allowed for school enrolment; another volunteer used the word *"refused",* while yet another volunteer used the term *"not accepted"* to give equivalent meaning, which is used by the researcher. One more example is related to the Arabic expression "المسؤولون في المدرسة".

The volunteers also explained it in different words to give similar meaning related to their understanding of the term. They used the words *"responsible", "officials", "administrators",* and *"supervisors"* to refer to the persons who are in charge in the school and take the acceptance decision. Meanwhile, the researcher used the word *"supervisors",* which was used by one of the volunteers.

To sum up, while all five volunteers used different expressions and wordings to translate the original statement quoted from one of the mothers participating in the study interviews, all of their interpretations gave similar meaning, which is compatible with the researcher's explanation. Therefore, the quoted statement can be translated as follows:

"The school didn't accept the child with SEND, so I went to the Ministry of Education to complain. However, the rejection was not from the Ministry; it was from the school supervisors due to a lack of special education teachers who know how to treat these children."

To ensure that native English speakers are able to understand the researcher's and volunteers' translations and that they can comprehend the key points of the translated text, the researcher carried out a second task with five native English volunteers, all with different experiences. Three of them were from the UK and two of them from the U.S. They were provided with the interpretations obtained from the previous translation task in addition to the researcher's translation, and asked to write down their understanding of these texts, which produced the following results:

Native speaker 1 (UK):

> *"The school rejected the child because they did not have the resources to look after the kid. The Ministry of Education were happy to send the child to that school."*

Native speaker 2 (UK):

> *"The school did not accept my child, and so I went to the Ministry of Education to appeal this decision. The supervisors at the school explained that they don't have any special education teachers and, therefore, they would not know how to deal with such cases."*

Native speaker 3 (USA):

> *"This person's child was not accepted at a school, so the parent went to the Ministry of Education. They clarified that the rejection was from the school and not the Ministry and that the school said the child was rejected because the school doesn't have special education teachers. The teachers at the school do not know how to deal with children who have special education needs."*

Native speaker 4 (UK):

> *"This parent has a child who has additional educational needs for which the school cannot meet the requirements of the child; therefore, will not accept the child into the school. The parent believes that this is the issue of the school, not the ministry, but has brought it to the attention of the ministry."*

Native speaker 5 (USA):

"The child was not accepted to the school; the child requires special education classes/services. It was due to the lack of resources at the school itself and had nothing to do with the ministry. The school itself does not have special education teachers or resources."

It was obvious from the five native English speakers' feedback that they received the key message of the translated texts, in spite of them using different terms and wording. In more detail, the original text intends to clarify that one school refused to accept a child with SEND due to a lack of resources and specialised teachers, and the refusal came from the school and not from the Ministry. This understanding was in line with the volunteers' and the researcher's interpretations as well.

To summarise, the researcher's aim from the two exercises was to overcome the data translation challenge and to prove his capacity to interpret the data collected from the interviews, open-ended questions, and documents used in content analysis, in addition to the survey questions from Arabic to English. A considerable similarity was observed between the researcher's interpretation, the Arab volunteers' texts, and the native English speakers' understanding, which validates the researcher's translation.

CHAPTER FOUR: DATA ANALYSIS AND RESULTS

4.1 Introduction

Chapter three explained the research approach and the exploratory sequential design that is used in this study. Meanwhile, in this chapter, collected data were analysed and fully presented to answer the research questions. The purpose was to investigate parents' perspectives and roles in the transition process from early childhood intervention to other educational contexts in the UAE. The study followed a sequential mixed-method design and used semi-structured open-ended interviews and document analysis in the qualitative phase, followed by a cross-sectional survey in the quantitative phase. The obtained data in each phase were separately analysed and presented, then finally integrated in order to answer the following research questions:

- RQ1: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

- RQ2: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

- RQ3: How do parents of children with SEND perceive the transition process in early childhood intervention?

- RQ4: Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?

4.2 Qualitative Analysis

4.2.1 Analysis of the Parents' Interviews

This section illustrates the analysis of the semi-structured interviews data of the exploratory sequential design study. The interviews were carried out with eleven Emirati parents of children with SEND; all of these children have completed the transition process to other educational settings: six of the participants are mothers of children transitioned to POD centres and five to inclusive settings. Their children were from both genders and different types of special educational needs. Table 13 shows a brief profile of the participating parents in the interviews:

Participants	Child's Gender	Emirate	Type of SEND	Transition setting
Parent 1	Male	Ajman	Developmental delay	Inclusion
Parent 2	Male	Ajman	Multiple (Intellectual + Physical)	Disability Centre
Parent 3	Male	Dubai	Autism Spectrum Disorder	Inclusion
Parent 4	Female	Ras Al Khaimah	Hearing impairment	Inclusion
	Female		Hearing impairment	Inclusion
	Female		Hearing impairment	Inclusion
Parent 5	Male	Ras Al Khaimah	Intellectual - Down syndrome	Disability Centre
Parent 6	Female	Ras Al Khaimah	Developmental delay	Inclusion
Parent 7	Male	Fujairah	Intellectual - Down syndrome	Disability Centre
Parent 8	Female	Ras Al Khaimah	Autism Spectrum Disorder	Disability Centre
Parent 9	Male	Dubai	Autism Spectrum Disorder	Disability Centre
Parent 10	Male	Dubai	Intellectual - Down syndrome	Disability Centre
Parent 11	Male	Dubai	Autism Spectrum Disorder	Inclusion

Table 13: Profile of Participating Parents

The research question number (1) is: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

To answer this question, parents' interviews were analysed and concluded with four main themes of the central positions parents view themselves during the ECI transition process. These main themes are: "*No role, active role, ambiguous role, and roles should parents do*". Firstly, parents *"no role"* in the transition process showed that parents were not taking part in the transition decision and not offered enough information about the process, so they were passive under this theme. Secondly, *"active role"* theme revealed parents' participation in different activities and effective communication with team members to follow-up their children, so they can express their views toward the appropriate educational settings for their children after early intervention. Thirdly, the *"ambiguous"* theme showed that parents misunderstood their roles due to a lack of information about the transition process; therefore, they strive to play roles of their own, which they believe will support their children. Fourthly, the *"should do"* theme explored roles that parents didn't practice or sufficiently exercise during the transition stage, but that they should take part in to activate their roles. Finally, a summary of the section shows the parents' current roles during the transition stage, whether active, passive, or ambiguous, as well as roles that they consider important to exercise. These themes and sub-themes are presented in the following figure number (5). Furthermore, each theme presented was supported by participants' quotes from the transcribed interviews. Meanwhile, excerpts from the interviews' transcripts are in Appendix (9).

No role
- don't decide
- not allowed
- not informed

Active
- meetings
- follow up
- child support
- communication

Ambiguos
- misunderstanding
- offer rehabilitation
- needs more information
- find placement

Should do
- follow up
- care
- skills training
- provide more than required
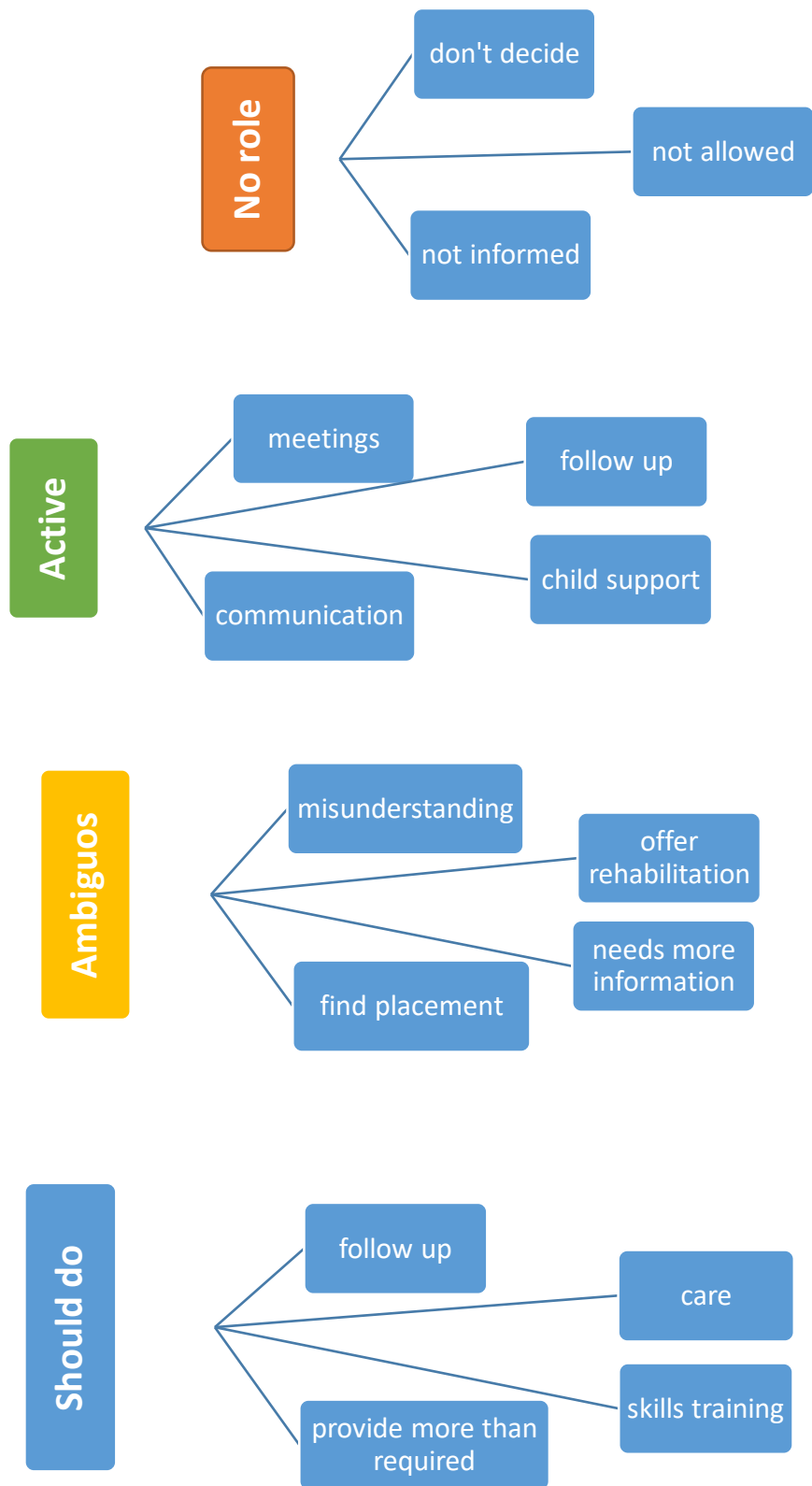
Figure 5: Themes and Sub-Themes Regarding Parents' Roles during the Transition Process

Themes	Frequency of codes
No Role	59
Active Role	140
Ambiguous Role	65
More roles parents should do	98

Table 14: Themes of Parents' Roles and the Frequency of Codes in Each Area

Table 14 shows that codes related to the parents' *"active role"* in the transition were repeated (140) times throughout segments of the interviews' transcripts. Meanwhile, sub-themes connected to *"no role"* and *"ambiguous role"* were found (124) times. Moreover, new roles were suggested by parents in the transition process; these roles are reflected by sub-themes branched under the last main theme, which repeated (98) times in the transcript.

Parents who were interviewed consider that they have no clear role in some areas of the transition; on the other hand, they feel that they have active roles in other parts of the transition. Meanwhile, their roles towards their children are still ambiguous and unclear for them in different stages of the transition process, so they suggest carrying more functional roles in the process that impact their children's education and support them to move smoothly to the next educational settings.

The following sections include the findings of four perspectives clarifying parents' roles in the transition process. It is worth mentioning that parents expressed more than one view at the same time. Therefore, some themes are infused under these sections to keep the flow of the parents' opinions organised.

4.2.1.1 Parents have No Roles

The first theme identified in the data regarding parents' roles was that parents have no meaningful role in the transition process, as they appeared as observers in the process without clear assigned roles to support their children. Figure (5) illustrates sub-themes that emerged from this main theme as follows:

- Parents don't decide, so the ECI programme took the transition decision on behalf of them.

- Parents were not allowed to join classes, sessions, or other activities directly related to their children's education.

- Parents were not informed about the transition stage and their expected roles in it.

The first perspective under this main theme is that parents felt that they did not decide about the next educational stage for their children, as the early intervention staff used to make such important decisions on behalf of them.

Parent-1, who has a child with developmental delay, expressed clearly that she didn't have any role in choosing the best educational setting for her child; she was not even a part of her child's evaluation meeting to decide the next stage for him. So she was happy because her child was lucky to get permission for inclusion:

> *"I asked the centre whether my child will be allowed for inclusion or should stay in the centre; they replied that the child must be evaluated first before deciding his next situation. Thank God, the evaluation shows that the child's status allows him for inclusion with other children. Accordingly, they sent his documents to the KG and informed us about the new educational setting. So they decided that he is appropriate for inclusion".*

Furthermore, Parent-4 and Parent-11 declared that the transition decision was taken by the early intervention centre, and they had no idea about it. When Parent-11 was asked whether she remembers how the decision was made, she replied: *"It was their decision"*.

It was also noticeable that the majority of parents believed that the early intervention centre and specialists are the ones who are best able to make the right decision about the children because they know their abilities and, therefore, what works for the children. So, they take the centre's decision for granted as they trusted ECI centres more than themselves. Parent-5 explained that:

> *"...the teacher said my son was fit to inclusion, so I agreed for inclusion as long as they knew his abilities more than me. I cannot say no for inclusion, then keep my child in the early intervention or move him to a disability centre. They informed me, and I agreed"*

Parent-10 also shared the same feeling towards her child's transition: *"The early intervention centre decided to transition my son to the disability centre, they knew my child's abilities'.* In

line with this view, Parent-9 declared that *"the transition decision carried by the centre based on the child's interests and the family had no objection"*.

At the same time, although Parent-5 agreed about the transition decision, she was not really sure about the new educational setting, and had preferred that her child stay longer in early intervention to receive more rehabilitation services:

> *"They told me about my son's transition to the new place. I would have preferred that my son stayed in the early intervention department, and I was hesitating about moving him to the new setting"*.

Going through parents' responses to their roles, they declared that they were not allowed to exercise specific roles in the transition stage, which related to their children's assessment regarding transition or observing their children in educational classes. For example, Parent-1 who has a child with developmental delay points out that although she was happy because her son had been transitioned to inclusion, she was unfortunately not allowed to attend the assessment session of her son regarding making a transition decision.

Parent-1 confirmed that: *"I did not attend the evaluation; they did not let me in"*. She added that even after her child was transitioned, she was not able to observe him in the new educational setting: *"I haven't attended any class with him so far"*. Noting that parents are key partners in any educational or therapeutic plans designed for their children; these plans are not implemented without their consent and they should work with their children at home within the assigned plans, so they are able to identify their strengths.

Parent-6, who has a daughter with developmental delay, expressed her dissatisfaction due to the neglect toward her role during the evaluation of her daughter. She responded clearly that, *"I was not with them during my daughter's interview and evaluation"*. So there were no specific roles they can play during the assessment process that precedes the transition decision.

Five of the interviewed parents affirmed that they weren't informed of their roles during the transition process. Three of them had children who have transitioned to inclusive settings, and the other two were transitioned to disability centres. They shared the view that no roles were tasked to them either before or after the transition. Parent-3, who has a child with autism, stated, *"Here in the early intervention, they did not tell me about my role"* even after her child was transitioned to inclusive school; she shared a similar view regarding her role. Parent-4 was a

mother of three daughters with hearing impairment; all of them were included in public schools. She stated that *"there is no certain roles assigned by the centre for me as a parent",* referring to the early intervention centre. For Parent-6, helping her daughter in daily homework did not reflect the role she should have played to ensure a successful transition to an inclusive environment. She declared: *"They did not ask me anything to do, just they gave me daily homework".*

Even for children who were transitioned to disability centres, mothers' impressions of their roles during the transition process were not different. According to Parent-5, there was a lack of information provided to parents about their roles in the transition process. She confirmed the following:

> *"The follow-up was carried out through WhatsApp, but more details are needed to define the role of the guardian in the transition process". She added: "no information provided to me".*

A similar point of view was expressed by mother-10, who has a child with Down syndrome, as she had no idea about transition mechanisms or educational options that her child could get benefit from; she also didn't have the knowledge about her role as a mother during the transition. She underlined that *"they didn't provide me with any written instructions about my role."*

4.2.1.2 Parents' Active Roles

Most of the parents interviewed declared that they had active roles in four areas of the transition process which supported their children. Sub-themes emerged from this main theme as follows:

- Parents were invited to attend meetings and discuss matters related to their children's education with the staff.
- Parents have an active role in following up their children at home based on the instructions they receive from the Early Intervention Programme.
- Parents support their children and encourage them to develop their abilities towards independence.
- Parents were keen to communicate with the team members in various ways to support their children's transition to appropriate educational settings.

The first parents' active role, as reported by the interviewees, was their participation in meetings aimed to discuss their children's progress. They shared the view that they had the opportunity to attend meetings to discuss the future of their children's education with specialists and share their views with early intervention professionals. Parent-1 explained, *"The centre usually invites us to attend parents' meetings that through which we discuss many things".* Parents also have the opportunity to meet with the staff informally and without appointments; they can visit the centre to observe their children's progress or to discuss any ideas related to their children's achievement, which was what happened with Parent-9.

Although parents considered their participation in meetings as evidence of their effective roles during the transition phase, some of them criticised these meetings as they were not individualised for each case. For example, Parent-7 believed that each child has different needs than their peers, so the parents' meetings should have discussed the issue of each child with their parents. She stressed: *"These meetings are collective and not for each individual case".*

The second active role played by parents was to follow up with their children at home to carry out assigned educational and transitional plans. The interviewed parents indicated that the early intervention programme dealt with them as partners in the educational process, as they were required to implement the objectives assigned to their children's transition plans, in addition to reporting any progress in their children's skills at home. One example was Parent- 4; she was happy with her active role in following up with her daughter at home to ensure that she memorised and understood what she had learned at the centre.

Parent-9 and Parent-7 were two other interviewees who also reported that parents were assigned weekly basis tasks within an organised plan and that the early intervention centre was following up on what was being done at home to ensure mutual roles between the parents and the centre. Parent-9 explained:

> *"There is also a weekly basis follow-up to inform us about any progress occurs with the child, and tasks they want to focus on during the week. The follow-up schedule was well organised".*

The third active role that parents believed they exercised effectively during transition was *"child support"*. This support is based on emotional feelings that parents wanted to showcase to their children as a cornerstone in transition to the next stage. It was not part of the

individualised plans, but it was personal parental empathy to give the child a push to overcome obstacles and achieve success. Parent-2 understood this role as follows:

> *"I understood my role in the early intervention stage. For example, to reinforce my child when he responds appropriately and follows his teacher advice"*.

Furthermore, Parent-3 insisted on being with the child through the transition process as part of emotional support. Meanwhile, Parent-4 explained the importance of her role in supporting her daughter with hearing impairment, helping her to accept her condition, and not being shy of using hearing aids in front of other students in the inclusive school. She stated: *"My role as a mother is to convert weaknesses to strengths and to help my child to have self-confidence through encouragement especially of using the hearing aids"*.

And lastly, the interviewees emphasised their role in establishing communication with team members and responding to any kind of communication channels with early intervention centres and other educational settings. It was concluded from the participants' different answers that parents were initiated to communicate with teachers, although teachers didn't start the communication, since parents considered reaching out to educators as part of their role. Parent-3 stated: *"Sometimes I call the school, yet they do not answer"*. Furthermore, the parent added, *"I communicate with the teacher on WhatsApp, but she does not communicate with me to assign specific things to my son, but she talks generally about all students in the class and does not take into account my son's special need"*. Likewise, Parent-6 agreed as she was comfortable using *WhatsApp* to contact her child's centre.

It is notable that parents used a variety of communication forms. In addition to centre visits and phone calls, parents depended on smart applications to share information with staff. Parent-2 said, *"I usually receive pictures of my child while he is performing skills especially from the physiotherapist that I loved her too much and my child as well"*.

4.2.1.3 Ambiguous Roles

The third theme that emerged was that the participants felt ambiguous during the transition process. Sub-themes emerged from this theme as follows:

- Parents did not understand the roles assigned to them towards their children to help them move to the next stage after an early intervention.

- Parents tried to perform additional roles such as offering outsource rehabilitation to their children away from the early intervention programme.
- Parents need more and clear information to play an active role in their children's transition.
- Parents feel that they have to move to find new educational placements for their children after the early intervention phase, even if this is mainly the role of the early intervention programme.

The majority of the interviewees affirmed that their roles in transition process were ambiguous to them, even if they played active roles in some areas in that stage to support their children. However, parents often were undertaking these roles without being identified or explained to by centres. Therefore, these roles mostly represented personal initiatives by parents than formal roles based on their own understanding of these roles, which varied from one parent to another.

Misunderstanding: To explain more, Parent-5, whose son transitioned to a disability centre, stated openly, *"I didn't understand my role during the early intervention stage as a parent"*, even if she did everything she could to support her son at home and at the centre. Parent-1, also shared the view that she *"was puzzled what to do"* with her son, who has a developmental delay, after being transitioned to an inclusive school since no one explained to her what to do with her son.

It is worth noting that parents misunderstood their roles before and after referring their children to the next educational settings, whether these settings were inclusive or special education. To elaborate more, Parent-11 reported that she didn't understand her role when the early intervention centre referred her child with autism to the evaluation team, she noted:

> *"They did not tell me what to do; they only referred me to the special education support centre for assessment whether he (my child) was suitable for inclusion or not. Their assessment was crucial that he should enrol into special education but not to a disability centre".*

Offer rehabilitation: One of the parents' blurry tasks that reflected the ambiguity of their roles in transition was playing the role of the rehabilitation seeker for their children, as they were unsure whether early intervention services were sufficient to empower their children to the next stage, or whether they should play a greater role to prepare their children for the next level. Therefore, parents search for other sources of support and rehabilitation, either with the

117

knowledge of the early intervention programme or without it. Consequently, the result is the offering of many rehabilitation services to the child in the same period of time and from multiple service providers.

For example, Parent-5 played the role of searching for a special education teacher to teach basic skills at home to her son with an intellectual disability. Another example is of Parent-7; when she was asked about her role towards her son with Down syndrome, she responded that *"I am currently bringing him to the disability centre, and also taking him to a private centre for physiotherapy because I want him to walk quickly"*. While Parent-9, who has a son with autism, managed to provide more speech and language sessions for him at a private centre at her expense.

Need more information: All interviewed parents agreed that they needed more detailed information about the transition process and their expected roles in it. Parent-5 explained, *"The follow-up was carried out through WhatsApp, but more details were needed to define the role of the guardian in the transition process"*; she didn't have written information about what to do with her child. Likewise, Parent-7 described the challenge she faced due to lack of information about her child's rehabilitation plan, clarifying, *"The child's treatment plan was not explained to us, not even the rehabilitation he has received or the future of the rehabilitation process"*.

Moreover, interviewed parents pointed out that although they were invited to attend discussion meetings about transition or awareness sessions on specific topics to support their children at this stage, these meetings were not customised to meet their different individual needs. Parent-7 confirmed, *"There were continuous meetings with the centre, and we were keen to attend lectures on particular subjects, but these meetings were collective and not for each individual case"*. Parent-8 also stressed the need for information, since the educational coordinator gave her a general idea regarding the transition process, along with other parents.

Generally, parents expressed their concern regarding available information, as it was mostly verbal, undocumented instructions, thereby reducing the value of this information and making it more likely to be forgotten. This was confirmed openly by Parent-9, who has a child with ASD. Thus, information channels were not clear for the parents and were not rich enough to

help them perform their roles clearly, as expressed by Parent-5 responding to the question about how the provided information had helped her support her child during the transition process.

Find placement: As a result of the unclear roles assigned to parents during the transition, parents initiated playing the role of *"placement finder"* to look for suitable educational settings for their children after the early intervention stage. The interviewed parents felt that there was not sufficient coordination between the ECIP and public education environments. Therefore, they had taken it upon themselves to bridge this gap and take over the role of coordination with concerned entities. An obvious example was Parent-3, who struggled hard to include her child in a public school. She explained:

> *"The MOE asked me to go to this kindergarten because it is the closest to our house, so I went there for the interview, and my son was very happy with it… I kept moving between the MOE and the kindergarten several times until they accepted him at last".* She added, *"I have suffered many difficulties, especially moving between the MOE and schools until one".*

Another impressive story was narrated by Parent-9 since she had tried twice to admit her son into two different schools, but unfortunately, she was rejected. So she went to the MOE to demand inclusion of her son, then the MOE sent a letter to the school forcing it to accept the child. Thus, the child was included in regular school as a result of her role in putting pressure on the school.

Some interviewed parents were reluctant to look for disability centres for their children, although finding a disability centre is very easy compared to finding a regular school to receive a child with SEND. Parent-7 realised that it is very difficult to find an inclusive school for her son with an intellectual disability, so she agreed to admit him to a disability centre.

4.2.1.4 More Roles Parents Should Do

A fourth theme to emerge from the interviews is related to further roles that participants should perform to support their children in the transition stage. Subthemes have emerged from this theme as follows:

- Parents should play more active roles in following up their children to secure a better educational environment.
- Parents should care more about their children so that they do not rely on someone else to take care of their children on their behalf.

- Parents should play additional training roles to build their children's capabilities, enable them to acquire skills needed, and not to stop the training provided in early intervention premises.
- Parents should take roles beyond the roles requested by the early intervention programme, and provide more than is required from them.

Follow up: Despite the fact that most parents shared mixed perspectives regarding their roles in transition, they all agreed that they should have played more roles beyond the roles that were assigned to them. It has been discussed previously that parents viewed themselves as having played effective roles with their children in certain areas, such as observing their progress at home. However, parents considered *"follow-up"* as one of the roles they should do more effectively than they did. Parent-6 believes that:

> *"The family should stay in touch with the school, through parent groups, for example, to express their opinions about their children, and to attend to the school continuously for follow-up".*

Parent-7 thought that parents should follow-up on their children in different settings—home, centre, and clinic—in order to ensure that they have the knowledge about a child's various aspects, not just his or her family life. She believes that "*The family should follow-up with the physician for any medical problems, and take care about the appointments".* She added that parents should *"follow up with the disability centre and his teacher even on monthly basis to ensure the progression in different aspects such as: dressing, eating, self-care and behaviour".* She stressed on the mother's role in following-up on her child, believing that, *"Usually the mother takes on the responsibility of following-up her child, and she is the primary key player in their development".*

Parent-8 expressed her concern towards parents' limited roles; she pointed out, *"What I have noticed here that the parents do not attend meetings, and mothers may not follow-up their children".* Thus, she expects parents to play such roles effectively in the future.

Care: Parents suggested another role to focus more on, which is the parents' care for their children, not handing this role over to anyone else, since they consider this role to be the responsibility of parents and not anyone else such as relatives or housemaids.

Parent-2 suggested:

"[I]t is better for any mother to follow-up her child, and not to leave this mission to anyone else even to relatives. Everyone is busy with his affairs, and no one knows more about the child like his mother".

Likewise, Parent-6 stressed that *"the family should not neglect the child with special needs in order to let them have a better future, and become productive".*

The interviewed parents stressed the need for mothers to be closer to their children in terms of providing daily self-care skills, and this role should not be eliminated when a housemaid is available. They indicated that the role of the mother is necessary for the child's development and secure transition to the next developmental and educational stage. Parent-8 commented in this regard as follows:

"Some mothers give the maid all powers in treating with people of determination, and this is a mistake because the mother must play a role towards the disabled person; meanwhile the maid's role should be limited to providing activities of daily living".

Taking care of children with SEND goes beyond responding to their biological needs but includes treating them like other children and taking every opportunity to encourage and support them. For example, Parent-2 declared,

"I don't like myself to deal with him as a miserable child. I usually tell his brother that: you both are the same, treat with him as an average person, there is no difference between the two of you".

In line with this view, Parent-8 suggested,

"Treat with the child with autism normally and without nervousness, so that their needs have taken into account, and try to forget the autism disorder while treating the child, but treat him like other persons".

Meanwhile, Parent-4 pointed out that parents should *"believe in their child abilities"* and reinforce their positive actions.

Skills training: The other role that parents felt must be focused on and exercised more effectively by parents is the *"skills training"* role. They suggested that their roles in transition should not stop at what was assigned in students' educational plans or instructions given by the specialists.

When Parent-2 was asked to explain her role towards her son during transition, she stated, *"For my son, I know what he wants, but for other students, they need more help. I hope their parents*

work to develop their abilities". Other parents stressed on the need of further parents' involvement in skills training, such as teaching them Quran as suggested by Parent-4 to expand their perception and linguistic concepts or teach them daily life skills as mentioned by Parent-5 and Parent-3, who have children with intellectual disabilities.

Parent-6 described roles she was doing at home and advised other parents to perform it as it helps the child in the transition stage; the mother was keen on doing her daughter's homework and helping her in memorising versus of Quran to boost her memory. She used to play with her to improve her skills and behaviours. Similar views were also shared by Parent-8, who believes that mothers should take a training role towards their children at home and other natural settings.

Provide more than required: Finally, parents view that they should play roles other than those required by the early intervention programme. They thought that although specific roles in individualised plans are important, their roles should be further of that. Parent-1 suggested that parents' role should go beyond just following homework or working on the assigned objectives.

Moreover, Parent-5 pointed out that parents *"should follow-up their children, and not to suffice with the tasks provided to them at the centre, because parents play a significant role in developing their children skills".* Referring to skills children learn at ECI centres, she stressed that parents *"can also provide their children more skills at home and train them to master it".*

Parent-9 responded in the same way; she stated, *"The role of parents should not be limited to follow up at home, but to participate and come to the centre regularly".* Furthermore, Parent-11 performed deeper roles when she established what she called a *"mini-centre"* for her child at home, and offered all that the child needs. She hoped that mothers would play an effective educational role at home to support their transition.

The research question number (3) is: How do parents of children with SEND perceive the transition process in early childhood intervention?

To answer this question, parents' interviews were analysed and concluded with three main themes of the central positions parents viewed the transition process. They experienced the transition from three different perspectives: Firstly, parents view the transition as a *"smooth"* process, so things were easy in terms of planning to transition and throughout implementation. Therefore, they looked at the transition from a positive perspective. Second, parents perceived

transition as a *"stressful"* experience for them when they faced challenges in moving their children to new environments, where the new team followed the new educational system that varied from the one implemented in the early intervention stage. This was in addition to the professional discrepancy in educating students with SEND among teachers in different educational facilities. Third, parents viewed transition as a *"blurring"* stage which needed more collaboration among stakeholders to achieve it, as well as the need for more information to make the transition pathway clearer and more obvious. Finally, a summary of this section explains parents' perspectives towards the transition from different angles and how perspectives swing from one stance to another.

The three main themes and sub-themes are presented in the following figure, number (6). Furthermore, each presented theme is supported by parents' quotes from the transcribed interviews; meanwhile, excerpts from the interviews are in Appendix (9).
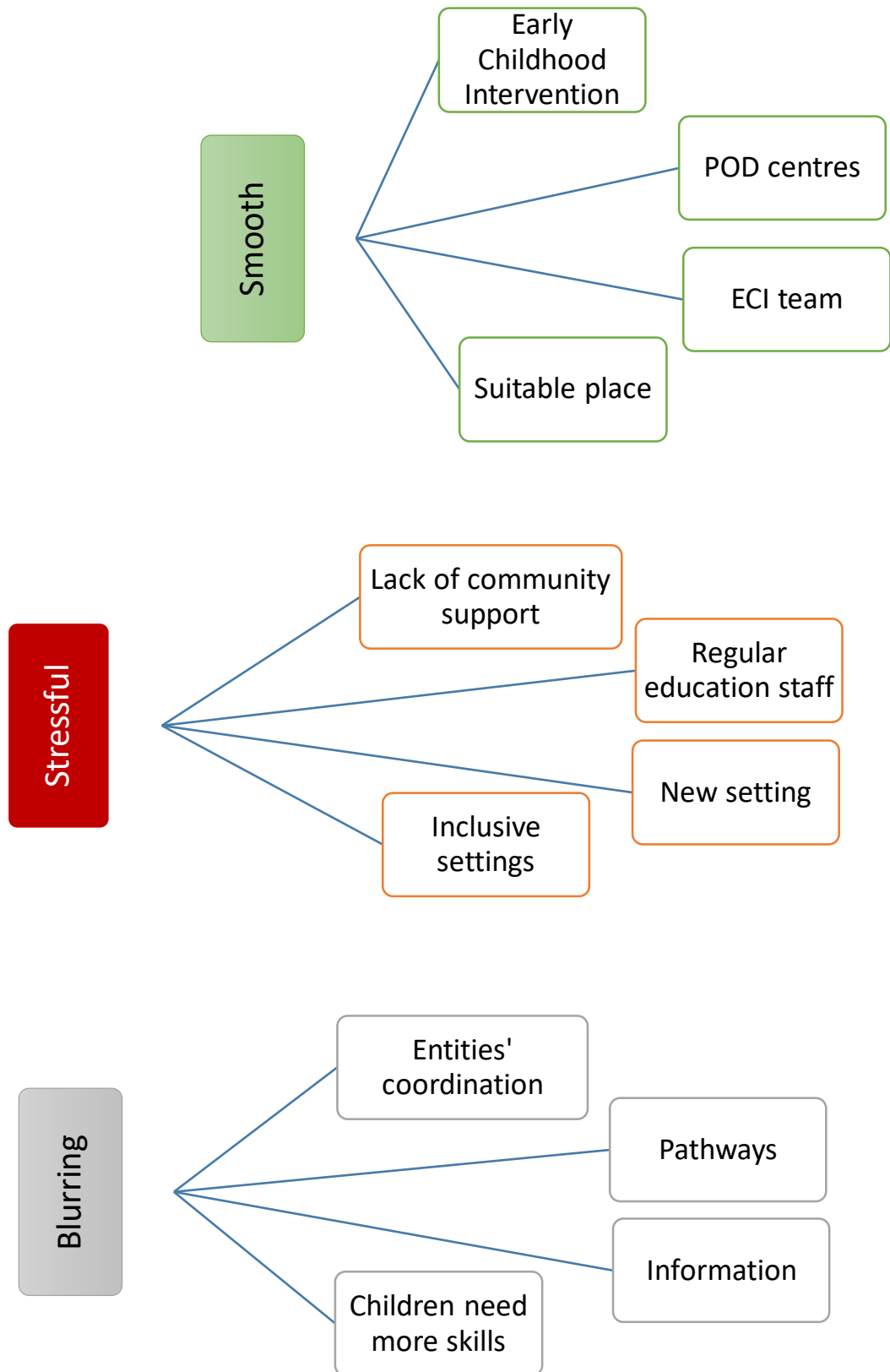
Figure 6: Themes and Sub-Themes Regarding Parents' Perspectives towards Transition

Themes	Frequency of codes
Smooth Transition	98
Stressful Transition	134
Blurring Transition	85

Table 15: Shows Themes of Parents' Perspectives and the Frequency of Codes in Each Area

Table 15 represents the frequency of codes related to each main theme regarding parents' perspectives towards transition, while codes that symbolise the *"stressful transition"* theme were the most frequent by (134) codes found throughout interview transcripts. Meanwhile, codes connected to the "*smooth transition"* theme were repeated (98) times. And lastly, codes that indicated parents' *"blurring"* perspectives were found (85) times in the interviews' transcripts.

It is worth mentioning that parents' perspectives oscillate back and forth through a full spectrum of feelings. They change according to the place to which the child is transitioned, whether to an inclusive setting or special education centre. Parents' perspectives also may change depending on the stage of transition and the types of challenges they face at each stage. Therefore, a parent might consider the transition to be a smooth process when their child is in early intervention, but describe it as stressful when their child is moved into the new educational environment. The following sections contain findings that represent the four main themes of parents' perspectives, as well as sub-themes that arose from them.

4.2.1.5 Smooth Transition

The first theme identified within parents' perspectives is that parents felt the transition process went smoothly for their children. Sub-themes that emerged from this main theme were as follows:

- The transition process proceeded smoothly at the stage at which children receive services at early intervention facilities.
- Parents perceive the transition as easy and clear when their children moved to a POD centre after early intervention.

- Parents believe that early intervention team is effective and continually communicate with them.
- Parents feel that the educational settings to which their children have been transitioned are suitable places for them.

Early childhood intervention: Most participants shared positive views towards the early childhood intervention stage as a part of the transition; they thought that the transition went smoothly during the services provided in early intervention. Therefore, it is obviously noted that when it comes to services provided by the ECI or its team, the interviewed parents expressed mostly positive perspectives.

Parent-6, Parent-3 and Parent-11, whose children were transitioned to inclusive settings, emphasised that there was a lot of care given to children and a high level of quality of services before the transition. Parent-3 added, *"Teaching methods in early intervention are different from the kindergarten"*. She further described the early intervention centre as *"the best place for him"*. Likewise, Parent-4 praised the innovative teaching methods used with her daughters at the early intervention stage; at the time, the nursery did not follow the same teaching style.

The level of collaboration with parents by early intervention departments was also an important point that parents pointed out. They said that it had shaped their perspectives towards transition. This was confirmed clearly by Parent-5, who stated that *"Early intervention was excellent in terms of collaboration with us as a family"*, as well as by Parent-6, who supported this point.

Parent-7 and Parent-8 also clarified how the early intervention was easy in terms of dealing with parents and supporting them. Parent-7 stated, *"There are no cons during the early intervention"*. Meanwhile, Parent-8 described the services in ECI before the transition, *"When I compare these services with the private centres, I feel delighted"*.

POD centres: The general consensus among parents who were interviewed was that the transition process went smoothly when their children transitioned to POD centres. They believed that their children developed better in POD centres than anywhere else, and that the staff members working in these centres were more cooperative and specialised. One example is the opinion of Parent-7. She expressed her perspectives on the transition to the POD centre when she was informed of the transition decision:

> *"I was happy when they informed me that my child will move to a disability centre, because I felt that a stage of his life had passed and a new one would begin with additional services and more improvements in his condition".*

Parent-2 declared that she was excited about the transition experience as she had observed worthwhile developments in her son's skills. Similar impressions were recorded by Parent-5 after her child with Down syndrome transitioned to a disability centre. She stated:

> *"My son has been developed a lot due to the early intervention, especially in the speech domain, which my family and people around us have noticed this progress, he became better than last year".*

Parent-7 described the transition by saying that it *"was easy and not difficult experience for me; there is no pressure either in daily follow-up tasks or other things".* Meanwhile, Parent-5 and Parent-9, whose children transitioned to POD centres, felt that the two educational settings before and after transition are similar. Their children did not feel much change in early intervention settings and disability centres because they follow similar educational systems; thus, they described the transition as a smooth and uncomplicated process. In the meantime, Parent-8 stressed the strong collaboration between these educational settings, which made the transition between them easier.

ECI team: Most parents indicated in their answers that ECI team supported a smooth transition for their children, particularly when these children were receiving services in early intervention departments. ECI team empowered parents with information that helped them in the transition stage, as confirmed by Parent-1*, "Professionals such as the speech pathologist, the special educator, and the ophthalmologist are providing us with knowledge about the special education cases"*. Meanwhile, Parent-6 pointed out that the ECI team tried to support the transition as much as they could by visiting her child, who is developmentally delayed, at the regular school premises.

Effective communication between parents and the ECI team also had an important impact on making the transition possible. Parent-2 stated, *"I usually receive pictures of my child while he is performing skills, especially from the physiotherapist who I adore and my child does, as well".* Similarly, Parent-7 praised the continuous communication by ECI team, especially in informing her about her son's progress on a regular basis. It had a clear impact on facilitating the transition of her son with Down syndrome to a disability centre.

Suitable place: When parents whose children were transitioned to disability centres were asked whether the educational places in which their children had been transitioned are the right settings for them, they said yes. For example, Parent-10 declared,

> *"I felt that the process was easy and planned by the centre, because they graduated with my son and did not move at once. This helped my son to adapt easily to the new educational place. My son has accepted the new centre".*

She further added, *"It is the best environment for a child with disability".* However, Parent-8 was convinced that it is the right place for her daughter with autism only for the short term. She noted, *"Later on, I wish to enrol her into a regular school".*

Although parents whose children were transitioned to inclusion faced many challenges, some of them portrayed a somewhat positive picture regarding the inclusive settings that their children have been transitioned into. For them, they still believe that inclusive schools are suitable places for their children with SEND, even though they experienced stressful situations in them. To clarify more, a mother of three sisters with hearing impairment described the transition as smooth, and she felt happy with the place her daughters transitioned to. Moreover, Parent-1, who has a child with developmental delay who transitioned to kindergarten, responded by saying,

> *"The kindergarten is suitable for him regarding education and age so that he would not miss any learning opportunity. The more he grows, the more he understands, and even his thinking and abilities improve over time".*

At the same time, she further added, *"I hope that the kindergarten would enhance his capabilities to the best".*

4.2.1.6 Stressful Transition

The majority of parents viewed the transition from early intervention as a stressful stage due to a lack of support from the environment that surrounded them. They found themselves alone facing challenges that hindered the inclusion of their children into appropriate educational environments after early intervention. Sub-themes emerged from this main theme as follows:

- Parents believed that the community did not adequately support their children, which made the transition process stressful.
- Teachers and other staff in regular education settings did not welcome children with SEND or have the knowledge to teach them.

- Parents became depressed when they were informed about the next educational setting for their children.
- The process of transitioning children to inclusive environments suffered from huge obstacles.

Lack of community support: Most parents agreed that the challenges faced during the transition made it a stressful experience for them. They perceived community attitudes as the fundamental obstacle to transitioning their children with SEND to an inclusive education. Some parents had chosen not to declare to the community that their child had special needs; as a result, they hid their children from others, preferring to avoid social engagement. This happened with Parent-1. She disclosed, *"I prefer, sometimes, to isolate my son from the public because people do not accept him"*. To elaborate on Parent-1's point of view, she told the researcher about psychological pressures that she is facing as the mother of a disabled child, and the burden she has shouldered alone. Meanwhile, others do not understand these pressures, particularly the father, who doesn't share this role with his wife. On the contrary, others used to give her the impression that they felt her child was deficient.

Similarly, Parent-2 believes that, *"The community looks at these children as poor people (Masakeen), and in need of empathy"*. Thus, Parent-3 considers these negative attitudes as a barrier to her child's transition to public schools. In line with that, Parent-5 appealed to raise awareness in the community in order to accept the education of children with SEND with their peers, and stop stigmatising them. For that, she did not reveal to people around her that her son was in an ECI facility to avoid negative attitudes towards him. She declared,

> *"No one knows he was in the early intervention centre, I told the people around us that our son is in kindergarten, due to negative societal perceptions towards persons with disabilities"*.

Meanwhile, Parent-6 and Parent-8 were advised by their extended families and friends to send their children to disability centres and not to regular schools. Similarly, Parent-9 stated, *"I heard a second opinions from the community, that the child with SEND should not be included in public schools, because he would distract other students in the classroom"*. She concluded, *"As a society, there is reluctance for inclusion"*.

When Parent-11 was asked about how social environment in which her child lived affected the transition, she responded, *"At the time my son was included into regular school, the community*

didn't support the inclusion, and even we didn't tell anyone that our child had autism". When she was asked about the reason, she explained,

> *"Because of the empathy attitude towards him that he had something wrong—even if his abilities were improving, the negative attitudes existed. Only my family knows about his condition, but in general, no one knows".*

For further exploration, Parent-1 and Parent-2 consider extended families as a source of pressure on parents, as they do not understand children with SEND, and do not support the transition to inclusive education as well.

Regular education staff: The interviewees also emphasised that teachers and staff working in regular schools are not supportive of inclusion. They are not adequately qualified to receive students with SEND at their schools. Parents, therefore, shared the view that teachers in regular schools made the transition difficult.

For instance, Parent-2, as quoted below, believes that her son with multiple disabilities is able to learn in an inclusive setting; however, she was not sure that teachers would provide her child the necessary attention. She, therefore, agreed to enrol him in a disability centre:

> *"The best educational setting for my son is the kindergarten, but teachers in general education don't have the experience in teaching students with SEND. So, it would not be significant for them whether my child learns or not, due to their attitudes toward him as a person who is unable to learn. A regular teacher would not have enough time to sit with him individually since she has a large number of students in the class".*

Similarly, Parent-9 shared the view that public teachers are not qualified to teach students with special needs. Meanwhile, Parent-3 considers regular schools' staff to be an obstacle to inclusion. She explained their response when she tried to include her son with autism at a kindergarten:

> *"They said that it is difficult and not possible to include this boy with 28 children in the same class: we do not have a special education teacher, take your son to another place, a special school would be better for him. As a result of that, I had cried, and I did not know what the solution was".*

She further explained, *"They had refused completely to accept my son in the kindergarten; therefore, I hated the kindergarten that my son joined because the teachers are not good".*

New setting: The interviewed parents felt annoyed when they were informed that their children would be transitioned to new settings. Some of them preferred to keep their children in early intervention for a longer time, while others disclosed openly that neither they nor their children had been prepared adequately for transition. Parents felt that their children were safe as long as they were in early intervention; however, other settings were unfamiliar to them, which made the transition process stressful.

Parent-5 shared her perspective when she was told that her son would move to a new educational setting. She stated:

> *"When I came to the centre, they told me about my son's transition to the new place. I would have preferred that my son stays in the early intervention department and I hesitated about moving him to the new setting. I was concerned about the quality of services in the new educational setting in comparison with the early intervention".*

Parent-2 and Parent-3 also felt confused by the new transition place, as their children were not prepared for it. Furthermore, Parent-10 had mixed feelings of fear and anxiety when she was informed that her child would be transitioned from early intervention. These feelings were due to a lack of knowledge and mistrust in the new educational settings, particularly the regular schools.

Inclusive settings: The 11 interviewees shared the view that the transition to inclusive education is a stressful point for them. Thus, from parents' perspectives, regular education facilities are not ready to accommodate students with disabilities, in terms of its staff's attitudes, non-adapted curriculum, or the educational atmosphere, in general.

Parents who had not included their children in regular education were afraid of inclusion. They believe that these educational environments are not accommodating. For instance, Parent-10 preferred to send her child with Down syndrome to a POD centre, believing that regular schools would not support him. Furthermore, Parent-5 refused to enrol her child in a private school because of its reputation as a profit school, and she was afraid that it would be unfair for her child to spend his time without a real advantage. Moreover, Parent-9 was concerned that her son with autism would not pass the private school evaluation test for inclusion.

In line with this view, parents who had already included their children in regular education facilities faced fundamental challenges. For instance, Parent-1 declared, *"The kindergarten had*

accepted my child only with an assistant, and that was at our expense. She is not qualified for teaching him". Adding to that, the teacher explained, *"the curriculum is too intense so he cannot catch up".*

Parent-3 expressed clearly that she was frustrated by her experience in inclusion; she stated, *"I advise parents not to integrate their children in public education, but to keep them in early intervention unless they are sure they can integrate".* She blamed the kindergarten staff, saying:

> *"They don't care of my son in the kindergarten. For example, the teacher doesn't pay attention whether he eat his meal or not. She takes care of the rest of the children but not my son. The only one who helps my son is his shadow teacher but not the class teacher. They care only about non-disabled children".*

In addition to Parent-1's and Parent-3's experiences, Parent-11 described the transition journey as a stressful stage full of pressure and worry. She stated:

> *"I went to a school at that time, and just because they knew that my child has autism, they refused to receive him. I went to about ten private schools, and I asked them to evaluate my child first before judging his abilities. . .but they refused to see him just because he has autism".*

4.2.1.7 Blurring Transition

The third theme in parents' perspectives is the blurring feeling during the transition stage. Some parents considered that the transition process was not sufficiently clear for them to prepare their children for the next educational settings. The subthemes that emerged from this theme were as follows:

- There is no clear coordination or collaboration between related entities to transition children to inclusive settings.
- Parents felt that transition pathways and available options for their children after early intervention are not clear.
- Parents needed more information about the transition process and the educational future of their children.
- Parents declared that the transitioned children should have mastered more skills during the early intervention stage before they were referred to the new settings.

Entities' coordination: Most parents indicated in their answers that there was not enough collaboration between the EECIP and POD centres that were affiliated with the MOCD.

However, when it comes to regular facilities affiliated with the MOE, parents shared the view that coordination became even weaker. Therefore, parents consider transition as blurring the pathway for their children in terms of lack of collaboration between ECI on the one hand and regular schools on the other.

Exploring this impression more deeply, Parent-3 pointed out that, *"Each entity operates alone; there isn't enough communication between these environments".* She further elaborated that communication also is poor in departments within the same entity. She stated:

> *"There is poor communication between the MOE, inclusion section, and the schools. When I went to them, I discovered that they knew nothing, they don't seem to meet with each other, that's how I felt. Everyone thinks separately and in a different way; there is no cooperation or harmony between them".*

This perspective also was confirmed by Parent-6, who has a child with developmental delay that is included in regular school, as well as Parent-4, who has three daughters with hearing impairments. She explained that the regular school did not follow the early intervention teaching style, which left parents feeling confused. Moreover, Parent-8 and Parent-9 highlighted that they experienced poor collaboration as well between the early intervention and private POD centres because the mission of these for-profit centres is not in line with the government early intervention programme's approach.

Pathways: The parents who were interviewed indicated the ways in which they were having a difficult time transitioning their children to new educational environments after the early intervention stage. They expressed that the transition pathways were not clear to them, so they were confused about what to do with their children, and what the correct educational course for each child should be.

This view was declared by Parent-5, who was concerned about her child's educational future in the disability centre since the certificates of disability centres are not accredited by the MOE. Likewise, Parent-3, who was in the same situation, suggested further development of the transition process in order to secure the correct pathways for their children.

Transitional pathways were unclear to parents, even after their children moved to new environments. This was emphasised by Parent-6, who went to the regular school her daughter was supposed to attend, only to find that her daughter was not registered there. She explained:

> *"I did not find her name registered in the admission list. Her file wasn't with them, so they asked me to bring her file and full reports from the Early Intervention Centre to register my daughter again".*

Since there are no alternative choices, some parents had to accept the pathway suggested by the EECIP, and this depended on the parents' chance to find a suitable school that accepted their children. Parent-7 disclosed, *"but I do not have another alternative educational setting for him; therefore, my son is here to learn and speak; it is a tentative placement until he develops".*

Therefore, many parents gave up as a result of the ambiguous situations they experienced, so they agreed to enrol their children into POD centres, waiting for conditions to improve in the future and hoping that their children would be integrated later on. This was expressed clearly by Parent-8 and Parent-9. Some parents, therefore, lived in confusion, such as Parent-11, who experienced conflicting feelings about her internal desire to include her son in regular education; however, instead of taking her child out of the POD centre, she postponed it, waiting for better conditions to come.

Information: Parents declared their need for clear information on the transition process. Although they were informed that their children would be transitioned to certain places, however, they needed more details about the new educational settings. For instance, Parent-11 described her experience with the transition phase as *"a vague stage"* as there were some questions that needed to be answered. She was wondering how her child would face the next stage and who would help her with that.

For further exploration, Parent-1 and Parent-3 were asked whether their children had been transitioned to the right educational settings. Surprisingly, they noted that there was a lack of information about the transition. For Parent-3, the transition was blurring, as she was not sure whether inclusion is the right place for her son. She stated: *"I do not know; I feel it is not the right place for him".* Parent-1 similarly responded; she stated that she doesn't know whether her child has been adequately empowered for inclusion.

According to Parent-5, she was not sure whether her son with Down syndrome is ready for the transition to regular schools. She doubted the accuracy of the information that has been provided during the transition. She explained:

> *"The early intervention centre told us that students with Down syndrome are not able for inclusive education, but I do not know if their point of view is right or not".*

This confusion was also expressed by Parent-9, she concluded, *"We remained in doubt about what to do for our son, because we went to many private centres, so we were hesitant towards the next educational step"*.

Children need more skills: Going through interviewees' responses to interview questions, it was clear that they consider transition as an ambiguous stage needing more clarification. Although this stage enabled their children to acquire some skills, they feel that their children had not been sufficiently empowered for the next educational level, particularly inclusive education. Therefore, some of them would have preferred their children to stay longer in early intervention for further rehabilitation and empowerment.

When parents were asked if their children have been empowered enough, Parent-1 declared, *"Honestly, I wished he would have empowered more than the current level"*. Meanwhile, Parent-2 stated after moments of silence, *"The current educational placement is appropriate and inappropriate at the same time because the child still needs more"*. She further added, *"He hadn't received enough rehabilitation in the early intervention stage compared to current services"*.

Likewise, Parent-3 advocated that the transition stage was not enough to prepare her son for inclusion. She reported that:

> *"When my son was in the early intervention stage, I thought that he had been enabled enough, but later on, I found out that what he had received was not enough. I wish he had been provided with more skills. Sometimes I feel that they have rushed to include my son in public education"*.

More parents agreed that their children needed more services during the transition in order to ensure their successful move to inclusive education. This is particularly true in speech and language services, as noted by Parent-9, Parent-10 and Parent-11. In addition, Parent-7 emphasised that her child with Down syndrome needed physiotherapy services.

4.2.1.8 Summary of the Interviews Results

The interviewed parents in the first phase of the exploratory sequential design study perceived their roles in the transition process in three main categories: *no role, active role and ambiguous role*. Moreover, they suggested further roles that parents should do to transition their children to the new educational settings after early intervention. The interviewees' perspectives swing

between these stands interchangeably depending on stages of transition and the kind of challenges they faced at each stage. Therefore, a parent might explain that she had an active role before the transition, and then she felt that she had no role at all during the transition decision or after. Parents have suggested additional roles that they should have played in early intervention, or to activate some of the parents' roles to become key partners in the transition process.

The interviewed parents felt that they had *"no role"* in the transition process when they were not consulted regarding the transition decision, or when they were not provided with needed information about the transition process, or not allowed to take part in activities directly related to their children's education. Furthermore, there are four main areas where interviewed parents viewed their roles as *"active"*: Attend meetings, follow up their children at home, support and encourage their children, and communicate continuously with the team members.

Even though the parents had active roles, they felt their roles were ambiguous in certain areas. They misunderstood roles assigned to them for their children to move to the next stage; therefore, they tried to perform additional roles such as offering outsourced rehabilitation to their children away from the early intervention programme. Parents also needed more and clearer information to play an active role for their children in transition, and, lastly, they were confused about the next educational place for their children, so they tried to look for alternative educational placements for their children after the early intervention stage despite the fact that it was not their role to do so.

More importantly, the interviewees suggested further roles that parents should perform to support their children in the transition stage. They thought parents should play a more active role in following up their children to secure a better educational environment, and they should not rely on someone else to take care of their children on their behalf. Furthermore, they pointed out additional training roles that parents should play to empower their children's skills. Therefore, they stressed on taking roles beyond the ones requested by the early intervention programme so they can provide more than what is required from them.

The interviews analysis found that parents viewed the transition process from three main perspectives. They experienced transition as a *"smooth"* process, a *"stressful"* experience, and a *"blurring"* stage. These perspectives oscillate back and forth according to the place where

the child was transitioned, whether to an inclusive setting or special education centre and depending on the sort of challenges they face at each stage.

Parents viewed the transition as a *"smooth"* process when their children had received services at early intervention premises, then moved to disability centres. They also felt that the early intervention team members made the transition easy for them due to their contentious communication with parents. Moreover, the interviewed parents showed their satisfaction towards the transition process when they felt that the new educational setting were suitable for their children and met their needs.

However, the majority of parents described the transition from early intervention as *"stressful"* due to the lack of support from the community in general, as well as from teachers and other staff in regular education schools, in particular. They felt that they were alone in facing negative attitudes towards their children from the community and public schools. They also described the situations that made them feel stressed during the transition stage. One was when they were informed about the next educational setting for their children, and the other was when their children had transitioned to educational environments that were supposed to be inclusive, but were actually not.

Furthermore, the interviewed parents described the transition process from a third angle. They viewed it as *"blurring"* and not sufficiently clear for them. They noticed a lack of coordination and collaboration between related entities, particularly the MOCE and the MOE. Therefore, transition pathways and available options for their children after early intervention were not clear for them. They needed more information about the transition process and the educational future of their children. They pointed out that their children would have needed to acquire more skills in the early intervention stage before they were referred to new settings.

4.2.2 Document Analysis

This section reports the results of the document analysis used in the first stage of the exploratory sequential design study which includes two categories of policies: federal policies related to people of determination and their education in the UAE, and policies at the local level of Dubai Emirate. At the federal government level, six policies were collected for analysis, one of them issued by the Cabinet, three of them by MOCD, and two more policies launched by the MOE. At the local level of Dubai government, two policies were collected for analysis, one of them

by KHDA and the other one by Dubai Health Authority (DHA). Table 16 shows a brief profile of the documents collected for analysis:

No.	Policy	Type of Government	Entity	Year	Number of pages
Policy-1	National Policy to Empower People of Determination	Federal (UAE)	The Cabinet	2017	30
Policy-2	Minister resolution number (890) in the year 2014 on the implementation of the early intervention programme	Federal (UAE)	MOCD	2014	14
Policy-3	Quality Standards for Early Intervention Services	Federal (UAE)	MOCD	2016	71
Policy-4	Minister resolution no. (479) in the year 2010 for integration children with disabilities In nurseries	Federal (UAE)	MOCD	2010	4
Policy-5	General Rules for the Provision of Special Education Programmes and Services. Public and Private Schools. (School for All)	Federal (UAE)	MOE	2010	97
Policy-6	Policy Framework for Inclusive Education - draft	Federal (UAE)	MOE	2018	111
Policy-7	Dubai Inclusive Education Policy Framework	Local (Dubai)	KHDA	2017	55
Policy-8	Health Inclusive Policy - draft	Local (Dubai)	DHA	2016	61

Table 16: Profile of Education and ECI Policies in the UAE

The first policy is the National Policy to Empower People of Determination, which includes six pillars, as follows: health and rehabilitation, education, vocational rehabilitation and employment, accessibility, social protection and family empowerment, public life, culture, and sport. One objective of this national policy is to support and empower individuals and families to carry out their roles.

The MOCD has three main policies to support children with SEND rehabilitation and education at an early age. The aim of Policy-2 is to establish main rules for the Emirates Early Intervention Programme and to provide therapeutic, educational, and counselling services for children below the age of six, whether they are diagnosed with disabilities or at risk for developmental delay, as well as for their families. Meanwhile, Policy-3 defines the standards to be followed in order to ensure high-quality early intervention services. It consists of twenty-nine standards distributed into eight main pillars. Furthermore, Policy-4 serves as a guide for including children with disabilities in nurseries, thus ensuring the provision of services that meet their individual needs and the success that accompanies inclusion at an early age.

At the federal level, the MOE has two main policies regarding educating students with SEND education. *"School for All"* is the popular initiative that established rules for the provision of special education programmes and services in UAE public and private schools since 2010. This policy has been followed by a Draft Policy Framework for Inclusive Education in 2018, which ensures sustainable, inclusive educational services, from early childhood to higher education, for students with special needs in the UAE.

At the local level of the Dubai government, KHDA has published the Dubai Inclusive Education Policy Framework, which is similar to the inclusive policy at the federal level. It aims "to enable a fully inclusive education system for children who experience SEND" (KHDA 2017, p. 9) across the Emirate of Dubai. The last collected document for analysis is the Dubai Inclusive Health Policy by DHA, which recommended the adoption of three main pillars to achieve the strategic health goal in Dubai Strategic Plan for People of Determination: early detection of disabilities, early intervention and rehabilitation, and provision of comprehensive and high-quality health care standards for people of determination.

The research question number (2) is: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

To answer this question, documents were collected and analysis mainly in the form of thematic analysis. According to Creswell (2008), the analysis starts with a general data collection then identifyng text segments to generate codes, then aggregating codes to themes. Two main themes have been emerged from the analysis. The first theme is *"Children's education"* which has four sub-themes: inclusion, transition, natural environments and IEPs. The second theme identified in early education policies is the *"Parents' empowerment"* which has five sub-themes: Parents' consent, parents' engagement, parents' support, parents' training, and providing information. These themes and sub-themes are presented in the following figure number (7).
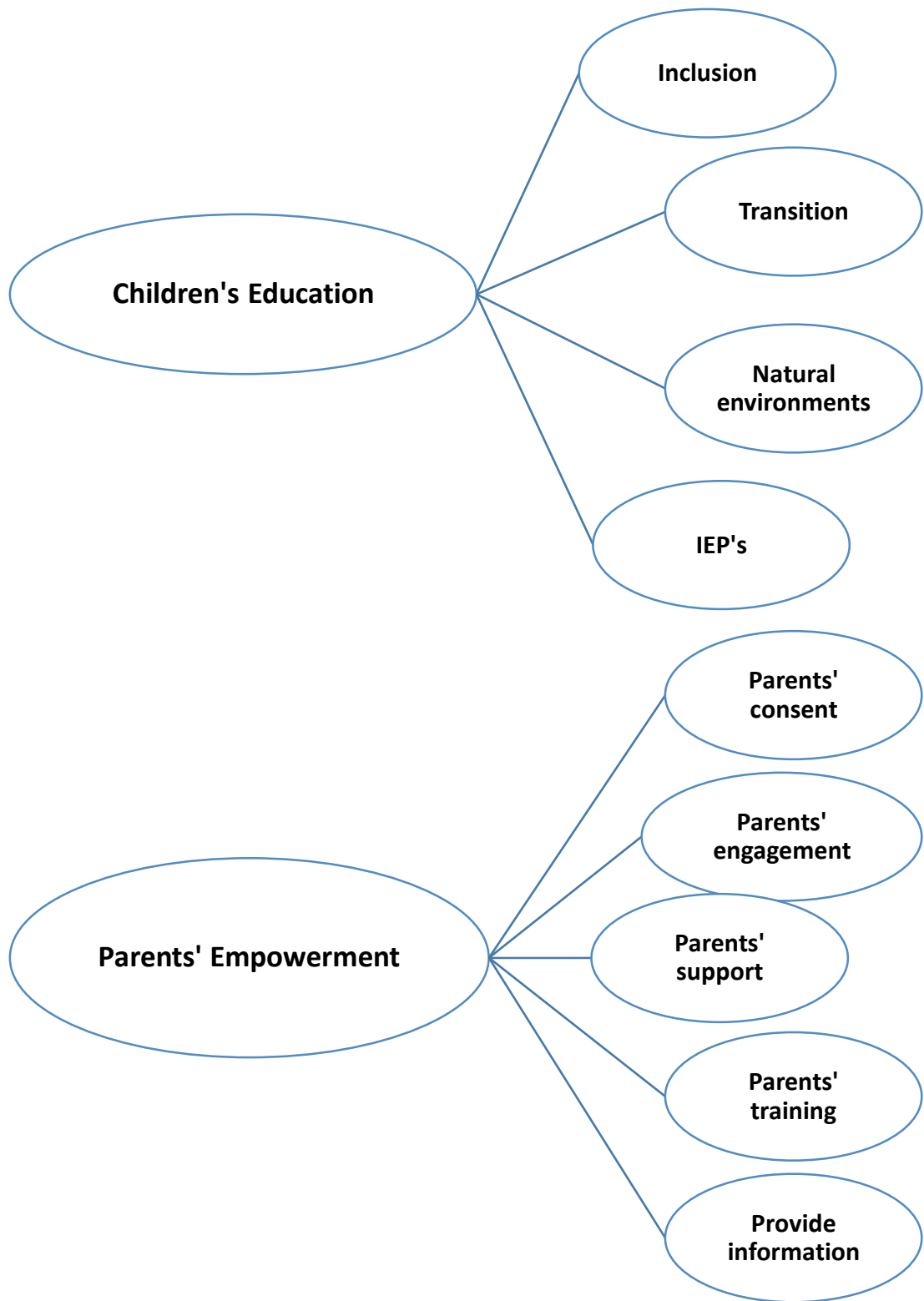
Figure 7: Themes and Sub-Themes Regarding Early Education Policies

Theme	Frequency of codes								
	Policy 1	Policy 2	Policy 3	Policy 4	Policy 5	Policy 6	Policy 7	Policy 8	All analysed policies
Children's Education	8	12	15	17	93	100	102	12	359
Parents' Empowerment	11	32	136	1	42	42	17	9	290

Table 17: Themes of Policies Analysis and the Frequency of Codes in Each Area

Table 17 represents the numbers of frequent codes related to the main emerging themes in each policy; it is clear from the table that policies numbers (7, 6, and 5) have the highest number of codes that support early education for children with SEND, while policy (3) has the highest codes related to parents' empowerment. In more detail, the content analysis findings were divided into two main themes, as follows:

4.2.2.1 Children's Education

The first theme identified in the UAE's early intervention and education policies is that these policies ensure the right to education for every child with special needs in the appropriate ways, and according to his or her capabilities in educational environments that support the ultimate advantage from the learning resources. Sub-themes emerged from this main theme as follows:

- Policies encourage the planned transition of children after early intervention into appropriate educational settings.
- Early education policies in the UAE support the right of children with SEND to be educated within the inclusive education system.
- Policies support the facilitation of children's education in natural environments.
- Policies guarantee the right of every child to an individual education plan that meets his or her educational needs, and to take advantage of learning opportunities in accordance with appropriate teaching methods.

Inclusion: The first sub-theme under this main theme is *"Inclusion"* for students with SEND, which is covered by educational policies at the federal level together with the Dubai local government. For example, Policy-1 focused on educational programmes aiming to integrate

142

persons with disabilities in the community and educational environments. Meanwhile, Policy-3 stressed on reviewing levels of inclusion for children with SEND in public education on a regular basis.

This is in line with the Policy-5 purpose to "[p]romote a culture of inclusion and concern for the rights of gifted and talented students and students with disabilities and how to benefit from special education services" (MOE 2010, p. 40). And "[a]ccept philosophy of inclusion of students with special needs in general education as the best educational placement to meet their needs and ensure their rights" (MOE 2010, p. 68).

In order to secure inclusion for children with SEND in the early ages, Policy-4 by MOCD supports "enabling nurseries to admit children with developmental delay" (MSA 2010, p. 1). Moreover, Policy-6 has not stopped at this point, but also ensures the sustainability of inclusion, which is in line with Dubai Inclusive Education Policy that mentioned:

> Inclusive education is not a project or an initiative. It is the progressive development of attitudes, behaviours, systems, and beliefs that enable inclusive education to become a norm which underpins school culture and is reflected in attitudinal, organizational and pedagogical discussion and decisions. (KHDA 2017, p. 38).

Therefore, in comparison with other education policies in the UAE, it was observed that Dubai's inclusive policy could be more inclusive for students with SEND, with important details like systems of support for inclusive education, fostering a culture of inclusive education and resources for inclusive education.

Transition: The second sub-theme that emerged from children's education is the *"Transitional services",* which includes preparing children with SEND to move from early intervention to public education.

At the federal level, Policy-2 facilitates the transition of children with special needs to private and government nurseries and kindergartens by establishing regulations that ensure a seamless transition. This is also mentioned in the Quality Standards for Early Intervention Services by the MOCD, through the IFSP that embraces goals for child transition to school.

The *"School for all"* policy by the MOE secures to students transitional services that:
> include activities designed to prepare the student with special needs to move from one stage, or from one environment, to another, and from school to the activities of public life so that he is able to rely on himself to the maximum extent possible. (MOE 2010, p. 33).

Moreover, Policy-6 has a special consideration for the transition of students with disabilities from POD centres to schools, as well as Policy-7 that focused on "facilitating the transition of students who experience SEND from segregated into mainstream settings" (KHDA 2017, p. 29). However, Policy-8 doesn't mention any kind of referral for children who are identified as special needs to inclusive facilities.

Natural environments: The third sub-theme found is that early childhood education policies focus on providing services, or part of them, in natural environments in which children live, considering its impact on children's development. For instance, Policy-2 reports the importance of making adjustments in the natural environment in which the child lives to help them cope with difficulties. In the same context, Policy-3 considers the natural environment in which early intervention children should learn as an essential educational choice. In addition, the policy has identified working with children in their natural environment as an indication of quality standards, the policy states that "early intervention staff works with individuals in the child's natural environment" (Al Khatib 2016, p. 20).

Furthermore, Policy-4 mentions the appropriate auditory environment that is noise-free to ensure that children with SEND are included in nurseries similar to natural environments. To elaborate more, this emphasis on natural environments is clearly indicated in the Dubai Inclusive Policy, as follows:

> All education providers should: Ensure that students who experience SEND will be actively supported to participate in the process of learning as they develop their potential, and build relationships with their peers, through social interactions in age-appropriate common learning environments. (KHDA 2017, p. 18).

IEPs: And the last sub-theme is the IEPs for children with SEND in the education system, where policies in the UAE have focused on individual differences among students, including those with special needs; thus, providing education which follows the individual educational plans that meet their needs.

Policy-1, Policy-2, and Policy-3 do not mention individualised plans as an educational method for students with SEND. Meanwhile, this learning style is mentioned clearly in Policy-4 to ensure that the enforcement IEPs for each child with SEND are included in nurseries. However, more details are explained in *"School for All"* rules, which consider IEPs as a cornerstone in the educational system for students with special needs. It elaborates plan designs,

implementation, and review. Meanwhile, it is one of the core steps of student's identification as it considers "[t]he most important elements of the IEP are the goals and objectives and accommodations, and modifications that are needed to meet the educational needs of the student" (MOE 2010, p. 29).

Interestingly, in addition to the above, the policies at the federal level continued to emphasise the importance of IEPs through the new Policy Framework for Inclusive Education in 2018 by MOE. Moreover, Dubai Inclusive Policy ensures an individual plan with appropriate goals for each child with SEND and the involvement of parents in the plans' design and implementation.

4.2.2.2 Parents' Empowerment

The second theme identified in the policies is the parents' empowerment, as the family is the first circle that surrounds the children and represents the fundamental environment in which they live and develop. Education policies in the UAE have taken into account the importance of parents' role as partners in rehabilitation and educational programmes offered to children with SEND at an early age. The focus here is not only on the child as the centre of the educational process but also on the family in its fundamental complementary role in social and natural environments. Sub-themes emerged from this main theme as follows:

- Early education programmes should obtain the parents' consent during all phases of education, including assessment, educational plans, and transition plans.
- Policies encourage collaboration and communication with parents and their involvement in the early childhood education process.
- Policies are concerned with providing psychological and social support and family counselling to parents of children with SEND.
- Policies focused on parents' training to enable them to be trainers and service providers for their children in natural environments.
- Parents should be provided with detailed information about educational programmes offered to their children and their development in various areas.

Parents' consent: Document analysis shows that education policies in the UAE are focused on family engagement in the educational process for students with SEND. This concern starts from paying attention to the family's consent to educational programmes provided to their child that meet their needs.

Interestingly, documents by MOE and MOCD are consistent with each other in terms of parents' consent in early intervention plans, transition plans to inclusive education and then educational plans that are applied in regular education facilities.

Policy-3 by MOCD requires the signature of the guardian on the joint assessment report in the early intervention stage. Not only that, but parents considered key members in the interdisciplinary team that design individualised educational plans where parents' consent is essential to implement these plans.

This is the case also in Policy-2 by MOCD that urges early intervention centres to get parents' approval for the assessment results after being officially informed via a written letter.

Likewise, *"School for All"* general rules by the MOE also require parents' signature on any IEP designed for their children in regular schools. This consent also stressed through the new framework for inclusive education.

Parents' engagement: Pertinent details related to family engagement, are mentioned in educational policies for children in early ages, particularly their role in IFSPs, which is covered intensively in Quality Standards for Early Intervention Services. These guidelines seem to attach more priority to parents in provided services in terms of IFSPs that consider parents' priorities and concerns. Additionally, these plans take into account parents' involvement in objectives formulation and implementation in natural contexts where children live.

The National Policy to Empower People of Determination contains the pillar of "Social Protection and Family Empowerment" that aims to engage family in rehabilitative services effectively. Consequently, Policy-3 addresses that each family of children in the ECI Programme should have an IFSP which responds to its needs, priorities, and concerns, together with the role of families in plans implementation to achieve the assigned objectives. This is also in line with Policy-2 that confirms parents' periodic visits to the early intervention unit and regular meeting with teams, focusing more on the social worker role in maintaining families' on-going involvement in the programme.

Similarly, MOE policies give family involvement great concern in public schools. At the time that *"School for All"* stressed that schools should "collaborate with parents of students with special needs to strengthen the home and school partnership" (MOE 2010, p. 42), the new

inclusive policy emphasised the establishment of a close relationship with parents and strengthening it in different ways, in addition to continuous and effective cooperation between the school, teachers and parents. However, this engagement was not organised through a family plan, as it is mentioned in ECI policies by the MOCD.

Parents' support: Regarding the parents of children with SEND empowerment in the country, the analysed document reported that family support is mentioned in one of the initiatives under the pillar of "*Social Protection and Family Empowerment*" in Policy-1. Early intervention policies by the MOCD focused on services provision to the child through early intervention at home through the family counselling programme. Policy-3 for early intervention quality standards provides a comprehensive and clear direction to support families to exercise their responsibilities towards their children at home and other social situations. These standards focus on identifying community support resources for children and their families, as well as home visits by the early intervention team to facilitate children's development and families' empowerment.

The *"School for All"* document by the MOE provided instructions to facilitate parents' access to services. However, when compared with the new Inclusive Education Policy Framework, it could be seen that family support becomes more obvious in the MOE, as the new policy includes new instructions to support parents of students with SEND and empower them in dealing with social, emotional, behavioural and/or family situations.

Dubai Health Inclusive Policy is an ambitious document considering the status of children with SEND in early ages and the support their families need to cope with challenges related to disability. The policy has a special consideration of the disability's impact on family, which requires parent counselling programmes to mitigate the disability's impact on the child and their families.

Parents' training: Education policies in the UAE have also focused on providing training to parents of children with SEND and their families in general to enable them to deal with their children's special needs and then take the role of developing their skills at home. The policies covered individual and group training that might be provided at the educational premises or through field visits by the early childhood intervention team. Moreover, the MOCD early intervention policies focus on parents' training as partners to perform their roles at home and

other natural settings. Meanwhile, the MOE policies are aimed at providing training to parents so that they can carry out the roles identified through the IEPs.

For instance, the MOCD's Policy-2 and Policy-3 directly mention parent training so that parents can master the skills needed to support their children's development and respond to their needs. The Quality Standards for Early Intervention Services included family training as part of the services provided by specialised staff to help families understand the special needs of their children and improve their development, since parents have an important and complementary role to play at home (Al Khatib 2016).

The new policy by the MOE (2018) dedicated a full chapter to parents' rights and duties towards their children with special needs. The chapter clearly mentioned training courses for parents such as courses in sign language for the deaf. The policy assigned the training as part of the tasks of special education teachers and other specialists. However, parent training was not covered in the Dubai Inclusive Policy.

Provide information: The analysed policies allocated great importance to providing information to parents, thus enabling them to participate in their children's education. The policies dealt with this information as a basic right for parents during their children's educational journey, whether in evaluation, services provision or transition.

Important pertinent details were covered in Policy-2 as regards information that should be provided to parents, such as "assessment results, provided services, services location, services duration, and therapeutic and educational plans" (MSA 2014, p. 5). Meanwhile, Policy-3 stresses the delivery of a full-detailed annual report to parents about their children's progress in different areas. A similar report is also mentioned in Policy-4: "Nurseries must submit a regular report to the parents explaining the developments that occur to the child" (MSA 2010, p. 9) to ensure parents' knowledge about their children's educational progress in nurseries' inclusive services.

Different types of information are also mentioned in the MOE policies as regards how schools should provide information to parents about their children with special needs. The main ideas are mentioned under the parents' rights section in *"School for All"* rules as follows:

- The school must provide parents with all the information on programmes provided by the school for students with special needs.

- Parents must be notified of the dates of meetings, assessments, or get-togethers as related to the education of their children, along with stating the purpose of such meetings. (MOE 2010, p. 51).

4.2.2.3 Summary of Document Analysis

Two types of documents were analysed in this section: the UAE federal policies in early education and Dubai local government policies. Findings indicate that two main themes emerged from the document analysis, which are children's education and parents' empowerment. The first identified theme ensures the right to education for children with SEND using differential instruction to meet their needs, in accommodated educational environments that unlock their potential. Sub-themes emerged from this main theme as follows:

- Education policies in the UAE support the right of children with SEND to learn in an inclusive education system.
- Policies encourage planned and orchestrated transition of children after early intervention into appropriate educational settings.
- Policies support the facilitation of children's learning in natural environments.
- Policies ensure the right of every child with SEND to an individualised education plan that meets their needs, and to take advantage of learning opportunities in accordance with the appropriate teaching methods.

The second identified theme in early educational policies stresses parents' empowerment, as they are partners in any rehabilitation and educational programmes offered to children with SEND at an early age. This theme focuses on the family as a fundamental part of the social and natural environments surrounding the child. Sub-themes emerged from this main theme as follows:

- Early education programmes should obtain the parents' consent during all phases of education, including assessment, educational plans and transition plans.
- Policies encourage collaboration and communication with parents and ensure their involvement in the early childhood education process.
- Policies are concerned with providing psychological and social support and family counselling to parents of children with SEND.

- Policies focus on parents' training to enable them to become trainers and service providers for their children in natural environments.
- Policies ensure that parents are provided with detailed information about educational programmes offered to their children and their progress in various areas.

4.2.3 Analysis of the Open-Ended Survey Questions

This section involved a representation of participants' answers collected from the five open-ended questions at the end of the survey. The aim was to investigate parents' perspectives towards the transition of early intervention children to other educational settings in the UAE. Furthermore, the aim was also to investigate how they view their roles in the early intervention stage, in terms of individual plans, and transition them to educational settings suitable for their abilities. 104 participants responded to the open-ended questions from a total of 183 participants who responded to the closed-ended questions. This was due to the fact that responding to closed-ended questions is easier than the other part of the questionnaire; most participants viewed the open-ended questions section as optional. The five open-ended questions at the end of the distributed questionnaire included the following:

1. As a parent, are you familiar with the transition process from early intervention to other educational settings? If yes, how? If no, why?
2. What is the appropriate educational setting for your child after the early intervention stage, for example Kindergarten, school, people of determination centre? Why?
3. What age do you think is appropriate for children's transition from early intervention to the next educational environment? Why?
4. How do you see your child's future after moving from early intervention?
5. Any suggestions that meet your child's needs for the transition to another appropriate learning environment?

Data analysis of the five open-ended questions was achieved using the five main stages by Creswell (2008). First, through data collection. Second, through the preparation for data analysis. Third, getting familiar with the data. Fourth, through data coding, and finally, by clustering codes together into relevant themes of the achieved results. In the end, participants' responses to the five open-ended questions were summarised by creating the following table 18:

The Question		The Results
28. As a parent, are you familiar with the transition process from early intervention to other educational settings? If yes, how? If no, why?	Yes (n=62)	Participants explained how they were familiar with the transition process as follows: - Parents being told by the ECI programme about transition process that their children will undergo.
	No (n=42)	Participants explained why they were not familiar with the transition process as follows: - The transition process from early childhood intervention to the next stages was not explained to the parents by the ECI programme. - There were no clear transition plans assigned for ECI children contains objectives that meet individual needs. - The ECI programme takes the transition decision on behalf of parents.
29. What is the appropriate educational setting for your child after the early intervention stage, for example: Kindergarten, school, people of determination centre? Why?	POD centre (n=41, 52.6%)	Participants presented several reasons for why they preferred POD centres as appropriate educational settings for their children, as follows: - Teachers and staff at these centres are more qualified in teaching and dealing with students with special needs, compared to regular schools' teachers. - Their children still need more skills to be developed, so they need IEPs that meet their needs and improve their skills. - Educational environments in disability centres are more suitable and supportive for children with special needs.

		- Disability centres offer related therapeutic services that are needed for their children, which are not available in public education schools such as physiotherapy, occupational therapy and language therapy.
	Inclusive setting (n=37, 47.4%)	Participants explained why they preferred inclusive settings such as kindergartens and schools as appropriate educational settings for their children, as follows: - Their children with special needs would learn from their classmates social and communication skills. - Inclusion in regular schools is the first step for social inclusion in the broader community. - Children would improve their personal skills and characteristics such as self-confidence and self-esteem.
30. What age do you think is appropriate for children's transition from early intervention to the next educational setting? Why?	3Y (n=9, 11.1%) 4Y (n=11, 13.6%) 5Y (n=24, 29.6%) 6Y (n=22, 27.2%)	Participants explained why they support the transition of their children at certain ages as follows: - Participants who support their children's transition at ages between 3-4 years old, believe that their children are ready for inclusion which will help develop their abilities. And mostly their children have developmental delay or mild disabilities. - The majority of participants responded to this question support their children's transition at ages between 5-6 years old. They believe that this age gives their

	Above 6Y (n=15, 18.5%)	children an opportunity for further individual rehabilitation and improvement in the early intervention - Participants who support their children's transition at above six years old, believe that their children need more attention and individual rehabilitation. So they prefer their children to stay in the early intervention a longer period of time to get intensive training before transition. And mostly their children have moderate to severe disabilities.
31. How do you see your child's future after moving from early intervention?		The parents' response to this question appeared in three different points of views as follows: - The first group of participants hope for a better future for their children, as they observe them developing day by day due to rehabilitation services provision. - The other group of participants linked the future of their children to the quality of services provided to them and the continuity of training that would improve their abilities - The third and last group of participants described the future of their children as ambiguous. They found it difficult to imagine how the future of their children would look like, in terms of which they will become independent and socially integrated, or they will remain dependent and receive rehabilitation in disability centres.

32.Any suggestions that meet your child's needs for the transition to another appropriate learning environment?		Participants suggestions were focused on the following areas: - Providing and intensifying further services such as related therapeutic services (physiotherapy, occupational therapy, speech therapy) on daily basis. - Including early intervention children partially in public education to prepare them for smooth transition in the subsequent phase. - Extending the age of children receiving early intervention services. - Preparing teachers in kindergartens and public schools to receive children with special needs, and train them on how to deal with these children and teach them. - Following-up children transitioned to inclusive education by the Early Intervention Programme, but not by the MOE. - Making school environments accessible and barrier-free for children with special needs. - Changing attitudes towards people of determination in regular schools and community in general. - Provide more information to parents on possible educational stages after early intervention, and transition pathways.

Table 18: Responses to the Survey's five Open-Ended Questions

4.3 Quantitative Phase

In this part of the exploratory sequential design study, a cross-sectional questionnaire was distributed to parents of children with SEND to collect data about their perspectives in transition. Further, descriptive and inferential statistical analyses were performed, including demographics, standard deviations, means, *t*-test and ANOVA test.

4.3.1 Parents' Cross Sectional Questionnaire

The cross-sectional questionnaire was aimed to investigate parents' perspectives towards transition in early childhood intervention in the UAE. The Statistical Package for Social Sciences (SPSS) software version 23.0 was used to analyse the data. The data cleaning and subsequent analysis were achieved in order to analyse the perspectives of parents in the Emirates Early Intervention Programme within four UAE emirates. This was attempted by using a one-time questionnaire to survey the entire population involved in the study to ensure the collection of sufficient data related to the study purpose (Fraenkel & Wallen, 2009). The collected data was cleaned and analysed for answering the following research questions:

RQ1: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

RQ2: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

RQ3: How do parents of children with SEND perceive the transition process in early childhood intervention?

RQ4: Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?

After the questionnaire conducted on all parents of children with SEND in the Emirates Early Intervention Programme, 183 participants responded to the questionnaire correctly, including both mothers and fathers in Emirates: Dubai, Ajman, Ras Al Khaimah and Fujairah. Five cases were excluded from statistical analysis due to missing data responses. Data analysis began with data cleaning and descriptive statistics, including means and standard deviations for parents' perspectives towards the transition from early intervention to other educational settings in the UAE. A frequency distribution was generated for all the questionnaire items in order to detect any missing values or input errors (Creswell, 2014). Furthermore, an examination of the

differences was applied among six demographic variables, including parent's gender, educational level of the parent, child's gender, child's educational status, type of SEND and place of services.

In this research study, the cross-sectional questionnaire contained three main sections. The first section involved an overview of the demographic information of the participants, including parent's gender, educational level of the parent, child's gender, child's educational status, type of SEND and place of services. The second middle section of the survey represents close-ended questions which are organised into four domains as follows:

1- Parents' roles in the transition stage: It represented the parents' perspectives toward their roles in early intervention that lead to a suitable transition for their children.

2- Policies in early childhood intervention: It covered the parents' perspectives toward early intervention policies in the UAE and to what extent these policies are supportive of their children's inclusion and empowerment.

3- The transition journey: It covered parents' perspectives toward their children's journey, from early intervention to other educational settings

4- Environment surrounding the child: It focused on the environments around early intervention children and their families.

The third section, on the other hand, encompassed five open-ended questions that were analysed as a form of qualitative method.

4.3.2 Statistical Analysis

This section of the study contains five subsections. The first four sections present descriptive and inferential statistical analyses of the parents' perspectives pertinent to the transition process in early childhood intervention. The descriptive statistics present the mean, standard deviation, and standard error, whereas the inferential statistics focus on the independent sample t-test, ANOVA, and Scheffe post hoc tests. The first section discusses the results of the data obtained regarding parents' roles in transition, whereas the second section discusses the parents' responses to the policies in early childhood intervention. Moreover, the third section discusses the results of the data obtained in terms of the transition journey; meanwhile, the fourth section discusses parents' perspectives towards environments surrounding children. Furthermore, a fifth section was added to provide a summary of the closed-ended survey questions.

4.3.2.1 Parents' Roles

This section discusses the results of the data collected from the participants' responses to the first domain in the cross-sectional questionnaire. This domain contains the six statements related to the parents' roles. In the beginning, a descriptive statistical analysis is illustrated for each statement in this domain, as well as demographic variables are presented, using mean, standard deviation and standard error. Secondly, inferential statistics are used, such as independent samples t-test, to determine whether there is a significant statistical difference in the mean between participants in terms of the parent's gender and children's gender. Furthermore, an ANOVA test is used to determine whether any statistically significant differences in means exist according to the parent's educational level, child's educational status, type of special educational needs, and place of services. The Scheffe post hoc test is performed to study the reasons behind the significance of the results obtained from the ANOVA test.

Table 19 presents the mean scores "M" and standard deviations "SD" for the six statements pertinent to parents' roles by providing the participants with five options to report their perspectives regarding their roles during the transition. The 5-point Likert scale options were: 1=Very weak, 2=Weak, 3=Don't know, 4=Effective, 5=Strongly effective.

N	Parents' roles statements	M	SD
1	The clarity of my role as a parent in early intervention stage, which supports my child to move on to the next educational stage.	2.98	1.39
2	My knowledge about transition steps to other educational settings after the early intervention stage.	3.01	1.39
3	My participation as a parent in establishing my child's goals, which help in his/her transition to appropriate educational placement later on.	3.02	1.39
4	Practicing my role as a parent towards my child, which leads to a successful transition to the next stage.	3.02	1.39
5	My role as a parent in following up my child with the team members, which leads to smooth transition after early intervention stage.	3.00	1.39

| 6 | My participation in educational decisions that affect my child future after the early intervention stage. | 2.97 | 1.38 |
| | **Total** | **3.00** | **1.38** |

Table 19: Means and Standard Deviations for Parents' Roles Statements (N=183)

Table 19 indicates the analysis of data collected from participating parents that are pertinent to the six statements in the parents' roles domain. The analysis presents means "M," standard deviations "SD" of each statement along with the total of each domain. The researcher followed "the subjective standard in interpreting the mean values of responses," as suggested by Lee and Song (2015, p. 173). Accordingly, the researcher expected that means below 2.50 indicate weak roles, where means between 2.50 to 3.49 indicate moderate roles; however, effective roles start from means 3.50 and higher.

The analysis showed that the responses revealed by participating parents with respect to their roles were in transition from ECI to other educational settings. Findings have indicated that all participating parents agreed on the fact that their roles did not reach the effective roles, but the moderate ones only.

The analysis demonstrates that the means ranges between 2.97 and 3.02 while the standard deviation ranges between 1.38 and 1.39, which denotes how the parents' responses are almost within the level of moderate roles (between 2.50 and 3.49) in the six statements and the total average of the domain. The highest mean scores were achieved through statements (3 and 4) that related to parents' participation in establishing their children's goals, and parents' roles towards their children, which led to successful transition (M=3.02).

The lowest mean scores were achieved in statements (1 and 6) through the following roles: The clarity of parents' roles in early intervention stage to transition their children to the next educational stage (M=2.98), and parents' participation in decisions that affect their children educational future (M=2.97).

Demographic variables		**M**	**SD**	**SEM**
Parent's Gender	Male (n=26, 14.2%)	3.99	1.172	0.229
	Female (n=157, 85.8%)	2.83	1.350	0.107
	Literacy or below (n=51, 27.9%)	3.82	1.216	0.170
	High school (n=61, 33.3%)	3.27	1.281	0.164

Parent's Educational Level	Bachelor's degree and above (n=71, 38.8%)	2.18	1.134	0.134
Child's Gender	Male (n=99, 54.1%)	2.97	1.422	0.142
	Female (n=84, 45.9%)	3.04	1.347	0.146
Child's Educational Status	Currently in early intervention (n=87, 47.6%)	3.36	1.434	0.153
	Transitioned to inclusive education (n=39, 21.3%)	1.79	0.992	0.158
	Transitioned to a disability centre (n=57, 31.1%)	3.27	1.053	0.139
Type of Educational Needs	Developmental delay (n=66, 36.1%)	3.45	1.527	0.188
	Sensory impairments (n=13, 7.1%)	3.10	1.511	0.419
	Intellectual disability (n=49, 26.8%)	2.91	1.150	0.164
	Autism spectrum disorder (n=35, 19.1%)	2.38	1.252	0.211
	Multiple disability (n=20, 10.9%)	2.74	1.125	0.251
Place of ECI Services	Dubai (n=78, 42.6%)	3.15	1.374	0.155
	Ajman (n=21, 11.5%)	2.22	1.133	0.247
	Ras Al Khaimah (n=69, 37.7%)	3.23	1.421	0.171
	Fujairah (n=15, 8.2%)	2.24	0.995	0.257

Table 20: Parents' Perspectives towards their Roles by Demographic Variables (N=183)

The above table 20 presents the analysis of data collected from the parents according to the six demographic variables. The analysis shows the number of respondents "N," Mean "M," Standard Deviation "SD," and Standard Error Mean "SEM." The standard deviation is studied to present how measurements for a group are spread out from the mean and allow useful comparison among groups. A high standard deviation points out that the numbers are spread out; meanwhile, a low standard deviation indicates that most of the numbers are very close to the mean.

Table 20 demonstrates the descriptive statistics on the parents' perspectives towards their roles, divided by the six selected demographic variables. This analysis shows that most answers are very close to the mean and thus support the comparison among the parents. The (SEM) is also

studied to secure the minimal effect on means, and it is ranges between 0.107 and 0.419. This indicates that mean scores can be compared, and the difference in the mean can be studied further.

With respect to the parent's gender, table 20 has shown that the mean score awareness was higher among fathers (M=3.99) as compared to mothers (M=2.83). In regards to participants' educational level, it was concluded from the mean score that parents with basic reading and writing skills scored higher (M=3.82); meanwhile, parents possessing high school degree scored moderately (M=3.27) as compared to parents possessing a bachelor's degree and above (M=2.18).

Furthermore, with respect to the child's gender, the level of both parent groups who have boys and who have girls was closely associated in their perspectives towards their roles in early childhood intervention. The mean score between parent groups who have boys and who have girls was 2.97 and 3.04, respectively.

In regards to child's educational status, it was concluded from the mean score that parents of children transitioned to inclusive education shared low perspectives towards their roles in the transition stage, with a mean score of M=1.79, when compared with parents of children still in early intervention centres, with a mean score of M=3.36, and parents of children transitioned to disability centres (M=3.27).

Moreover, with respect to the type of special educational need, mean scores were between 2.38 and 3.45. The higher two mean scores were obtained for parents of children with developmental delay (M=3.45) and children with sensory impairment (M=3.10). However, the lower mean score was obtained for parents of children with ASD (M=2.38).

Finally, in regard to the location of ECI services, parents who have been served in Dubai and Ras Al Khaimah shared higher perspectives for their roles in ECI—and their mean scores were 3.15 and 3.23, respectively—than parents who have been served in Ajman (M=2.22) and Fujairah (M=2.24).

Variable	DF	T	P	Mean Diff	SD Diff
Parent's gender	181	-4.130	0.000	-1.161	0.281

(mothers=157, fathers=26)					
Children's gender (boys=99, girls=84)	181	-0.341	0.733	-0.070	0.205

Table 21: T-Test for the Group Difference on Parents' Gender and Children's Gender

Table 21 illustrates parents' perspectives on their roles in the transition stage with respect to their gender and their child's gender. Findings have shown that there were significant differences between parents' gender regarding their perspectives on their roles in the transition (t=-4.130, $p<0.05$). In contrast, the t-test indicated that there were no statistical differences between parents in regard to their children's gender: (t=-0.341, $p>0.05$). The results revealed that fathers viewed their roles as effective in ECI transition (M=3.99), while mothers viewed their roles as moderately effective (M=2.83).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	86.505	2	43.252	29.637	0.000
Within groups	262.689	180	1.459		
Total	349.195	182			

Table 22: One-Way ANOVA for the Group Difference on Parent's Educational Level

The results for parents' roles according to their educational level have shown for literacy or below (M=3.82, SD=1.216, N=51), high school (M=3.27, SD=1.281, N=61), and bachelor's degree and above (M=2.18, SD=1.134, N=71). Higher mean scores have been shown among parents with basic literacy skills and parents with a high school degree. On the contrary, the results have shown the least mean scores for parents holding a bachelor's degree and above.

A one-way ANOVA statistical test was conducted to find out if the difference among the three groups is statistically significant. The results in table 22 have shown that there were significant statistical differences between educational level mean scores (F=29.637, $p< 0.05$). The findings of the Scheffe post hoc test suggest a significant difference between parents with literacy skills and below, and parents with a bachelor's and above (p=0.000). Further, it indicates a statistically significant difference between the mean scores of parents with a high school degree and parents with bachelor's and above (p=0.000).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	72.707	2	36.353	23.667	0.000
Within groups	276.487	180	1.536		
Total	349.195	182			

Table 23: One-Way ANOVA for the Group Difference on Child's Educational Status

The results for parents' roles according to children's educational status have shown for early childhood intervention centre (M=3.36, SD=1.434, N=87), inclusion (M=1.79, SD=0.992, N=39), and disability centre (M=3.27, SD=1.053, N=57) in this section. Higher mean scores have been shown among parents of children still in ECI centres, followed by parents of children in disability centres. On the contrary, the results have shown lower mean scores for parents of children in inclusive settings.

A one-way ANOVA statistical test was conducted to find out whether the differences among the three groups were statistically significant. The results in table 23 have shown that there were significant statistical differences between a child's educational status mean scores (F=23.667, $p<0.05$). The findings of the Scheffe post hoc test indicate a significant difference between parents of children in ECI and parents of included children ($p=0.000$). Further, the results suggest a statistically significant difference between parents of children in disability centres and parents of included children ($p=0.000$).

Variable	Sum of Squares	df	Mean Square	F	*p*
Between groups	29.171	4	7.292	4.056	0.004
Within groups	320.024	178	1.797		
Total	349.195	182			

Table 24: One-Way ANOVA for the Group Difference on Type of SEND

The results for parents' roles according to type of SEND have shown for children with developmental delay (M=3.45, SD=1.527, n=66), sensory impairment (M=3.10, SD=1.511, n=13), intellectual disability (M=2.91, SD=1.150, n=49), children with ASD (M=2.38, SD=1.252, n=35), and multiple disabilities (M=2.74, SD=1.125, n=20). Higher mean scores have been shown among parents of children with developmental delay and with sensory

impairments. On the contrary, the results have shown lower mean scores for parents of children with ASD.

A one-way ANOVA statistical test was conducted to find out whether the differences among the three groups were statistically significant. The results in table 24 indicate the significant statistical differences among special educational needs mean scores (F=4.056, $p<0.05$). The findings of the Scheffe post hoc test indicates a significant difference between parents of children with developmental delay and ASD ($p=0.006$).

Variable	Sum of Squares	df	Mean Square	F	p
Between groups	26.678	3	8.892	4.935	0.003
Within groups	322.517	179	1.801		
Total	349.195	182			

Table 25: One-Way ANOVA for the Group Difference on Place of ECI Services

The results for parents' roles according to the place of ECI services were designated for Dubai (M=3.15, SD=1.374, N=78), Ajman (M=2.22, SD=1.133, N=21), Ras Al Khaimah (M=3.23, SD=1.421, N=69) and Fujairah (M=2.24, SD=0.995, N=15) in this section. Higher mean scores were computed from parents who served in Ras Al Khaimah, followed by Dubai. On the contrary, the least mean scores were gathered for parents who served in Ajman.

A one-way ANOVA statistical test was performed to find out if the difference between the four groups is statistically significant. The results in table 25 specified that there were significant statistical differences among the place of ECI services mean scores (F=4.935, $p<0.05$). The findings of the Scheffe post hoc test defined a significant difference in parents who served in Ajman and Ras Al Khaimah ($p=0.031$).

4.3.2.2 Early Childhood Intervention Policies

This section discusses the results of the data collected from the participants' responses to the second domain in the cross-sectional questionnaire. This domain contains the six statements related to the early childhood intervention policies domain. In the beginning, a descriptive statistical analysis is illustrated for each statement in this domain. Additionally, demographic variables are presented using mean, standard deviation and standard error. Secondly, inferential

statistics such as independent sample *t*-tests are used to determine whether there is a significant statistical difference in the mean between participants according to parents' and children's gender. Furthermore, an ANOVA test is used to determine whether any statistically significant differences in means exist according to the parents' educational level, the children's educational status, the type of SEND, and the place of service. The Scheffe post hoc test is conducted to study the reasons behind the significance of the results obtained from the ANOVA test.

The following table 26 presents the mean scores "M" and standard deviations "SD" for the six statements pertinent to ECI policies. Participants were given five options to report their perspectives regarding ECI policies as well as the extent to which they support the children's inclusion and empower their parents. These were the five-point Likert scale options: 1=Very poor support, 2=Poor support, 3=Don't know, 4=Strongly support, and 5=Very strongly support.

N	ECI policies statements	M	SD
7	Early intervention policies support individual plans that help children transition to inclusive education later on.	3.89	0.86
8	Early intervention policies urge following up SEND children to ensure their transition to inclusion environments after early intervention.	3.91	0.87
9	Early intervention policies encourage the provision of services in natural environments such as (home, kindergarten, school, etc.).	3.92	0.88
10	Early intervention policies support children's transition to inclusive learning settings.	3.92	0.88
11	Early intervention policies enable families towards full participation with their children, which lead to a successful transition after early intervention stage.	3.87	0.88
12	Early intervention policies support families to exercise their roles to move their children to appropriate educational settings after early intervention stage.	3.86	0.86
	Total	3.89	0.86

Table 26: Means and Standard Deviations for ECI Policies (N=183)

Table 26 indicates the analysis of participating parents' data that is pertinent to the six statements in the ECI policies domain. The analysis presents the means (M) and standard deviations (SD) of each statement as well as the total of each domain. The researcher expected that averages below 2.50 indicate poor support, means between 2.50 to 3.49 indicate moderate support, and averages of 3.50 and higher show strong support.

Findings have shown that all participated parents agreed that ECI policies strongly support children's inclusion and empower their parents. Table 26 demonstrates that the means range from 3.86–3.92, and the (SD) falls between 0.86–0.88, which means that parents' responses are almost within the strong-support level (3.50 and higher) in the six statements and in the total average of this domain. The highest mean scores were achieved in statement numbers 9 and 10, where parents agree that ECI policies encourage the provision of services in natural environments (M=3.92) and support children's transition to inclusive learning environments (M=3.92).

Demographic variables		M	SD	SEM
Parent's Gender	Male (n=26, 14.2%)	4.64	0.546	0.107
	Female (n=157, 85.8%)	3.77	0.846	0.067
Parent's Educational Level	Literacy and below (n=51, 27.9%)	4.22	0.669	0.093
	High school (n=61, 33.3%)	4.16	0.647	0.082
	Bachelor's degree and above (n=71, 38.8%)	3.43	0.952	0.113
Child's Gender	Male (n=99, 54.1%)	3.82	0.840	0.084
	Female (n=84, 45.9%)	3.99	0.889	0.097
Child's Educational Status	Currently in early intervention (n=87, 47.6%)	4.13	0.700	0.075
	Transitioned to inclusive education (n=39, 21.3%)	3.00	0.900	0.144
	Transitioned to a disability centre (n=57, 31.1%)	4.15	0.647	0.085
Type of Educational Needs	Developmental delay (n=66, 36.1%)	4.01	0.777	0.095
	Sensory impairments (n=13, 7.1%)	4.12	0.908	0.251
	Intellectual disability (n=49, 26.8%)	3.91	0.808	0.115
	Autism spectrum disorder (n=35, 19.1%)	3.56	1.001	0.169

	Multiple disability (n=20, 10.9%)	3.90	0.918	0.205
Place of ECI Services	Dubai (n=78, 42.6%)	4.25	0.999	0.113
	Ajman (n=21, 11.5%)	3.73	0.719	0.157
	Ras Al Khaimah (n=69, 37.7%)	3.56	0.655	0.078
	Fujairah (n=15, 8.2%)	3.83	0.361	0.093

Table 27: Parents' Perspectives towards Early Intervention Policies by Demographic Variables (N=183)

The above table 27 demonstrates the descriptive statistics on the parents' perspectives towards early intervention policies by the six selected demographic variables. It shows that most standard deviations are very close to the mean and, thus, support the comparison among the parents. The SEM ranges between 0.067–0.251. This indicates that mean scores can be compared, and the difference in mean can be studied further.

In regards to parents' gender, table 27 has shown that the mean score was higher among fathers (M=4.64) as compared to mothers (M=3.77). With respect to participants' educational level, it was concluded from the mean score that parents holding a bachelor's degree and above showed the least score in this domain (M=3.43) as compared with parents possessing a high school degree (M=4.16) and parents with basic reading and writing skills (M=4.22).

Moreover, with respect to the child's gender, the level of both parents' groups was closely associated with their perspectives towards early-intervention policies. The mean score between parents who have boys and who have girls was 3.82 and 3.99, respectively.

Parents' perspectives towards ECI policies were different with respect to children's educational status. Parents of children still in early intervention (M=4.13) and children transitioned to disability centres (M=4.15) have shown a higher mean score, as compared to parents of children transitioned to inclusive settings (M=3.00).

Furthermore, with respect to children's type of special educational needs, the results of the mean scores were between 3.56 and 4.12, which means that parents view ECI policies as supportive to children with SEND and parents. The two high mean scores represented the parents of children with sensory impairment (M=4.12) and with developmental delay (M=4.01). However, the mean scores for parents of children with ASD showed the least group (M=3.56).

Finally, regarding participants' places of ECI services, parents who have been served in Dubai shared higher perspectives on ECI policies (M=4.25) when compared to parents in other facilities. On the contrary, lower mean scores were shown for the parents served in Ras Al Khaimah (M=3.56).

Variable	DF	T	P	Mean Diff	SD Diff
Parent's gender (mothers=157, fathers=26)	181	-5.069	0.000	-0.871	0.171
Child's gender (boys=99, girls=84)	181	-1.332	0.184	-0.170	0.128

Table 28: T-Test for the Group Difference on Parent's Gender and Child's Gender

The group difference among parents' perspectives on early intervention policies regarding gender and children's gender was demonstrated using a *t*-test (Table 28). The results showed a statistically insignificant difference between parents' responses according to their children's gender (t=-1.332, p>0.05). A small variance between the mean values further indicated an insignificant difference between both groups (M=3.82 for males and M=3.99 for females). However, the findings of the *t*-test showed that there was a statistically significant difference between the two groups with respect to the parents' gender (t=-5.069, p<0.05). Positive feedback was shared by fathers and mothers regarding their views on early intervention policies. Meanwhile, it was concluded from the variance between the mean values that fathers (M=4.64) viewed ECI policies as being strongly supportive of children's inclusion more than mothers did (M=3.77).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	25.222	2	12.611	20.446	0.000
Within groups	111.024	180	0.616		
Total	136.247	182			

Table 29: One-Way ANOVA for the Group Difference on Parents' Educational Level

The results for parents' perspectives towards early intervention policies, with respect to parents' educational level were designated for literacy and below (M=4.22, SD=0.669, n=51), high school (M=4.16, SD=0.647, n=61), and bachelor's degree and above (M=3.43, SD=0.952, n=71), Higher mean scores have been shown among parents with literacy skills and those with a high school degree. On the contrary, the results have shown lower mean scores were gathered for parents holding bachelor's degrees and above.

A one-way ANOVA statistical test was conducted to find out if the difference between the three groups is statistically significant. The results in table 29 have shown that there were significant statistical differences between educational level mean scores (F=20.446, $p<0.05$). The findings of the Scheffe post hoc test suggest a significant difference between parents with basic literacy skills and parents with bachelor's degrees and above ($p=0.000$). Further, they indicate a statistically significant difference between the mean scores of parents with high school degrees and parents with bachelor's degrees and above ($p=0.000$).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	39.765	2	19.882	37.093	0.000
Within groups	96.482	180	0.536		
Total	136.247	182			

Table 30: One-Way ANOVA for the Group Difference on Child's Educational Status

The results for parents' perspectives towards early intervention policies, with respect to child's educational status, have been shown for ECI centre (M=4.13, SD=0.700, n=87), inclusion (M=3.00, SD=0.900, n=39), and disability centre (M=4.15, SD=0.647, n=57) . Higher mean scores have been shown among parents of children transitioned to disability centres, followed by parents of children in ECI. On the contrary, the results have shown the least mean scores for parents of children in inclusive education.

A one-way ANOVA statistical test was conducted to find out if the difference among the three groups is statistically significant. The results in table 30 have shown that there were significant statistical differences between children's educational status mean scores (F=37.093, $p<0.05$). The findings of the Scheffe post hoc test indicate a significant difference between parents of children in ECI and parents of children in inclusive education ($p=0.000$). Further, the results

suggest a statistically significant difference between parents of children in disability centres and parents of children in inclusive education (*p*=0.000).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	5.492	4	1.373	1.869	0.118
Within groups	130.754	178	0.734		
Total	136.247	182			

Table 31: One-Way ANOVA Test for the Group Difference on Type of SEND

The results for parents' perspectives towards ECI policies with respect to children with SEND have shown for children with a developmental delay (M=4.01, SD=0.777, N=66), sensory impairment (M=4.12, SD=0.908, N=13), intellectual disability (M=3.91, SD=0.808, N=49), ASD (M=3.56, SD=.001, N=35), and multiple disabilities (M=3.90, SD=0.918, N=20). Higher mean scores have been shown among parents of children with sensory impairments and developmental delay respectively. On the contrary, the results have shown the least mean scores for parents of children with ASD. One-way ANOVA statistical test was conducted to find out if the differences among the five groups were statistically significant. The results in table 31 have shown that there were no significant statistical differences among the special educational needs mean scores (F=1.869, *p*>0.05).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	17.956	3	5.985	9.057	0.000
Within groups	118.290	179	0.660		
Total	136.247	182			

Table 32: One-Way ANOVA for the Group Difference on Place of ECI Services

The results for parents' perspectives towards ECI policies with respect to the place of ECI services were as follows: for Dubai (M=4.25, SD=0.999, N=78), Ajman (M=3.73, SD=0.719, N=21), Ras Al Khaimah (M=3.56, SD=0.655, N=69) and Fujairah (M=3.83, SD=0.361, N=15). Higher mean scores have been defined among parents who served in Dubai followed by Fujairah. On the contrary, the results have shown the least mean scores for parents who served in Ras Al Khaimah. Meanwhile, it is worth noting that all parent mean scores are more than 3.50 in all places of ECI services.

A one-way ANOVA statistical test was also performed to find out if the difference between the four groups is statistically significant. Table 32 indicates that there were significant statistical differences among the mean scores of places of ECI services (F=9.057, $p<0.05$). The findings of the Scheffe post hoc test describe a significant difference between parents who served in Dubai and Ras Al Khaimah ($p=0.000$).

4.3.2.3 Transition Journey

This section discusses the results of the data collected from the participants' responses to the third domain in the cross-sectional questionnaire. This domain contains the seven statements related to the transition journey domain. In the beginning, a descriptive statistical analysis is illustrated for each statement in this domain, and demographic variables are presented using mean, standard deviation and standard error. Secondly, inferential statistics are used, such as an independent-sample t-test, to determine whether there is a significant statistical difference in mean between participants according to parents' gender and children's gender. Furthermore, an ANOVA test is used to determine whether any statistically significant differences in means exist according to the parents' educational level, children's educational status, type of special educational needs, and place of services. The Scheffe post hoc test is performed to study the reasons behind the significance of the results obtained from the ANOVA test.

Table 33 presents the mean scores "M" and standard deviations "SD" for the seven statements pertinent to the transition journey by providing the participants with five options for reporting their perspectives towards transition trajectory and the children's journey from early intervention to other educational environments. The 5-point Likert scale options were: 1=Very poor, 2=Poor, 3=Don't know, 4=Significant, 5=Extremely significant.

N	Transition Journey Statements	M	SD
13	The clarity of children's transition pathway after the early intervention stage.	3.16	1.27
14	The clarity of children's transition plans from early intervention to next educational settings.	3.16	1.26

15	The ease of children's transition to inclusive environments after early intervention.	3.18	1.26
16	The support from early intervention team for children and parents to accomplish a successful transition after early intervention.	3.16	1.23
17	The team support to children in inclusive settings, to move them to appropriate settings after the early intervention stage.	3.18	1.26
18	The compatibility of educational settings "to which children are transited after the early intervention stage" with their educational needs.	3.18	1.26
19	The coordination between entities to ensure successful transfer of children after the early intervention stage.	3.17	1.27
	Total	3.17	1.25

Table 33: Means and Standard Deviations for Transition Journey (N=183)

Table 33 indicates the analysis of data collected from participating parents, pertinent to the seven statements in the transition journey domain. The analysis presents the means and standard deviations of each statement as well as the total of each domain. The researcher expected that averages below 2.50 would indicate an unclear transition journey, whereas means between 2.50 to 3.49 indicate a moderately smooth journey, and averages of 3.50 and higher indicate clarity/a smooth transition journey.

The above table revealed that all participated parents agreed that the transition journey in ECI was below the smooth level (M=2.50–3.49). The means are very close to each other in all statements, ranging between 3.16 and 3.18, and the standard deviation ranges between 1.23 and 1.27, which means that parents' responses indicate that they view the transition journey as moderately smooth in the seven statements and the total average of this domain.

Statements (15, 17, and 18) have the highest average (M=3.18). Accordingly, parents somewhat agree that educational environments are moderately compatible with children with SEND. They viewed the transition to inclusive environments after early intervention as moderately smooth. Meanwhile, parents see that the team somewhat supports moving children in inclusive environments to appropriate settings after the early intervention stage.

Demographic Variables	**M**	**SD**	**SEM**

171

Parent's Gender	Male (n=26, 14.2%)	3.97	1.056	0.207
	Female (n=157, 85.8%)	3.04	1.236	0.098
Parent's Educational Level	Literacy and below (n=51, 27.9%)	3.65	1.133	0.158
	High school (n=61, 33.3%)	3.64	1.124	0.143
	Bachelor's degree and above (n=71, 38.8%)	2.42	1.079	0.128
Child's Gender	Male (n=99, 54.1%)	3.15	1.239	0.124
	Female (n=84, 45.9%)	3.20	1.277	0.139
Child's Educational Status	Currently in early intervention (n=87, 47.6%)	3.69	1.175	0.126
	Transitioned to inclusive education (n=39, 21.3%)	2.05	0.825	0.132
	Transitioned to a disability centre (n=57, 31.1%)	3.14	1.106	0.146
Type of Educational Needs	Developmental delay (n=66, 36.1%)	3.63	1.280	0.157
	Sensory impairments (n=13, 7.1%)	3.53	1.450	0.402
	Intellectual disability (n=49, 26.8%)	2.86	1.148	0.164
	Autism spectrum disorder (n=35, 19.1%)	2.74	1.086	0.183
	Multiple disability (n=20, 10.9%)	2.93	1.088	0.243
Place of ECI Services	Dubai (n=78, 42.6%)	3.33	1.370	0.155
	Ajman (n=21, 11.5%)	2.40	1.021	0.222
	Ras Al Khaimah (n=69, 37.7%)	3.40	1.135	0.136
	Fujairah (n=15, 8.2%)	2.36	0.610	0.157

**Table 34: Parents' Perspectives towards Transition Journey
by Demographic Variables (N=183)**

Table 34 demonstrated descriptive statistics on the parents' perspective towards the transition journey by the six selected demographic variables. Standard deviations range between 0.610 and 1.450, which are very close to the mean, thus supporting the comparison among parents. The SEM ranges between 0.098 and 0.402. This denotes that mean scores can be compared, and the difference in the mean can be studied further.

In respect to the parent's gender, table 34 has shown that the mean score was higher among fathers (M=3.97) as compared to mothers (M=3.04). In regards to participants' educational level, it was concluded from the mean score that parents with basic literacy skills and those

possessing a high school degree have almost the same higher averages (M=3.65) and (M=3.64) respectively. Meanwhile, parents possessing Bachelor's degree and above have shown a lower mean score (M=2.42).

With respect to a child's gender, the quality of both parent groups who have boys and who have girls was scored at a moderate level in terms of their perspectives towards the transition journey. The mean score of parents with male children was (M=3.15), while parents with female children was (M=3.20).

In regards to a child's educational status, it was concluded from the mean score that parents of children who transitioned to inclusive education shared low perspectives towards the transition journey (M=2.05). This was in comparison with parents of children who are still in early intervention centres (M=3.69), together with parents of children who transitioned to a disability centre (M=3.14).

Moreover, with respect to the children's types of special educational needs, the results of the mean scores were between 2.74 and 3.63. Parents of children with developmental delay (M=3.63) and with sensory impairments (M=3.53) exceeded the mean (3.50), which indicates a smooth transition trajectory. On the contrary, parents of children with ASD showed the lowest mean score (M=2.74).

Finally, in regards to participants' locations of ECI services, parents who were served in Ras Al Khaimah shared higher perspectives towards the transition journey (M=3.40) compared with parents who were served in Ajman (M=2.40) and Fujairah (M=2.36).

Variable	df	T	P	Mean Diff	SD Diff
Parent's gender (mothers=157, fathers=26)	181	-3.649	0.000	-0.937	0.256
Children's gender	181	-0.258	0.796	-0.048	0.186

(boys=99, girls=84)					

Table 35: T-Test for the Group Difference on Parent's Gender and Child's Gender

Table 35, illustrates parents' perspectives towards the transition journey with respect to their gender and their children's gender. Findings have shown that there were significant differences found between participants' gender with regards to their perspectives towards the transition journey (t=-3.649, $p<0.05$). On the contrary, in regards to children's gender, the t-test indicated that there were no statistical differences between the two groups (t=-0.258, $p>0.05$). As results revealed that fathers were more positive in their views towards the transition journey (M=3.97), the transition trajectory was clear and smooth for them when compared to mothers who have moderate views (M=3.04).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	64.574	2	32.287	26.228	0.000
Within groups	221.582	180	1.231		
Total	286.157	182			

Table 36: One-Way ANOVA for the Group Difference on Parents' Educational Level

In this section, the results of parents' perspectives on the transition journey with respect to educational level are shown for literacy or below (M=3.65, SD=1.133, N=51), high school (M=3.64, SD=1.124, N=61), and bachelor's degree or above (M=2.42, SD=1.079, N=71). Higher mean scores were shown among parents with basic reading and writing skills as well as parents with high school degrees. On the contrary, the results showed the lowest mean scores for parents holding a bachelor's degree or higher.

The additional statistical test was conducted using one-way ANOVA to find out whether the differences among the three groups were statistically significant. The table 36 above has shown that there were significant statistical differences between parents' educational level mean scores (F=26.228, $p<0.05$). The Scheffe post hoc test showed a significant difference between parents with basic literacy skills and parents with a bachelor's or above (p=0.000). Further, the results showed a statistically significant difference between parents with high school degrees and parents with a bachelor's degree or above (p=0.000).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	72.850	2	36.425	30.737	0.000
Within groups	213.306	180	1.185		
Total	286.157	182			

Table 37: One-Way ANOVA for the Group Difference on Child's Educational Status

In this section, the results for parents' perspectives on the transition journey with respect to their children's educational status are shown for early childhood intervention centres (M=3.69, SD=1.175, N=87), inclusion (M=2.05, SD=0.825, N=39), and disability centres (M=3.14, SD=1.106, N=57). Higher mean scores have been shown among parents of children in ECI centres, followed by parents of children who have been transitioned to disability centres. On the contrary, the results have shown the least mean scores for parents of children who have been transitioned to inclusive settings.

Table 37 has shown the findings of the one-way ANOVA statistical test, which was conducted to find out if the difference among the three groups is statistically significant. The results have shown that there were significant statistical differences between children's educational status mean scores (F=30.737, $p<0.05$). The findings of the Scheffe post hoc test indicate a significant difference between parents of children in ECI and parents of included children ($p=0.000$) in addition to significant differences between parents of children in ECI and children in disability centres ($p=0.014$). Further, the results suggest statistically significant differences between parents of children in inclusion and disability centres ($p=0.000$).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	28.317	4	7.079	4.887	0.001
Within groups	257.839	178	1.448		
Total	286.157	182			

Table 38: One-Way ANOVA for the Group Difference on Type of SEND

The results for parents' perspectives towards the transition journey with regard to their children's special educational needs have been shown for developmental delay (M=3.63, SD=1.280, N=66), sensory impairment (M=3.53, SD=1.450, N=13), intellectual disability (M=2.86, SD=1.148, N=49), ASD (M=2.74, SD=1.086, N=35), and multiple disabilities

(M=2.93, SD=1.088, N=20). Higher mean scores have been shown among parents of children with developmental delay and with sensory impairments. On the contrary, the results have shown the least mean scores for parents of children with ASD.

Table 38 has shown the ANOVA findings type of special educational needs. The results have illustrated a statistically significant difference between the mean scores on the five types of SEND (F=4.887, $p<0.05$). The findings of the Scheffe post hoc test indicate significant differences between parents of children with developmental delay and intellectual disabilities (p=0.022) in addition to statistically significant differences between parents of children with developmental delay and ASD (p=0.016).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	27.820	3	9.273	6.425	0.000
Within groups	258.336	179	1.443		
Total	286.157	182			

Table 39: One-Way ANOVA for the Group Difference on Place of ECI Services

The results for parents' perspectives towards transition journey in regards to the place of ECI services have shown for Dubai (M=3.33, SD=1.370, N=78), Ajman (M=2.40, SD=1.021, N=21), Ras Al Khaimah (M=3.40, SD=1.135, N=69) and Fujairah (M=2.36, SD=0.610, N=15). Higher mean scores have been shown among parents who have been served in Ras Al Khaimah followed by Dubai. On the contrary, the results have shown the least mean scores for parents who have been served in Fujairah and Ajman, respectively.

A one-way ANOVA statistical test was performed to find out if the difference between the four groups is statistically significant. The results in table 39 have shown that there were significant statistical differences between the location of ECI services' mean scores (F=6.425, $p<0.05$). The findings of the Scheffe post hoc test indicate a significant difference between parents in Dubai and Ajman (p=0.023), Dubai and Fujairah (p=0.045), Ajman and Ras Al Khaimah (p=0.013), and Ras Al Khaimah and Fujairah (p=0.028).

4.3.2.4 Environments Surrounding Children

This section discusses the results of the data collected from the participants' responses to the fourth domain in the cross-sectional questionnaire. This domain contains the eight statements related to the environments surrounding the children's domain. In the beginning, a descriptive statistical analysis is illustrated for each statement in this domain, as the demographic variables are presented using the mean, standard deviation, and standard error. Secondly, inferential statistics are used, such as an independent samples t-test, to determine whether there is a significant statistical difference in mean between participants according to the parents' gender and the children's gender. Furthermore, an ANOVA test is used to determine whether any statistically significant difference in means exists according to the parents' educational levels, the child's educational status, the type of special educational needs, and the location of services. The Scheffe post hoc test is conducted to study the reasons behind the significance of the results obtained from the ANOVA test.

The following table 40 presents the mean scores "M" and standard deviations "SD" for the six statements pertinent to environments surrounding children. The statements provide the participants with seven options to report their perspectives towards support provided to children by environments around them. The 5-point Likert scale options were: 1=Very poor support, 2=Poor support, 3=Don't know, 4=Strongly support, 5=Very strongly support.

N	Statements of Environments Surrounding Children	M	SD
20	The educational environment in early intervention supports children's transition to appropriate educational settings later on.	3.08	1.20
21	The support of early intervention team that provides rehabilitation to the children.	3.10	1.20
22	The effectiveness of communication between the early intervention settings and other educational settings such as (kindergartens and inclusive schools)	3.06	1.17
23	The effectiveness of family members' roles towards children transition from early intervention to inclusive settings.	3.08	1.18

24	The effectiveness of public education schools' roles in motivating the admission of SEND children, who are transitioned from early intervention.	3.09	1.19
25	The teachers' support in inclusive environments (kindergartens or schools) when receiving children referred from early intervention.	3.09	1.18
26	The peers support in inclusive settings for children who transited from early intervention stage.	3.09	1.18
27	The support of UAE community's culture to inclusion of children after the transition from early intervention stage.	3.07	1.18
	Total	3.08	1.17

Table 40: Means and Standard Deviations for Environments Surrounding Children (N=183)

Table 40 indicates the analysis of data collected from participating parents, pertinent to the 8 statements in the environments surrounding the children's domain. The analysis presents the Means "M", Standard Deviations "SD" of each statement, and the total of each domain as well. The researcher expected that averages below 2.50 indicate poor support, where means between (2.50 to 3.49) indicate moderate support; however, strong support starts from an average of 3.50 and higher.

The above table 40 has shown the responses revealed by participating parents with respect to environments surrounding children. Findings have shown that all participated parents agreed on the fact that environments support children with SEND moderately. The analysis demonstrates that the means for all statements and the total ranges are between 3.06 and 3.10, and the standard deviation ranges are between 1.17 and 1.20, which means that parents' responses view environments around children with SEND as moderately supporting their educational inclusion after the early intervention stage.

The highest mean score was achieved in statement (21), which declares that the early intervention team, as part of the educational environment surrounding children with SEND, somewhat supports them moving to safely inclusive education settings (M=3.10). However, the lowest mean score was achieved through statement (22), which was related to the communication between the early intervention environment and other educational environments such as kindergartens and inclusive schools (M=3.06).

Demographic variables		M	SD	SEM
Parent's Gender	Male (n=26, 14.2%)	3.98	1.108	0.217
	Female (n=157, 85.8%)	2.94	1.125	0.089
Parent's Educational Level	Literacy and below (n=51, 27.9%)	3.64	0.856	0.119
	High school (n=61, 33.3%)	3.54	1.110	0.142
	Bachelor's degree and above (n=71, 38.8%)	2.29	0.989	0.117
Child's Gender	Male (n=99, 54.1%)	3.09	1.229	0.123
	Female (n=84, 45.9%)	3.08	1.120	0.122
Child's Educational Status	Currently in early intervention (n=87, 47.6%)	3.59	1.091	0.117
	Transitioned to inclusive education (n=39, 21.3%)	2.08	0.702	0.112
	Transitioned to a disability centre (n=57, 31.1%)	2.99	1.105	0.146
Type of Educational Needs	Developmental delay (n=66, 36.1%)	3.50	1.139	0.140
	Sensory impairments (n=13, 7.1%)	3.53	1.323	0.367
	Intellectual disability (n=49, 26.8%)	2.81	1.246	0.178
	Autism spectrum disorder (n=35, 19.1%)	2.66	1.010	0.170
	Multiple disability (n=20, 10.9%)	2.82	0.790	0.176
Place of ECI Services	Dubai (n=78, 42.6%)	2.78	1.247	0.141
	Ajman (n=21, 11.5%)	3.09	0.943	0.205
	Ras Al Khaimah (n=69, 37.7%)	3.38	1.176	0.141
	Fujairah (n=15, 8.2%)	3.26	0.703	0.181

**Table 41: Parents' Perspectives towards Surrounding Environments
by Demographic Variables (N=183)**

Table 41 demonstrated the descriptive statistics on the parents' perspectives towards environments surrounding children by the six selected demographic variables. Standard deviations range between 0.702 and 1.323, which are very close to the mean and thus support the comparison among the parents. The SEM ranges between 0.089 and 0.367. This indicates that mean scores can be compared, and the difference in mean can be studied further.

In regards to parents' gender, table 41 has shown that the mean score was higher among fathers (M=3.98) as compared to mothers (M=2.94). With respect to participants' educational level, it

was concluded from the mean scores that parents holding a bachelor's degree and above have shown the least mean scores (M=2.29) as compared with parents possessing a high school degree (M=3.54) and parents with basic literacy skills and below (M=3.64). Moreover, with respect to a child's gender, the level of both parents' who have boys and who have girls was closely associated with their perspectives towards environments surrounding children. The mean score between the parents' groups who have boys and who have girls was (M=3.09) and (M=3.08), respectively.

Parents' perspectives towards ECI policies were different with respect to the child's educational status. Parents of children still in early intervention (M=3.59) have shown higher mean scores as compared to parents of children transitioned to inclusive settings (M=2.08).

Furthermore, in respect to the children's types of special educational needs, the results of the mean scores were between 2.66 and 3.53. Parents of children with developmental delay and with sensory impairment exceeded the mean (3.50), which indicates a smooth transition trajectory. They rated (M=3.50) and (M=3.53), respectively. On the contrary, parents of children with ASD showed the least mean score (M=2.66).

Finally, in regards to participants' place of ECI services, parents who have been served in Dubai shared lower perspectives towards environments surrounding children (M=2.78) when compared with parents in other facilities. On the contrary, higher mean scores were shown for the parents who have been served in Ras Al Khaimah (M=3.38) then Fujairah (M=3.26).

Variable	DF	T	P	Mean Diff	SD Diff
Parent's gender (mothers=157, fathers=26)	181	-4.380	0.000	-1.041	0.237
Children's gender (boys=99, girls=84)	181	0.037	0.970	0.006	0.175

Table 42: T-Test Table for the Group Difference on Parents' Gender and Children's Gender

The group difference among parents' perspectives towards environments surrounding children in regards to their gender and their children's gender was demonstrated using a *t*-test (table 42). The results have shown a statistically insignificant difference between parents' responses according to their children's gender (t=0.037, *p*>.05). A small variance between the mean

values further indicated an insignificant difference between both groups: (M=3.09) for males and (M=3.08) for females. However, the findings of the *t*-test have shown that there was a statistically significant difference between the two groups with respect to the parent's gender (t=-4.380, *p*<0.05). It was concluded from the variance between the mean values that fathers (M=3.98), scored higher than mothers (M=2.94). They viewed environments surrounding their children as strongly supporting them to ensure a smooth transition to inclusive environments.

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	73.198	2	36.599	36.747	0.000
Within groups	179.271	180	0.995		
Total	252.470	182			

Table 43: One-Way ANOVA for the Group Difference on Parent's Educational Level

The results for parents' perspectives towards environments surrounding children, with respect to educational level, have been shown for literacy and below (M=3.64, SD=0.856, n=51), high school (M=3.54, SD=1.110, n=61), and bachelor's degree and above (M=2.29, SD=0.989, n=71). Higher mean scores have been shown among parents with basic literacy skills and parents with a high school degree. On the contrary, the results have shown the lowest mean scores for parents holding bachelor's degrees and above.

The additional statistical test was conducted using the one-way ANOVA to find out if the difference among the three groups is statistically significant. The results in table 43 have shown that there were significant statistical differences between parents' educational level mean scores (F=36.747, *p*<0.05). The findings of the Scheffe post hoc test indicate significant differences between parents with a bachelor's and above and parents with literacy skills (*p*=0.000). Further, the results have shown a statistically significant difference between parents with a bachelor's and above and parents with a high school degree (*p*=0.000).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	62.862	2	31.431	29.838	0.000

Within groups	189.607	180	1.053		
Total	252.470	182			

Table 44: One-Way ANOVA for the Group Difference on Child's Educational Status

The results for parents' views towards environments surrounding children with respect to children's educational status have been shown for early childhood intervention centre (M=3.59, SD=1.091, N=87), inclusion (M=2.08, SD=0.702, N=39), and disability centre (M=2.99, SD=1.105, N=57). Higher mean scores have been shown among parents of children in ECI centres. On the contrary, the results have shown the least mean scores for parents of children transitioned to inclusive education.

The one-way ANOVA statistical test was conducted to find out if the difference among the three groups is statistically significant. Table 44 has shown that there were significant statistical differences between children's educational status mean scores (F=29.838, $p<0.05$). The findings of the Scheffe post hoc test indicate a significant difference between parents of children in ECI and parents of included children ($p=0.000$), children in ECI, and disability centres ($p=0.003$). Further, statistically significant differences found between parents of children in inclusion and disability centres ($p=0.000$).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	25.824	4	6.456	5.070	0.001
Within groups	226.645	178	1.273		
Total	252.470	182			

Table 45: One-Way ANOVA for the Group Difference on Type of SEND

The results for parents' views towards environments surrounding children have shown for children with developmental delay (M=3.50, SD=1.139, N=66), sensory impairments (M=3.53, SD=1.323, N=13), intellectual disabilities (M=2.81, SD=1.246, N=49), children with ASD (M=2.66, SD=1.010, N=35), and multiple disabilities (M=2.82, SD=0.790, N=20). Higher mean scores have been shown among parents of children with sensory impairments and children with developmental delay respectively. On the contrary, the results have shown the least mean scores for parents of children with ASD.

A one-way ANOVA statistical test was conducted to find out if the differences among the three groups were statistically significant. The results in table 45 have shown that there were significant statistical differences between types of special educational needs mean scores (F=5.070, $p<0.05$). The findings of the Scheffe post hoc test indicates a significant difference between parents of children with developmental delay and intellectual disabilities ($p=0.034$). Moreover, a significant difference is found between parents of children with developmental delay and ASD ($p=0.014$).

Variable	Sum of Squares	df	Mean Square	F	P
Between groups	13.885	3	4.628	3.472	0.017
Within groups	238.584	179	1.332		
Total	252.470	182			

Table 46: One-Way ANOVA for the Group Difference on Place of ECI Services

The results for parents' perspectives towards environments surrounding children in regards to the place of ECI services have shown for Dubai (M=2.78, SD=1.247, N=78), Ajman (M=3.09, SD=0.943, N=21), Ras Al Khaimah (M=3.38, SD=1.176, N=69) and Fujairah (M=3.26, SD=0.703, N=15). Higher mean scores have been shown among parents in Ras Al Khaimah, followed by Fujairah. However, the results have shown the least mean scores for parents have been served in Dubai.

The additional statistical test was conducted using one-way ANOVA to find out if the difference between the four groups is statistically significant. The results in table 46 have shown that there were significant statistical differences between the place of ECI services' mean scores (F=3.472, $p<0.05$). The findings of the Scheffe post hoc test have shown a significant difference between parents in Dubai and Ras Al Khaimah ($p=0.021$).

4.3.2.5 Summary of Survey Close-Ended Questions

Based on the participants' responses to the closed-ended survey questions, findings are summarised as follows:

- The demographic profile of the study population regarding the demographic variables shows:

  - Parent's Gender (Male 14.2%, Female, 85.8%).
  - Parent's Educational Level (Literacy and below 27.9%, High school 33.3%, Bachelor's degree and above 38.8%).
  - Child's Gender (Male 54.1%, Female 45.9%).
  - Child's Educational Status (In early intervention centre 47.6%, Transitioned to inclusive education 21.3%, Transitioned to a disability centre 31.1%).
  - Type of Educational Needs (Developmental delay 36.1%, Sensory impairments 7.1%, Intellectual disability 26.8%, ASD 19.1%, Multiple disability 10.9%).
  - Place of ECI Services (Dubai 42.6%, Ajman 11.5%, Ras Al Khaimah 37.7%, Fujairah 8.2%).

- Parents' perspectives towards their roles in transition:

  - No statistical differences were found between parents in regards to the child's gender.
  - Significant differences in favour of fathers were found between participants' genders.
  - Significant differences in favour of parents with lower educational levels were found between parents with literacy skills and below, a high school degree, and a bachelor's degree and above.
  - Significant differences were found between parents of children in ECI, POD centres and parents of included children in favour to parents of children in ECI and in POD centres.
  - Significant statistical differences were found between parents of children with developmental delay and parents of children with ASD in favour to parents of children with developmental delay.
  - Significant statistical differences were found between parents have been served in Ajman and Ras Al Khaimah in favour to parents have been served in Ras Al Khaimah.

- Parents' perspectives towards ECI policies:

- No significant statistical differences were found between parents' responses according to their children's gender.
- Statistically significant differences were found with respect to parent's gender in favour to fathers.
- Significant statistical differences in favour of parents with lower educational levels were found between parents with literacy skills and below, high school degrees, and bachelor's degrees and above.
- Statistically significant differences were found between parents of children in ECI, parents of children transitioned to POD centres and parents of children transitioned to inclusive education in favour to parents of children in ECI and in POD centres.
- No significant statistical differences were found between special educational needs mean scores.
- Significant statistical differences were found between parents who have been served in Dubai and Ras Al Khaimah in favour to parents who have been served in Dubai.

- Parents' perspectives towards the transition journey:

  - Statistically significant differences were found between two groups with respect to parents' gender in favour to fathers.
  - No significant statistical differences were found between parents' responses according to their children's gender.
  - Significant differences were found between parents with literacy skills and below, parents with a high school degree, and parents with a bachelor's and above, in favour to parents with lower educational levels.
  - Significant differences were found between parents of children in ECI and parents of included children in favour to parents of children in ECI, in addition to statistically significant differences found between parents of children transitioned to inclusive settings and to disability centres in favour to parents of children transitioned to disability centres.
  - Significant differences were found between parents of children with developmental delay, intellectual disabilities, and ASD in favour to parents of children with developmental delay.

185

- Significant differences were found between parents in Dubai, Ajman, and Fujairah in favour to parents in Dubai, in addition to significant differences between parents in Ras Al Khaimah, Ajman, and Fujairah in favour to parents in Ras Al Khaimah.

  ▪ Parents' perspectives towards environments surrounding children:

    - Statistically significant differences were found between two groups with respect to parents' gender in favour to fathers.
    - No significant statistical differences were found between parents' responses according to their children's gender.
    - Significant differences were found between parents with literacy skills and below, high school degree and parents with bachelor's and above in favour to parents with lower educational levels.
    - Significant differences between were found parents of children in ECI, and parents of children have been transitioned to inclusion or to POD centres in favour to parents of children in ECI. In addition to significant difference between parents of children transitioned to inclusion and to POD centres in favour to parents of children transitioned to POD centres.
    - Significant difference between parents of children with intellectual disability, ASD and developmental delay in favour of children with developmental delay.
    - Significant difference between parents in Dubai and Ras Al Khaimah in favour to parents in Ras Al Khaimah.

4.4 Integrated Results

Based on the exploratory sequential design of the study, data was collected in the first part through semi-structured interviews, and document analyses, in addition to cross-sectional survey in the second part of the study. According to Teddlie and Tashakkori (2009), mixed-methods research enables the researcher to gather in-depth data using one method to investigate and complement the findings by using another method that, at the end, improves the research in comparison to a single method. In ECI research, Rosenkoetter et al. (2009) recommended in a wide review study in transition of children with SEND that:

> [a]uthors should purposefully attempt to triangulate their findings with other sources and types of evidence to help clarify the threads of research on early childhood transition and propose meaningful next steps in research, policy, and practice. (p. 35)

Triangulation and complementarity are two rationales support-mixing qualitative and quantitative data in the same study, as the results from different methods corroborated in this research investigate parents' perspectives. Hence, integrating quantitative and qualitative data results in a thorough exploration of the phenomena under study. For instance, the data obtained from the interviews helped in developing the cross-sectional survey to collect more data about parents' perspectives on ECI towards the transition process, in which more information collected from a large number of participants. Inferential analysis using the independent sample t-test was conducted to compare fathers' and mothers' perspectives towards transition as well as the gender of their children. The t-test found that there is a statistically significant difference between parents in regards to their gender. However, no significant differences were found in regard to children's gender. Furthermore, ANOVA test followed by Scheffe post hoc test were conducted to find out whether the differences among parents' responses are statistically significant.

The main findings indicate that the difference in means among parents regarding their roles, perceptions towards transition, and the environment surrounding their children are statistically significant; however, insignificant differences were found regarding their perspectives towards early education and intervention policies in the UAE. Both the interviews and the questionnaire indicate parents' roles below the effectiveness level and parents' perspectives towards transition below the smooth level. However, both qualitative and quantitative results revealed that participants view early educational policies as supportive of children and their parents. Accordingly, several meanings can be discovered and extracted from these findings when examining qualitative and quantitative collected data. The fundamental results have been summarised below in tables 47, 48, 49, and 50.

Research Question-1: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

Qualitative methods	Quantitative Methods

Semi-structured Interviews	Open-ended Questions	Survey Closed-Ended Questions
• Participants felt that they had "no role" in regards to transition decision, were not provided with necessary information or not being allowed to take part in activities directly related to their children education. • Participants performed active roles in four areas (attending meetings, following up at home, support their children and communication) • Participants described their roles as ambiguous in regards to (misunderstanding their roles, the need for information, offering rehabilitation and finding better placement) • There are many other roles that parents should play towards their children to support them in transition stage.	• The transition process from early childhood intervention to the next stages was not explained to the parents by the ECI programme. • The ECI programme takes the transition decision on behalf of parents.	• Participated parents agreed on the fact that their roles did not reach the effective roles, but ranged within moderate roles. • The analysis demonstrates that parents' roles means ranges between 2.97 and 3.02, which means that parents' responses are almost within the moderate roles level in the six statements and the total average of this domain. • The highest mean scores were achieved through statements that related to parents' participation in establishing their children's goals, and parents' roles towards their children, which lead to successful transition (M=3.02). • The lowest mean scores were achieved in regards to the clarity of parents' roles in early intervention stage (M=2.98), and parents' participation in decisions that affect their children educational future (M=2.97).

Table 47: Integrated Results of the Study - Research Question 1

188

Research Question-2: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

Qualitative methods		Quantitative Methods
Semi-structured Interviews	**Document analysis**	**Survey Closed-Ended**
• Participated parents believe that the community did not adequately support their children, which makes the transition process stressful. • Transitioned children to inclusive environments were suffered from huge obstacles. • There is no clear coordination or collaboration between related entities to transition children to inclusive settings. • Teachers and other staff in regular education settings did not welcome child with SEND or	• Education policies in the UAE support the right of children with SEND to learn in inclusive education system. • Policies support the facilitation of children's learning in natural environments. • Early educational policies stress on parents' empowerment as fundamental part in social and natural environments surrounding the child.	• All participated parents agreed on the fact that ECI policies are strongly support children inclusion and empower their parents. • The means of policies domain ranges between (3.86 and 3.92) and, which means that parents' responses are almost within the strongly support level in the six statements and the total average of this domain. • The highest mean scores were achieved where ECI policies encourage services provision in natural environments (M=3.92), and support children's transition to inclusive learning environments (M=3.92). • All participated parents agreed on the fact that environments somewhat support children with SEND. • The means for all statements on the environment domain are between 3.06 and 3.10, which means environments around children with

Qualitative methods		Quantitative Methods
		SEND moderately support their inclusion.
have the knowledge in teaching them.		• The highest mean score in the environments domain was related to the ECI team support (M=3.10).
		• The lowest mean score in the environments domain was related to the communication between the ECI and other educational environments such as kindergartens and inclusive schools (M=3.06).

Table 48: Integrated Results of the Study - Research Question 2

Research Question-3: How do parents of children with SEND perceive the transition process in early childhood intervention?

Qualitative methods		Quantitative Methods
Semi structured Interviews	**Open-ended questions**	**Survey** **Closed-Ended**
• Transition was smooth process when children had received services at early intervention premises, and then when they moved to disability centres after early intervention. • Transition was a stressful stage due to lack of support from the	• 52.6% of responded parents suggest that the appropriate transition place for their children after ECI is a disability centre. • 56.8% of responded parents suggest that suitable age of transition from early intervention is from 5-6 years old.	• All participated parents agreed on the fact that the clarity and smoothness of the transition journey in ECI was in the moderate level (means between 2.50 to 3.49). • The means are very close to each other in all statements, they range between (3.16 and 3.18),

		which means that parents' responses view the transition journey as below the smoothness level in the seven statements and the total average of this domain.
community in general, as well as from teachers and other staff in regular education schools.	• Although some participants wished better future for their children, others linked the future of their children with the quality of services provided to them, however, the third group described the future of their children as ambiguous.	
• Transition was blurring and not sufficiently clear when it comes to lack of collaboration, unclear transition pathways, lack of information and children's poor skills.		• Transition to inclusive environments after early intervention was below the smoothness level.
		• Public schools staff support children transition, but not significantly.

Table 49: Integrated Results of the Study - Research Question 3

Research Question-4: Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?

Qualitative methods	Quantitative Methods
Semi-structured Interviews	**Closed-Ended Survey**
• Participants whose children have been transitioned to inclusive education found transition was stressful, comparing with transition to disability centres.	• Statistically significant differences were found among participants pertinent to gender in favour to fathers.
	• No significant statistical differences were found between parents' responses according to their children's gender.
• Parents of children with sensory disabilities found described transition as easy process, comparing with parents of	• Significant differences were found among participants pertinent to educational level in favour to parents with lower educational levels.

children with other disabilities such as ASD.	• Significant differences were found between parents of children in ECI, disability centres and inclusive education, in favour to parents of children in disability centres and ECI centres. • Significant differences were found between parents of children with developmental delay, intellectual disability and ASD in favour to parents of children with developmental delay. • Significant differences were found between parents pertinent to place of services in favour to parents in Dubai and Ras Al Khaimah.

Table 50: Integrated Results of the Study - Research Question 4

An analysis of related documents served to support both the quantitative and qualitative findings of the study. Six education and early intervention policies are found at the federal government level. One of them is a general national policy to empower people of determination in the country, while other analysed policies covered the fundamental required components of early intervention services provided by the MOCD, in addition to the transition services and inclusion procedures mentioned in the MOE policies. At the Dubai Emirate level, one of the analysed policies includes in-depth details regarding inclusion, and the other is more general in health-inclusive services in the early years.

In summary, the analysis chapter demonstrated the research findings. The analysis of the qualitative and quantitative data was presented in five sections: analysis of interviews, document analysis, analysis of the open-ended survey questions, statistical analysis, and finally, the integrated results. The next chapter attempts to discuss the study findings as related to the proposed theoretical framework and previous studies.

CHAPTER FIVE: DISCUSSION AND CONCLUSION

The aim of this study is to investigate parents' perspectives and roles in the transition process from early childhood intervention to other educational contexts in the UAE. The study adopted

a mixed-method approach with a sequential exploratory design wherein semi-structured, open-ended interviews and document analysis are used in the qualitative phase, followed by a cross-sectional survey in the quantitative phase to answer the research questions.

This chapter organises the discussion of the findings to address the results of the four research questions, in addition to a summary of the findings based on each research question. It also includes the implications of the study, the original contribution, and recommendations based on the findings, as well as recommendations for further study.

5.1 Research Question One

This section discusses the responses to the first research question: How do parents view their roles in ECI to transition their children to disability centres or inclusive settings?

The results obtained from interviews indicate that parents view their roles during the ECI transition process within four main themes: "*No role, active role, ambiguous role, and roles parents should do*". Parents expressed more than one view at the same time; they declared that they have no clear role in some areas of transition; however, they feel that they exercise active roles in some areas of transition. Meanwhile, the parents' roles towards their children were still ambiguous and unclear for them, where the parents suggested that they should play other, more effective roles to support their children for smooth transitions after early intervention. These findings are in line with the results published in the literature (e.g., Lee 2015; Kruse 2012; Bowen 2016; Carroll and Sixsmith 2016). These fundamental perspectives are considered to be the main views of parents towards their roles in early intervention. To respond to the first research question, this study also discusses the participants' responses to the questionnaire; although the results demonstrated that parents' roles in ECI did not reach the effective roles. The discussion covered the main findings of parents' roles and related them to the theoretical framework and the previous literature in order to compare them and identify similarities and differences between the current study and previous studies in addition to the researcher's interpretations. To conclude the main outcome of this discussion, a summary is highlighted at the end of this section.

5.1.1 Parents have no Meaningful Role in the Transition Process

5.1.1.1 Parents don't take the transition decisions

Bowen (2016) emphasised that ECI professionals should provide knowledge and guidance to families of children with special needs to help them make suitable decisions regarding their children's education. Parents need to be responsible regarding communication and language choices used with their children and other cultural aspects.

According to the responses of interviewed parents, they felt that they were not involved in transition decisions and the appropriate educational environments for their children in the next stage, as the early intervention programme used to make such important decisions on behalf of them. Those responses were collected through the semi-structured interviews with the primary focus on why and how parents take part in transition decisions.

Despite these feelings expressed openly by parents towards not participating in transition decisions, some of the parents believed that ECI professionals are better able to make such decisions in part because they know the children's abilities better than the parents. Therefore, they agree with the idea of taking transition decisions from qualified professionals in the ECI programme who are able to support children towards appropriate transitional pathways after the early intervention stage.

This concern was articulated by parents who participated in the open-ended questions and agreed that the ECI programme makes the transition decision on behalf of them. Furthermore, the results of the survey's closed-ended questions showed that parents agreed on the fact that their roles did not reach the effective roles, but ranged within moderate roles. Meanwhile, the lowest mean scores were achieved in parents' participation in decisions affecting their children's educational future (M=2.97).

This is reinforced by Lee (2015), who declared that the parents had little control in making any real decisions; instead, the staff made these decisions and informed the parents. The views expressed by Kruse (2012) about the lack of placement options given to parents are similar. Hanson et al. (2000) also pointed out that parents were given limited or no choices at all regarding the new educational settings after early intervention as the professionals mainly made the choice of transition.

The provision of rehabilitation services for POD and ECI federal centres are free of charge for local people in the UAE. The government is committed to making every effort to improve these services continuously. So, parents trust the capabilities of these centres to support their children

in safe settings and make the right decisions for the children. On the other hand, some parents expressed fear and hesitation about making decisions that might not be favourable for their children's educational futures, considering various challenges children with SEND usually face in public schools. Therefore, parents somewhat prefer to rely on specialists' decisions during the critical transition stage; this reassures parents about the decisions made even if their children were transitioned to POD centres. This result makes it important to enable parents to participate in making appropriate decisions for the future of their children based on comprehensive knowledge about the available options as well as the right to inclusion. Pang (2010) recommended that ECI programmes support families to determine what works best for their children in different stages of the process, particularly with regards to placement and transition plans.

5.1.1.2 Parents are not allowed to join educational activities.

Moreover, the interviewees in this study revealed that they are not allowed to exercise specific roles related to their children's assessments in the transition stage, to attend interviews, or to observe their children in educational classes. These findings are inconsistent with the early intervention policies in the country, which give parents broader roles and treat them as partners in the long-term process even after the transition from early intervention. For instance, the ECI standards require the parents to attend the assessment session and sign off on the assessment report. Further, parents are encouraged to attend therapy sessions to learn new skills that can be applied to their children at home and other natural environments (Al Khatib 2016; MOCD 2019b).

This is in line with Foster's (2013) study, which finds that family involvement in the transition process is in lower levels, particularly in individualised activities provided for their children. Parents' participation in education and rehabilitation activities is imperative for the progress of their children and essential for the transition. This would help parents make the appropriate transition decision later and be active members in the implementation of the transition plan (Kang 2010; Peters 2010).

5.1.1.3 Parents are not informed about their roles during the transition.

Five of the interviewed parents shared their personal experiences stating that they weren't informed of their roles during the transition process, so they didn't know what to do to make

the transition work. Despite the fact that parents played many roles towards their children during the transition, these roles were mostly based on individual initiatives and not formally assigned to them. The same results are found through the survey's open-ended questions, where parents stated that the transition process was not explained to them by the ECI programme.

The failure to assign parental roles in the transition phase, and not informing parents formally with these roles, make parents dependent on the early intervention programme in services provision or try to find new roles to play based on their personal discretion. An example of these roles from the participants is offering a nanny for child care at the centre.

The ECI standards have explained the family roles in more detail in early intervention, including their roles in the transition plan, such as following up on the objectives at home (Al Khatib 2016). However, it seems that these roles still need to be explained to parents in order to perform them effectively. Pang (2010) confirmed the need for family training about their roles in the transition process. Earlier, Dunst (2002) suggested following family-centred practices, as it opens the opportunity for parents and other family members to play more specific and effective roles, as well as actively engage in actions, suitable choices, and decisions.

5.1.2 Parents Play an Active Role in Certain Areas of Transition

Rosenkoetter et al. (2009) pointed out that parents feel that they play effective roles in the transition process when they have been given a chance to participate in more school activities. From participants' responses, it was concluded that the majority of interviewees had the opportunity to attend meetings to discuss issues related to their children's education and express their opinions with early-intervention professionals. However, as discussed earlier, parents were not allowed to play roles related to assessment, interviews, or observations. In practice, parents of children in classes have a formal collective meeting with professionals each semester, which means they have three meetings a year. This is consistent with the Raspa et al. (2010) study about the family outcomes in ECI, where parents rated higher on the participation in meetings. This situation was also documented by Ahtola et al. (2011), who indicated that jointly meetings were found helpful by parents and professionals.

However, findings from Villeneuve et al. (2013) disclosed that parents faced difficulties in attending frequent meetings with teachers to prepare for the transition process. Therefore, it is vital to concentrate on convenient times for families when organising meetings to ensure

transition tasks have been completed. To do so, Hanson et al. (2000) suggest that preparation meetings for transition need to start early. This will help parents get to know the new system and makes the transition process smoother (Carroll and Sixsmith 2016).

The further analysis emphasises that the interviewed parents performed the role of following-up the transition plans at home based on the instructions they receive from the professionals. Parents usually were required to train their children at home and report any progress in their various skills.

Findings also revealed that the parents support their children and encourage them to develop their abilities towards independence; although this role is not mentioned in educational plans, it is a natural, spontaneous response from mothers to their children's needs. It was concluded from the interviewees that parents played an active role in using various channels of communication with the staff to support their children's transition to appropriate educational settings. They considered reaching out with educators as part of their role, even though the educators hadn't started communicating with them.

It is worth noting that the roles that parents reported they had exercised effectively are those associated with practices outside the ECI premises, such as following up at home and promoting, supporting, and encouraging their children in natural settings. Or sometimes they are roles parents performed in which they were motivated internally by them but not formally documented in their children's plans or meetings, such as the initiation to communicate with early intervention staff. The findings of this study are in agreement with the findings of Villeneuve et al. (2013), who noted that parents had to undertake the follow-up procedures related to transition most of the time. So they usually start the communication and follow up with the staff.

In other words, although parents declared that they performed active roles during the transition, it is obvious that these roles are considered, according to Foster (2013), as low-intensity transition practices for its minimum level of involvement in services, but not high-intensity transition practices that require significant involvement from parents and other service providers. Therefore, more attention should be focused on high-intensity parents' roles related to the children's educational future and transition pathways.

5.1.3 Ambiguous Roles

In a recent study about the transition to school for children who are deaf or hard of hearing, Brown (2016) stressed the importance of understanding parents' needs, goals, concerns, and roles as fundamental elements of successful collaboration with families.

This study reveals that parents were confused about the roles assigned to them with regards to moving their children to the next stage after early intervention. Interviewees pointed out that they misunderstood their roles before and after referring their children to the next educational settings, whether these settings were inclusive or special education. For instance, some parents were asked to take their children for assessment, without explaining to them how the assessment process works or what to do during the session.

Brown and Guralnick (2012) argue that clarifying parents' roles and responsibilities and enabling them to exercise these roles by providing materials and other social resources will alleviate any family distress caused by the rehabilitation course. In the UAE, "School for All" assigned parents roles after including their children in public schools (MOE 2010). It is, thus, necessary to suggest a support system for parents in the early intervention stage to enable them to recognise their roles during the early intervention stage and after the transition to other settings, particularly the public schools.

Further analysis found that all the parents interviewed agreed that they needed more detailed information about the transition process to understand their roles. The results of the close-ended questions also show that the lowest mean scores were achieved in regards to the clarity of parents' roles in the early intervention stage (M=2.98).

It seems that although there are transition plans in the early intervention phase, the content of these plans and the goals to be achieved were not explained to parents. In addition, there were no clear roles assigned to parents to support their children within the transition plans. Therefore, parents' follow-up with their children in POD centres or schools was driven by them and was not assigned or explained in the transition plans.

These findings are consistent with Podvey, Hinojosa, and Koenig (2011), who concluded that parents do not have a sufficient understanding of how their roles shift during the ECI and after the transition to regular schools. Subsequently, Brown (2016) emphasised the parents' need for clear information by providing them with comprehensive written materials and support during the transition process, which enabled them to make suitable decisions.

The findings of this study also showed that parents played roles other than those identified for them. Interviewees shared their experiences in looking for other resources of support and rehabilitation out of the early intervention programme, either with the knowledge of the professionals or without it. For instance, Parent-7 described how she was confused regarding what to do for her son. Thus, she found it necessary to undertake the responsibility and look to outsource additional therapeutic sessions for him. Marshall, Adelman, and Kesten (2017) highlighted the parents' navigation for further services to their children with mild language delays.

The participants in this study added that they were initiated to play the role of *"placement finder"* to look for suitable educational settings for their children after the early intervention stage. As a result of unclear roles assigned to parents during the transition, they felt that they had to move to find new educational placements for their children, in spite of the fact that this is not their responsibility, but it is the role of the early intervention programme.

Similar to the findings of this study, Lee (2015) explained how families overcome the obstacles faced in ECI, so they tried to perform some roles to release themselves from the programme bureaucracy. Consequently, parents seemed to be involved in the process of intervention and transition in their own way, based on their understanding of the professionals' constraints. It is through these roles created by parents that they were able to support their children and successfully provided the needed assistance.

All in all, it can be considered an important step toward successful transition when the ECI programme and regular schools work together to clarify parents' roles and empower them to perform these roles in both sending and receiving settings. This would save their efforts in performing roles that might not be essential, or they should not be among their roles.

5.1.4 Roles Parents Should Do

In addition to the main three themes emerged from the study in regards to parents' roles in ECI, which are No role, Active roles, and Ambiguous roles, a fourth theme emerged that is related to roles parents should play effectively to improve the transition process and make sure that ECI children would transit to suitable educational settings. Under this theme, the interviewees proposed four main roles that parents should play as follows.

5.1.4.1 Following up their children to secure better educational environment: Although interviewees considered "follow-up" as one of the roles they already perform actively, they pointed out that following up is not limited to communicating with the staff via WhatsApp messages and phone calls or just working on the assigned objectives in the plan. More importantly, interviewees suggested carrying out field visits to the ECI facility and the new educational setting to which the child would move and hold discussions with educators on all possible ways to make the transitions work. Similar to the findings of this study, other studies such as Carlson et al. (2009) and Kang (2010), among others, emphasised that parents should take part in and visit the new educational setting even prior to the transition in order to learn about inclusion procedures. Moreover, Gaad and Thabet (2009) stressed on engaging parents of students who are included in regular schools, as they can play crucial roles in accelerating the inclusion process when they share their experiences with educators.

5.1.4.2 Parents should care for their children themselves: Interviewees further advised other parents to care for their children themselves more and not hand over this role to anyone else, such as housemaids or relatives. This, as per the interviewed parents, would help the child's development and achievement of the transition plan objectives. They consider that it is the parents' responsibility to look after their children and be close to them to meet their physical and emotional needs. Kang (2010) explained more roles parents could play in supporting their children, as they can relieve levels of anxiety with children and help them adapt to the new setting by meeting with the educational staff before and after the transition.

5.1.4.3 Parents should play additional training roles: Interviewed parents believed that they should play additional training roles to build their children's capabilities, enable them to acquire needed skills, and not just to rely on the training provided in early intervention premises. The role of parents as trainers for their children will give children longer opportunities to grow within different daily routine situations. Parents can use the daily routine experienced by the child in order to develop their skills. A daily routine could be: getting up from bed, using the toilet, brushing teeth, eating breakfast, visiting relatives, playing, shopping and sleeping. The wide range of routine-based activities a child can experience can be invested only through parental involvement to train the child during these routines (Peters 2010).

5.1.4.4 Parents should play more roles than required of them: Furthermore, interviewees suggested that they should play roles beyond those required by the ECI programme.

Professionals usually ask parents to follow-up on the assigned objectives in the individualised plans. Parents, however, thought they should go further and not be confined to these plans.

Parents are more aware of their child's needs, especially as they spend more time with them. These needs may change according to the child's development as well as the variety of natural environments in which they live (Carroll 2016). Meeting these needs requires parents to carefully consider and develop new roles to play in order to meet the changing and growing needs of their children. This is in line with a recent study by Lee (2015) that showed how parents manipulate their roles to release themselves from the system of bureaucracy and, as a result, supported their children.

A recent study in the UAE by Alobeidli (2017) suggested broader roles parents can play towards their children with special needs who have transitioned to inclusive settings. She identified collaborative areas with the staff to ensure students' educations, including roles related to children's needs, assessments, and behavioural issues. However, she stressed the need for parents to be aware of these roles.

Further, parents' roles have been explained by previous studies, particularly the parents' advocacy in their children's progress (Kruse 2012). Gaad (2006) makes the point by describing how a parents' support group for children with Down syndrome in the UAE played a vital role in improving their children's quality of life and, to some extent, prepared the way for including them in public schools.

Results of the cross-sectional survey, together with comments made by some of the parents who were interviewed, clearly emphasise the importance of making changes in how the ECI programme should view parents' roles. To do so, Lee (2015) emphasised empowering families to practise their roles not only in the ECI stage but also in the long-term lives of their children. Thus, it is important for the ECI programmes to listen to parents and learn what roles they wish to play regarding their children in the transition stage. This would pave the way for more responsibilities that parents can carry and strengthen their relationships with the professionals

5.1.5 Summary of Research Question One

This section discussed how parents perceived their roles in the ECI transition stage. The results of this discussion indicate that parents view their roles within four main themes: no role, active

role, ambiguous role, and roles parents should do. Parents expressed more than one view at the same time based on the areas of transition and the tasks that had been assigned to them. This section also discussed the participants' responses to the questionnaire; the results demonstrated that parents' roles in ECI did not reach the effective roles. In general, parents exercised low-intensity transition practices even with the active roles they mentioned throughout the interviews. These findings are in line with the literature and the theoretical framework regarding providing parents with the required knowledge to enable them to exercise their roles during the ECI and make suitable decisions regarding their children's transition (Bowen 2016; Carroll and Sixsmith 2016 & Lee 2015). Bronfenbrenner's work focused on parents' roles towards their children's development in general and how they can make the transition easy and smooth when they actively interact with school and other microsystems (Bronfenbrenner & Morris 1998). The central points of the discussion focus on educating parents about their roles and supporting them in practicing it before and after the transition. Listening to parents is a crucial part of learning what roles they can play, which leads to mutual responsibility within the ECI programme.

5.2 Research Question Two

This section discusses the responses to the second research question: To what extent are early education policies and environments surrounding ECI children support their inclusion and empower their parents?

Family environments and policies in young children's development were investigated recently by Wodon (2016) in the USA to come up with an evidence-based practice on the importance of early intervention policies in the long term. The researcher highlighted the importance of investment in ECI as it has an economic benefit in the long run; moreover, the researcher proved that ECI enhances the quality of life of children with special needs and their families.

Subsequently, the discussion of the second research question includes two main parts: the first contains discussion of the findings related to early education policies as obtained through the document analysis as well as the participants' responses to the cross-sectional survey.

Meanwhile, the second part discusses the findings related to the environments surrounding the child obtained from interviewees as well as participating parents in the survey.

5.2.1 Early Education Policies

The results obtained from the document analysis of early education policies manifested two main themes. The first theme is *"Children's education",* which shows that early education policies in the UAE support the transition of children with SEND to suitable settings, inclusive education, providing services in natural environments, as well as an individualised planned education. The second identified theme is *"Parents' empowerment",* which is based on parents' consent, parents' engagement, parents' support, parents' training and provides parents with necessary information. These findings are consistent with the results published in the literature (e.g., Byers 2008; Connolly & Devaney 2018; Jaco, Olisaemeka, & Edozie 2015; Wodon 2016). As a response to the second research question, this study discusses also the participants' responses to the questionnaire, where the results demonstrated that the mean scores of the policies' domain range from 3.86 to 3.92, which means that parents' responses are almost within the "strongly support" level in the six statements and the total average of this domain.

5.2.1.1 Children's education:

A study by Byers (2008) aimed at understanding the implications of ECI policies on children with special needs in the US. The author identified the necessity for inclusive ECI design and implementation, which takes into account all parts of the community, such as families, schools and professionals.

Document analysis of the early education policies in the UAE revealed that these policies support the inclusion of children with SEND in the public education system. For instance, the Quality Standards for Early Intervention Services stress reviewing the levels of inclusion of children with SEND in public education on a regular basis (MOCD 2016). Meanwhile, the *"School for All"* initiative by the MOE (2010) is devoted to promoting a culture of inclusion for students with SEND within regular schools, based on a belief that general education is the best educational placement for these students.

Moreover, Dubai Inclusive Policy went further with this point by ensuring the sustainability of inclusion in the long term by urging every school in Dubai to follow specific procedures that guarantee education for all the children regardless of their abilities (KHDA 2017). Besides, the findings of the close-ended survey indicated that all participating parents agreed on the fact that ECI policies strongly support children inclusion. The means of the six statements in the policy's domain are more than 3.50.

When early education and intervention policies are inclusive to all children, this reduces the need for special education services in the next stage as children with SEND transition directly to an inclusive educational ecosystem that responds to their different needs. This is supported recently by Jaco, Olisaemeka, and Edozie (2015) in their study that explored the importance of ECI policies in supporting inclusive education for children with intellectual disabilities. The authors claimed that ECI has a clear impact on social, academic, and communication skills, as well as it has reduced the need for special education.

Further document analysis showed that ECI policies encourage the planned transition of children after early intervention into appropriate educational settings. The Quality Standards for Early Intervention Services indicate that each child must have a transition plan clearly formulated to ensure that the child and family are prepared for the next educational environment and can easily adapt with its physical and human elements, and, certainly, parents are an essential party in this plan. However, early education policies have not clearly defined the requirements for children transitioning to regular schools or identified the criteria that are used to transition children to the next educational setting. It is up to the joint committee of the MOCD and MOE to decide the child's eligibility for inclusion. There is no guarantee that the transition plans developed by the EECIP will be followed in general education schools.

The interviews' findings also revealed that early education policies support the facilitation of children's education in natural environments. Consistently, the cross-sectional survey results found high mean scores were achieved in the items states that ECI policies encourage the provision of services in natural environments (M=3.92), and that the policies support children's transition to inclusive learning settings (M=3.92).

Even though the EECIP is based on centre services which provide within the centre's premises, early intervention policies support the provision of services in natural environments, as well,

with more attention to families' roles as an effective element in these services, believing in the value of daily routine activities that children do with their families and how families can use it to enhance their children's development. This approach is documented as one of the best practices in the world by authors such as Dunst, Bruder, Trivette, and McLean (2001), Alliston (2007), and Wodon (2016).

Furthermore, the current study found that the UAE's education policies guarantee the right for every child with SEND to learn through an individualised education plan that meets his or her educational needs, and to take advantage of learning opportunities in accordance with appropriate teaching methods. This result is consistent with Ziviani et al.'s (2011) study, which emphasised the individualisation of provided services as one of the fundamental elements that help in evaluating ECI policies.

Both the EECIP and regular schools use IEPs for students with SEND who are enrolled in their programmes to consider their individual needs (MSA 2014; MOE 2018). However, each policy works in isolation, despite serving the same category of children. Nothing in the early education policies shows that the plans before and after transition are sequential and work consistently with each other, or that regular schools' IEPs depend on the outcomes of IEPs implemented in the ECI stage.

5.2.1.2 Parents' Empowerment:

The document analysis of the UAE's early education policies also manifests evidence that these policies empower parents of children with SEND through many procedures. Themes emerged from the document analysis that ECI policies stress on obtaining parents' consent before providing any early childhood-related services such as child assessment, educational, and therapeutic plans as well as transition plans, which puts parents in the centre of the early learning process.

Further document analysis showed that policies in the UAE encourage collaboration and communication with parents and their involvement in the early childhood education process. The cross-sectional survey results also found that participating parents agreed on the fact that ECI policies are strongly enabling families towards full participation with their children (M=3.87) and support families to exercise their roles during the transition stage (M=3.86). This is in line with a recent study carried by Connolly and Devaney (2018), who explained how the

parenting support policies that consider parents' involvement could facilitate children's access to the required services. The importance of family involvement in transition was supported by many studies, such as Foster (2013), Pang (2010), Wildenger and McIntyre (2010), and Carroll (2016).

Moreover, policies have dealt with parents as a key player in providing training and education to their children by training them to play an active role towards their children at home and other natural environments, thus enabling parents to become trainers for their children and not relying on early intervention as the only source of skills development.

 The early education policies also emphasise providing parents with detailed information about educational programmes offered to their children as well as their progress in various areas. For instance, the Minister resolution regarding ECI (MOCD 2014) included all types of information that parents should know about the early intervention process such as assessment results, provided services, services location, services duration, therapeutic and educational plans. Although this is clear in early education and intervention policies, *"lack of information"* is found as part of the parents' perspectives towards ECI transition in this study, which emerged under the *"blurring"* main theme. This means that there is a gap between what is stipulated in the policies and what is applied on the ground.

Early education policies' attention towards empowering parents goes beyond supporting them through training or information provided to touch psychosocial aspects of parents' life. Realising the challenges and difficulties facing parents in the early years of a child with SEND might impact their psychosocial status. Therefore, policies emphasise parents' empowerment through psychological support and family counselling. Wodon (2016) suggested ongoing governmental support for the development of ECI policies within family contexts. Consistently, Ziviani et al. (2011) assert the need for ECI policies that respond to families' needs and support them.

These findings are in line with the literature Vargas-Barón, Janson, and Mufel (2009) found that although the national health, social protection, and education policies support ECI services, there is still more to do to align these policies with each other and achieve a common ground early intervention policy. More recently, Franco et al. (2017) explained a network system based on collaborative services provided by health, education, and social, governmental entities,

which focuses on family empowerment in ECI and then leads the transition to full inclusion. This system, according to the authors, strengthened the family network and provided social support.

To sum it up, it is worth noting that the current study shows how early education policies support families playing effective roles in the process of ECI. Meanwhile, these policies are issued by different entities such as policies at the federal level by the MOCD, MOE, and at the local level of the Dubai government by KHDA and DHA. However, these policies need to be aligned with each other as it sources to several education, health, and developmental entities, both federal and local, in order to facilitate children's transition from one facility that follows specific policies, to another facility that follows different policies.

5.2.2 Surrounding Environments

The majority of parents interviewed in this study believed that the community does not adequately support their children, which makes the transition process stressful. Gaad and Khan (2007) found that the UAE culture prefers to enrol students with SEND in POD centres rather than inclusive settings.

Similar answers obtained from the interviews declared that extended families of children with SEND are not supporting their inclusion, even though the parents of these children are willing to educate them in regular settings. Meanwhile, findings of the close-ended survey showed that the means for all statements on the surrounding environment domain are between 3.06 and 3.10, which means environments around children with SEND moderately support their inclusion. This is in line with a recent study by Leadbitter et al. (2018) that found a lack of acceptance of people with disabilities among other extended family members, which makes it difficult for the parents to attend social events related to the wider family. Kruse's study (2012) also stressed the need for parents' external support.

Interviewees also uncovered that children who were transitioned to inclusive environments have suffered from huge obstacles that affected their education, such as teachers' attitudes, teachers' lack of knowledge, the curriculum, and the assessment mechanisms. Therefore, the educational environments surrounding the children do not support inclusion. The interviewees also highlighted the lack of coordination or collaboration between related entities to transition children to inclusive settings. They felt lost among entities that shirk their responsibilities and

207

found little support from the educational environments they were hoping would support them and their children. Malatsi, Mpuang and Mukhopadhyay (2015) noted that the ECI became inefficient when there is limited coordination between related entities.

The data obtained from participants in this study showed that the lowest mean score in the Environments Domain was related to the communication between the ECI and other educational environments such as kindergartens and inclusive schools (M=3.06). That means that the mesosystem mentioned in Bronfenbrenner's theory is not strong enough between these microsystems. Podvey, Hinojosa and Koenig (2011) explained in their study how the interaction between families and schools establish from the beginning of the transition process and then shape a strong mesosystem over time. However, a poor transition, when experienced by the family, can negatively impact the child and undermine the mesosystem. Similarly, Curle et al. (2017b) emphasised the importance of the interactions between family and other ecosystems in the community to ensure a successful transition.

Further findings indicate that parents have shared their concerns about teachers and other staff working in regular education. They explained that teachers are not qualified or do not have the knowledge to teach children with SEND; in addition, these teachers do not welcome the inclusion of students with SEND in schools or kindergartens. However, interviewees explained how the educational environment in ECI and POD centres supports children with SEND and their families and works hard to improve their skills. This is clear also from participating parents' responses to the closed-ended survey, which showed that the highest mean score in the environments domain was related to the ECI team support (M=3.10).

This study reveals that children with SEND and their families in the UAE are not supported enough by the ecosystem surrounding them. Bronfenbrenner's work showed how the children's development could be influenced by the macrosystems, which represent the beliefs, attitudes and the culture in general. The lack of support from the community to the child and family can make the transition more difficult from one microsystem to another. This finding is similar to that of other previous studies in the UAE. AlObeidli (2017) found that the majority of the regular teachers in her study demonstrated some kind of social stigma against PODs. Gaad (2015) also believes that there are negative attitudes towards disability that she referred to as a lack of awareness.

In regards to the UAE community's views towards POD, Alborno and Gaad (2014) discussed how the medical view of disability in the UAE is manifested by the negative words that describe POD at both public and formal levels. The authors concluded that the Emirati community perceives the disability as a charity-based issue, instead of rights-based. Thus, more recently, Gaad and Thabet (2016) emphasised the importance of providing parental support programmes to help parents meet the challenges of disability, including community attitudes.

It is, thus, crucial to establish a support system to help children with SEND and their families and help them to transition their children thorough ecosystems smoothly. This system includes effective communications and interaction between parents and other *"microsystems,"* such as schools and ECI centres. The extended family members in the *"exosystem"* should also be included within this support system, as they might affect the parents' opinions towards the transition decision or other decisions related to the child's future. This might also include the mass media that promote the idea of inclusion. And finally, the culture in the far layer of ecosystems that surround the children also need to be changed in terms of attitudes towards people with SEND and supporting inclusion (AlObeidli 2017; Gaad 2015).

5.2.3 Summary of Research Question Two

This section discussed the early education policies in the UAE within the environments surrounding ECI children and how these ecosystems support transition to inclusive settings and empower parents. The results of this discussion show how these policies support the inclusion of children with SEND and empower their families to take effective roles regarding their education. However, these policies are sourced by different federal and local entities in the country, which need to be aligned on one common ground to be able to support children's transition from one facility to another.

This section also discussed the participants' responses to the part of the questionnaire, which related to the surrounding environment to children and their parents. Within the framework of Bronfenbrenner's theory, the discussion showed that parents believe that the ecosystems do not support transition to inclusive settings, including the far layer of culture in the "*macrosystem*", as well as extended families and friends in the *"exosystem"*. The interaction between microsystems, in particular, the ECI and schools appear as not being in the strong level. The central points of the discussion focused on a support system for parents of children with SEND, to facilitate the transition of their children to inclusive settings, in the framework of the

supported ecosystem, including respected entities that work on one common ground policy to serve families and their children even in the long term after transition.

5.3 Research Question Three

This section discusses the participants' responses to the third research question: How do parents of children with SEND perceive the transition process in early childhood intervention?

The parents' main perspectives towards ECI transition were reported by participating parents as *"smooth, stressful and blurring"*. Perspectives were changed according to the place where the child was transitioned, whether to an inclusive setting or special education centre. Sometimes, the perspectives were changed according to the stages of transition and kind of challenges they faced at each stage. In addition to the findings highlighted by the participating parents, there were some who considered the transition pathways as not totally clear for them or completely smooth. This section discusses how parents perceived the transition and why a transition from ECI was viewed by some parents as stressful and blurring but described as smooth in other situations.

5.3.1 Smooth Transition

The interviewed parents explained that the transition went smoothly during the provided services in ECI. During the provision of services within the ECI premises, children receive a comprehensive rehabilitation programme, including family services. Therefore, the style of intervention mainly is one-to-one during the therapeutic sessions, and the response to the needs is based on the family's uniqueness, concerns and priorities (MOCD 2019b). Thus, this approach creates a common ground with parents and strengthens their relationship with the programme.

Many studies, such as Epley, Summers and Turnbull (2011), Gavidia-Payne, Meddis and Mahar (2015), and Noyes-Grosser et al. (2014), agree with the results of this study: that parents' perspectives view the transition as a smooth process before the transition point. Siddiqua (2014) tried to understand parents' experiences during the transition; she affirms that they had more positive perceptions and satisfaction about service pre-transition than post-transition.

To elaborate, most interviewees indicated that the ECI team members have supported the transition and make it smooth for their children since they empowered parents with knowledge

that helped them in the transition stage. For parents, ECI centres are more organised settings that serve children and families together at early ages through IFSPs. Thus, parents are partners in achieving the assigned objectives, with continuous communication with staff and training provided to them, in addition to home visits. This support from the staff is based on the interdisciplinary team, which allows the specialists to work together in the same situation to help the family. Therefore, the parents meet with one team in one session to assess the child, or to build the plan, rather than meeting each specialist alone (MOCD 2019b). This approach saves the parents' time and effort, and it opens the door for further interaction among the diverse team members who gain experience in various aspects of child development.

Interviewees whose children have been transitioned to POD centres pointed out that the transition process went smoothly with their children. They believe that their children can develop in these centres more than anywhere else. They added that the working staff is more qualified and cooperative with them than regular school staff. The EECIP and the POD centres are affiliated with the MOCD and follow the same policies. Therefore, a child who is transitioned to POD centres has automatically been received by a specialised team that works with the ECI team within the transition plan that begins six months before the transition (MOCD 2019b). Therefore, unlike the transition to inclusion, parents, in this case, have no difficulty in completing the transition procedures.

Moreover, the findings of the open-ended questions indicate that 52.6% of participants suggested that the appropriate transition place for their children after ECI is POD centres. Accordingly, parents seem to be satisfied with referring their children to POD centres due to significant barriers that children with SEND are experiencing in schools, as parents might hear about these challenges or observe it themselves. Moreover, parents have not experienced inclusive education in public education schools and its implications on their children compared to POD centres. Therefore, they might have low expectations about their children's education that made them happy with services provided POD centres. This was explained by Guralnick and Bruder (2016, p. 174):

> families establish expectations for their children and promote their participation in activities to meet these expectations. If a service system does not provide quality inclusive programmes and classrooms for infants and young children with disabilities, parents may well believe that this is the best option for their child's learning.

Interviewees shared their positive perceptions towards the transition when their children have been transitioned to suitable educational settings. For instance, parents whose children were transitioned to disability centres have experienced smooth and clear transition procedures since they consider disability centres the most appropriate placement for their children's abilities. It was the same for parents whose children have been transitioned to inclusive settings, and they feel that is the best educational placement for them.

To elaborate more, a mother of three daughters, each with hearing impairment and who have been included in regular schools, described the transition as a smooth process since her daughters have adapted to the new settings. She stressed that inclusion in a suitable place is necessary for children with hearing impairments. McIntyre et al. (2007) explained how a suitable educational setting, which is one that meets the family's expectations and ambitions, for a child leads directly to a successful transition. Rimm-Kaufman and Pianta's (2000) Model of Transition emphasises the continuous collaboration between family and school, and seamless relationships among all parties to achieve effective transition.

5.3.2 Stressful Transition

As found in the literature similar to the findings of this study, Foran and Sweeney (2010), and Bowen (2016), among others pointed out that the transition evokes anxiety for families as a result of the change in services provided in the new programme, which might be different from the previous one in terms of the location, the new staff, as well as the level of parents' involvement.

The interviewees considered the community attitudes as a fundamental obstacle to transition students with SEND to inclusive education; therefore, some parents had preferred not to declare to the public that they have a child with special needs. This finding of the study is in agreement with Rosenkoetter, et al. (2009) that the transition is a stressful stage for families and a complicated process, so they recommended supporting families and building relationships with them in order to reduce their stress.

There is also evidence that when a family found enough support from the surrounding community, this helps in the family's rapid adaptation to a child with a disability, which can predict the child's progress in the future. To do so, ECI professionals can guide the family in establishing a formal support system within the community to reduce any hint of stress at this

stage (Alliston 2007). Along the same vein, Gaad (2013) stressed that parents of children with disabilities need support on several levels within the UAE community.

Rosenkoetter et al. (2009) stress the collaboration between sending and receiving educational settings, which result in positive outcomes for the transitioned children. The Spencer-Brown (2015) qualitative study also concluded that the interviewed parents asserted the importance of communication and cooperation between families and educators. Further analysis in this study emphasises that the interviewees are viewing teachers and other staff in regular schools as not adequately qualified to receive students with SEND at regular schools and not supportive of inclusion, so they make the transition more difficult. Moreover, participants explained through the closed-ended questions that regular schools' staff were supportive of some children transition, but not significantly. This is in line with Petrakos (2015), who found that trust-building relations with the staff after the transition is a main challenge parents face during the transition.

These findings are consistent with those of other recent studies in the UAE, such as Alborno (2013), Alghazo (2005), Alghazo and Gaad (2004), and Alobeidli (2017), which revealed that regular teachers tend to have negative attitudes towards the inclusion of students with disabilities. However, this finding of the study is different than Walker, Carrington and Nicholson's (2012) study in Australia, where parents felt satisfied with the support provided to their children from teachers. And, it is also inconsistent with Siddiqua (2014), where the qualitative findings indicated that parents had positive perceptions towards teachers in Canada. The reason for the difference could be attributed to the cultural differences from the UAE, where inclusion and ECI had its deep roots in these countries.

Rimm-Kaufman and Pianta's (2000) developmental model of transition, emphasised establishing collaborative partnerships between parents and teachers to relieve parents' concerns that they are less connected with school teachers. The continuum of parental training and support programmes such as Ta'alouf that started in 2013 in the UAE is crucial, as it had a great impact on the attitudes and responsiveness of parents after the training course. Parents and regular teachers have been offered a great chance to come together and try to find solutions for the joint problems on the ground (Gaad and Thabet 2016).

Moreover, as explained by the interviewed parents, they get depressed when they are informed about the next new educational transition setting. Almost half of them would have preferred to keep their children in early intervention for a longer time because they felt that their children were safe as long as they were in early intervention; however, other, new educational settings are unknown to them, which makes the transition stressful.

All participated parents in closed-ended surveys also agreed on the fact that the clarity and smoothness of the transition journey in ECI were at a moderate level (means between 2.50 to 3.49). Meanwhile, 56.8% of respondents to the open-ended questions suggest that the suitable age of transition from early intervention is from 5–6 years old, which means that they prefer that children stay in early intervention longer.

The findings of the study are in agreement with a number of previous studies that revealed parents' concerns regarding the new transitional settings. Hanson et al. (2000) noted that parents preferred to keep their children in the ECI because they did not want to move their children from "known" settings to the "unknown" settings in schools. Consistently, Villeneuve et al. (2013) voiced parents' concerns about their children in the new educational setting and their need for more details about it. And more recently, Carroll and Sixsmith (2016) found that parents feel fear and anxiety when they were informed about the transition to the new setting; they found it difficult to adapt to new professionals.

The eleven interviewees shared the view that the transition to inclusive education is a stressful point. Thus from the parents' view, regular education facilities are not ready to accommodate students with SEND, particularly in terms of staff attitudes, non-adapted curriculum, or the educational atmosphere in general. The closed-ended survey findings also indicate that parents' perspectives towards the transition to inclusive environments after early intervention were below the smoothness level.

A significant body of studies agree with the results of this study; for instance, Starr, Martini and Kuo (2017) and Petrakos (2015) found out that parents of transitioned children are facing challenges in all ecological systems levels. Similarly, Schischka, Rawlinson and Hamilton (2012) pointed out that parents expressed some concerns regarding their children after the transition to public schools. Moreover, Walker, Carrington and Nicholson (2012) concluded that parents considered schools unprepared for children with SEND and often resisted to include

them. In the UAE, Alborno (2013) documented the lack of support services to students with special educational needs in regular schools.

At a time when preparing school environments is a very important element that would help to support inclusion, Guralnick and Bruder (2016) suggest that early education programmes should focus on empowering families to facilitate children's learning in everyday life skills and support them to promote environmental settings in which children with SEND can take part in community-based activities with their non-disabled peers. These findings emphasise the need for family networking within their ecosystems to reinforce appropriate patterns of interaction, as well as raise awareness throughout society and educate school staff about inclusion in the hopes that that would help parents to reduce stress brought on by the transition process.

5.3.3 Blurring Transition

The findings of this study also showed that interviewees perceived the transition from a different angle. They considered transition as a blurring stage when it comes to coordination between entities, transition pathways, the need for information, or the necessity to provide children with more skills.

Rosenkoetter et al. (2009) pointed out that the collaboration between sending and receiving educational settings will result in positive outcomes for the transitioned children. Most interviewees highlighted the lack of coordination and collaboration among stakeholders. They shared that, while early intervention seeks to include some children in public education facilities by preparing them for the next stage, schools do not complement the role of the early intervention; they follow their own regulations. Therefore, the gaps between stakeholders are clear to the parents, which makes them feel unsure about the transition. The findings of this study are in agreement with the findings of Connolly and Devaney (2018), Starr, Martini and Kuo (2017), and Curle et al. (2017b), who stressed the need for consistency and collaboration in the transition process between all parties in the system. In other words, a successful transition requires ongoing collaboration and coordination between all related entities including the ECI programme, POD centres, and regular schools, as well as parents. This is in line with the ECI mode suggested by Guralnick (2001), which requires a high level of collaboration between related government and community entities, as well as families, to demonstrate commitment towards their assigned roles.

Further analysis emphasises that interviewed parents expressed their concern about the future of their children after early intervention. They expressed that transition pathways were not clear for them, so they were confused about what to do with their children and what was the right educational course for each child.

When parents were asked whether they had been provided with enough knowledge regarding the next educational settings available for their children, they declared their desperate need to know about available educational pathways after the ECI stage. Podvey, Hinojosa, and Koenig (2011) stated that transition is not just an event that occurs with the child at the beginning of the programme, but it is a process that starts with planning and setting goals in collaboration with the new placement to ensure consistency and the child's adaptation to the new environment. Therefore, drawing a clear customer journey for the ECI programmes might relieve parents' anxiety and stress, and make the transition more visible to them, especially when they are able to perceive clearly the future of their children after the ECI stage.

These blurring pathways and lack of information, from the parents' perspective, do not prepare children for regular education and inclusion. They would have preferred that things be quite clear to them, so that they can shape a clear perspective about the future of their children, and make realistic expectations according to their abilities. This comes by providing accurate, written, and organised information in diverse ways, not only through intermittent dialogues among parents and the staff.

These findings are consistent with a significant body of studies that found a lack of knowledge among parents in regards to the transition process (Spencer-Brown 2015; Hanson et al. 2000; Gatling 2009; Villeneuve et al. 2013). In addition, other studies found that parents were concerned about the lack of knowledge regarding their children in general, the disorganised education system, as well as the available services (Raspa et al. 2010; Siddiqua 2014).

The literature suggests that supporting parents' access to information is key in early intervention as it helps the family to shape an understanding about their children's future. The information includes possible future needs in the next stage (Alliston 2007). These findings emphasise the need for fluid and clear information exchange between the ECI programme and parents regarding the transition process and the educational options for their children.

Interviewees also uncovered the need for their children to develop more skills during the early intervention stage. They felt that their children had not been sufficiently empowered for the next educational level, particularly inclusive education. Furthermore, a large number of participating parents suggested through the open-ended questions that children should continue to receive early intervention services longer. They also described their perceptions of their children's future in different ways; while some wished a better future for them, others linked the future of their children with the quality of provided services; however, the third group felt that the future of their children remained uncertain. Gaad and Thabet (2009) pointed out that students with SEND should be well prepared before they are included in regular schools to avoid any surprises. This is in line with Gaad (2013), in which parents of PWD in Abu Dhabi demanded more support and therapeutic services for their children, particularly after school hours, to ensure their viability in public education environments.

Armed with this knowledge, children in ECI should take their time in receiving the needed services before being referred to the next educational stage, especially when they're transitioned to inclusive settings. The success of the transition depends on sufficient preparation for the child and their family.

5.3.4 Summary of Research Question Three

This section discussed how parents perceived the transition process in ECI. The results of this discussion indicate that parents view the experienced transition from three different perspectives: *"smooth, stressful, and blurring"*. They expressed more than one view at the same time based on the areas of transition and the new educational placement. These findings are in line with the literature and the theoretical framework regarding the need for family networking with ecosystems, to reinforce appropriate patterns of interaction as well as to reduce stress caused by the transition process.

The central points of the discussion are in-line with Bronfenbrenner's work, that focused on community and culture support to the child in the macrosystems. In addition to the supporting policies in the exosystems that empower children for suitable transitions. Including the efficient interactions between parents, and other microsystems such as; extended family members, ECI staff, schools and POD centres to prepare children and their families before the transition to the next stage. This is in addition to providing parents with adequate knowledge about the transition and available educational pathways for their children.

5.4 Research Question Four

This section discusses the participants' responses to the fourth research question: Are there any differences between parents' perspectives towards the transition from early intervention to other educational settings?

The discussion is mainly focused on the results achieved from the analysis of the survey's closed-ended questions in addition to the results generated from the interviewees' answers to reflect a better understanding of parents' perspectives towards the transition. This comparison between quantitative and qualitative data helps establish a better comprehension of the perspectives of large groups of parents towards the transition stage in the UAE and to identify the differences of these perspectives according to the demographic variables. These acquired results are also discussed and compared with previous research related to the scope of the study.

5.4.1 Parent's Gender

The results of this study found statistically significant differences amongst participants' perspectives towards transition pertinent to gender in favour of fathers in all domains of the cross-sectional survey: Parents' Roles, ECI Policies, Transition Journey and Environments Surrounding Children.

Mothers usually undertake the responsibility of following up with their children with SEND in centres. This is consistent with the fact that the vast majority of the employees in the POD centres are female. In addition, children in early developmental stages are more attached to their mothers as a source to satisfy their basic needs while fathers are busy with their business outside the family. It is therefore expected that the fathers' perspectives towards the transition are significantly higher than mothers' because their views are superficial as they didn't play a key part in the transition process. Mothers' expectations about the offered services and finding the right place are higher than fathers' who are not deeply involved in the process. Mothers keep in touch with the service providers and ask for more services that put their children in the best educational placement after the transition.

In a recent study in Ireland, Connolly and Devaney (2018) concluded the importance of involving parents, especially fathers, in their children's services. This is in line with Gaad's (2006) findings that the number of fathers of children with Down syndrome in the UAE

participating in monthly meetings had decreased, as mothers usually spent more time with their child and responding to their needs.

5.4.2 Child's Gender

According to the results, a child's gender did not carry a statistically significant effect on parents' perspectives levels; mean scores are close to each other of both genders in all domains of the cross-sectional survey: Parents' Roles, ECI Policies, Transition Journey and Environments Surrounding Children.

The parents' roles towards their children do not differ according to the gender of the child. In ECI, parents are supposed to follow up with all of these children and communicate with the staff to ensure the best services. In the meantime, early education policies in the UAE emphasise the ECI for all children with SEND without any gender-based discrimination. Therefore, both genders are following the same customer journey and surrounded by the same ecosystem.

5.4.3 Parent's Educational Level

Significant differences were found among participants' perspectives towards transition, pertinent to educational levels in favour of parents with lower educational levels. Further analysis revealed that parents with literacy skills and below scored higher than other parents with high school or bachelor's degrees and above in all domains of the cross-sectional survey: Parents' Roles, ECI Policies, Transition Journey and Environments Surrounding Children.

Educated parents are supposed to learn more about their children's status, search for the best rehabilitation approaches, as well as best practices in ECI and transition. Therefore, their perspectives towards transition might be associated with high expectations about their children and their future. This explains their low-level perspectives towards transition.

As for parents with low educational levels who have basic literacy skills or are illiterate, their limited knowledge about global practices in ECI, transition and inclusion make them hold positive perceptions about the transition process because they have no idea about other practices that can be compared with them. Therefore, all of what is offered is sufficient and ideal for them. This result is inconsistent with Siddiqua (2014), who that found parents' educational level

did not significantly affect their perceptions towards transition. The reason for the difference could be attributed to social and cultural factors that are different from the UAE.

5.4.4 Child's Educational Status

In respect to the Child's Educational Status, significant differences in participants' perspectives towards transition were found between parents of children in ECI, POD centres and inclusive education, in favour of parents of children in POD centres and ECI centres. To elaborate, in terms of Parents' Roles, ECI Policies domains; results revealed that perspective levels of parents of children in POD centres and ECI centres are more than parents of included children in public education. Moreover, with regards to transition Journey and Environments Surrounding Children domains, results indicated that parents' perspectives of children in ECI are higher than parents of children included in public education or in POD centres. Meanwhile, perspectives of parents of children in POD centres are higher than parents of included children in public education. Moreover, findings of semi-structured interviews indicate that participants whose children have been transitioned to inclusive education found that transition was stressful, compared with the transition to disability centres.

ECI and POD centres are following the same policies of the MOCD as they are affiliated under the same entity, for that, there is consistency in services provided within these two types of centres. However, regular schools are following different regulations by the MOE and KHDA which often make it difficult for the parents to adapt to the new educational environments after the transition, in addition to the challenges of inclusive education in the UAE in general (Alborno 2013; Alghazo 2005; Alghazo and Gaad 2004; Alobeidli 2017).

Furthermore, ECI centres provide great attention to the family through counselling that meets their individualised needs based on family concerns and priorities. In addition, the quality standards in ECI allow children to receive more therapeutic sessions than in POD centres (MOCD 2015; Al Khatib 2016). This may explain why parents hold more positive perceptions of ECI than regular schools or even POD centres. This result is consistent with previous studies which show that families in ECI were more satisfied with services than families of transitioned

children to kindergartens (Janus et al. 2008), and they become less engaged in the school stage (Podvey, Hinojosa and Koenig 2011).

5.4.5 Type of Educational Needs

Significant differences were found in participants' perspectives towards transition pertinent to the child's educational needs. Perspective levels of parents of children with developmental delay are higher than those of parents of children with intellectual disabilities or ASD. To elaborate, parents of children with developmental delay scored higher than parents of children with ASD on the Parents' Roles domain. It seems that parents of children with developmental delays are playing more active roles in transition, especially to inclusion, as the choice of inclusion in public schools is available to their children more than children with ASD or intellectual disabilities. Similar results were found in parents' perspectives towards Transition Journey and Environments Surrounding Children domains. Further analysis indicated significant differences between parents of children with developmental delay from one side and parents of children with intellectual disabilities and children with ASD from the other side.

Children with confirmed disabilities such as intellectual disabilities or ASD are stigmatised by the society (Gaad 2004; Gaad 2015; and Alobeidli 2017), and their families face community challenges more than families of children with developmental delay that have not yet been classified under disability categories. Transition to inclusive settings is also not encouraged for children with autism and intellectual disabilities by the MOCD that prefers to refer them to POD centres (MOCD 2019b).

However, in terms of ECI Policies domains, the results have shown that there were no significant statistical differences in parents' perspectives towards transition pertinent to the type of SEND. Education and ECI policies do not exclude any type of special needs; they are a response to children's different abilities, including those with developmental delays and those at risk for developmental delays. This result is different from Malatsi, Mpuang and Mukhopadhyay (2015) in Botswana, which has different social, cultural and political factors from the UAE. The authors found that ECI policies are inefficient because they do not cover children with developmental delays or those at risk of disability.

221

Interviewees who had children with sensory disabilities also described the transition as an easy process when compared with parents of children with other disabilities, such as ASD. These findings are also in line with the conclusion of the research done by Hanson et al. (2000), Leadbitter et al. (2018), Starr, Martini and Petrakos (2015) and Kuo (2017) regarding challenges facing the transition of children with autism. Yet, more focus should be applied towards parents with autism and intellectual disabilities to ensure the success of the transition and therefore create a support ecosystem system for inclusion in the UAE.

5.4.6 Place of ECI Services

With respect to the place of ECI services, quantitative findings from the current study showed significant differences between parents in the four centres in favour to parents of Dubai and Ras Al Khaimah centres. For instance, a significant difference was found between the parents at the Ajman and Ras Al Khaimah centres in favour to the parents at Ras Al Khaimah regarding their roles. It is worth noting that EECIP started in Ras Al Khaimah, where it has a longer experience than at other centres, so the roles of Ras Al Khaimah parents presumably are more specific and clearer.

Moreover, in terms of the ECI Policies domain, significant differences were found between the perspectives of parents who have been served in Ras Al Khaimah and those in Dubai, favouring Dubai. This might be attributed to the existence of an inclusive education policy in the Emirate of Dubai, as well as a local government law for the protection of people with disabilities.

Further analysis regarding the Transition Journey domain indicated a significant difference between parents in Dubai and Ras Al Khaimah on one side and the parents at Ajman and Fujairah on the other, favouring the parents of Dubai and Ras Al Khaimah. In fact, the Dubai and Ras Al Khaimah centres have the largest number of children in early intervention, and they are the only centres independent from the management of POD centres. This could make the early intervention journey smoother and clearer for parents.

As for the environments surrounding children, the results demonstrated that these ecosystems do not support a smooth transition to inclusive settings, and all the centres achieved a mean of less than 3.50 in this domain. Quantitative findings also showed a significant difference between parents in Dubai and Ras Al Khaimah. Despite the availability of inclusive policies in Dubai, the interviewees and participants voiced challenges with inclusion. Considering that the

early intervention programme in Ras Al Khaimah started in 2010, while it was launched in Dubai five years later, the difference in experience between the two centres might play a role in how parents shape their perspectives towards transition.

5.4.7 Summary of Research Question Four

This section discussed statistical differences between parents' perspectives towards the transition. The results of this discussion indicate that statistical differences were found among parents pertinent to the gender of the parent, education level of parent, the educational setting of the child, type of SEND, and place of service; however, no statistical significance was found regarding the child's gender. This section also discussed the results generated from interview answers to reflect a better understanding of parents' perspectives towards the transition. The central points of the discussion focus on how parents' perspectives change according to demographic variables. These acquired results are also discussed and compared with previous research related to the scope of this study.

5.5 Conclusions of the Study

The transition from ECI to other educational settings is a critical starting point for the children's educational pathways and for their parents. It is a joint process between different stakeholders that collaborate together to support students with SEND within the ecosystem. The aim of this study is to investigate parents' perspectives and roles as participants in the transition process from ECI to other educational contexts. Since the study is one of the few research studies has been conducted in the UAE in the field of ECI, it attempts to fill a gap in the literature on ECI and the transition process. The study has investigated the parents' perspectives towards transition and how they view their roles during it, considering the ecosystem that children live and are educated in. To do so, the study used a triangulation of methods, including semi-structured interviews, document analysis in the qualitative, in addition to a questionnaire in the quantitative part of the study. The study has been designed to answer four research questions: the first one aimed at understanding how parents view their roles; the second one aimed at identifying early education policies and ecosystem that support the transition; the third question aimed at investigating how parents perceive the transition process; and the last one aimed at examining any differences among parents' perspectives.

The findings of the study indicate that parents view their roles in more than one position. In certain issues, parents feel that they have active roles in transition, while in other issues, they do not feel active. In some areas of transition, they expressed ambiguous perspectives, so they suggested more roles to play. The results obtained from the document analysis manifested that early education and intervention policies are supporting children's education and empowering parents. However, the majority of parents believed that the community does not adequately support their children in inclusive settings. The main parents' perspectives towards ECI transition are *"smooth, stressful and blurring,"* which interchange according to the place where the child is transited. Significant differences were found among parents' perspectives towards transition.

The study has shown that participating parents felt that they were not involved in transition decisions, as the ECI programme used to take such important decisions on behalf of them. Many of the parents in this study believe that they were not allowed to exercise specific roles in the transition stage or informed about their roles during the transition process. Although many of these parents also believe that they practiced efficient roles such as attending meetings, following up and supporting their children, and keeping in touch with the staff. However, Foster (2013) considers these roles within the low-intensity transition practices for its minimum level of involvement in services. This study revealed that parents were confused about the roles assigned to them during the transition, so they needed more detailed information about the transition process to understand their roles. As a result of that, they searched for other resources for support and rehabilitation outside the ECI programme, and sometimes tried to act beyond the roles they are supposed to play, such as finding new educational placements for their children after the early intervention stage. Consequently, parents emphasised four main roles that ECI parents should play effectively to improve the transition process. They suggested efficient follow-up with their children to secure a better educational environment, taking more care of their children by themselves rather than handing over this role to anyone else, in addition to the training roles that they should play to build their children's capabilities, and finally, they stressed the continuation of playing roles other than those required by ECI staff.

The findings of the study related to early education policies and environments surrounding ECI children manifested in policies at the federal and local levels in the Dubai government support the transition of children with SEND to suitable settings, including regular schools. Document

analysis shows that policies encourage children's planned transition after early intervention into appropriate educational settings. It facilitates children's education not only in schools but also in other natural environments. Moreover, it guarantees the right of every child with SEND to learn through an IEP that meets their educational needs. The findings also show that early education policies empower parents of children with SEND through many procedures, such as obtaining parents' consent before providing any early childhood-related service, encouraging collaboration and communication with parents to ensure their full involvement in the programme, training the parents to play an active role towards their children's educations at home and in other natural environments, providing them with detailed information about educational programmes, and providing psychological support and family counselling to overcome stress caused by the transition.

Although policies are supporting the children and their parents, findings show that other components of the ecosystem are not supporting inclusion. Lack of adequate community support makes the transition process stressful for parents; this includes extended families of children with SEND that are not supporting their inclusion after ECI. Parents that transitioned children to inclusive environments said that they have been suffering from huge obstacles such as teachers' attitudes, teachers' lack of knowledge, inappropriate curriculum and the assessment mechanisms, and a lack of coordination or collaboration between related entities.

Other findings related to parents' perspectives showed that their views change according to the place of transition, stages of transition, and kind of challenges they face at each stage. For instance, parents indicated that the transition went smoothly during the provided services in ECI or when their children transitioned to POD centres, or when they feel that it is the suitable place for the child, they also pointed out the positive role that the ECI team played to make the transition smooth and easy. However, parents felt that the transition was stressful when they faced their community's negative attitudes, and when their children transitioned to regular schools, the staff was not adequately qualified to receive students with SEND. The next new educational transition setting for them also is a stressful place, as they do not have enough knowledge about it, and they are not prepared to move their children from a ''known'' to an ''unknown'' setting (Hanson et al. 2000). The findings of this study also showed that parents perceived the transition from a different angle. They considered the transition as a blurring stage

when it comes to the coordination between entities, transition pathways, the need for information, or the need to provide children with more skills.

The results of this study found statistically significant differences among participants' perspectives towards the transition pertinent to the gender of the parent in favour to fathers, and among the parents' educational level, the study was in favour of the parents with lower educational levels. The study also found significant differences regarding a child's educational status in favour of parents of children in POD centres and ECI centres, and significant differences in terms of type of educational needs in favour of children with developmental delay, and lastly, according to the place of ECI services in favour to parents of children in the Dubai and Ras Al Khaimah centres. However, no significant difference is found regarding a child's gender.

Implications and recommendations for transition after ECI have been discussed in the next section. It is hoped that the findings of this study will help related sending and receiving entities of children with SEND to gain a deeper understanding of the obstacles in facing transition from a third-party perspective, and strive for change in the ecosystem surrounding the transition, to achieve more collaboration among different respected parties to make the transition from one setting to another smoother and easier.

5.6 Implications of the Study

Focusing on the transition process from ECI to other educational settings in the UAE has required an exploration of the issue from parents' perspectives as they play crucial roles with their children in the early stages. Understanding the transition also required the investigation of ecosystems around it, and how parents view their roles according to different variables. This study has implications for ECI transition, policy and practice.

5.6.1 Transition framework:

The study findings are relevant to transition practices in the EECIP. It is the first study to investigate parents' perspectives towards the transition from ECI to other settings. It is also the first study to explore, through a mixed-methods approach, the experiences of parents, how they perceive their roles in the transition process, and to what extent early education policies in

ecosystems in the UAE are supporting them and their children to make the transition smooth and easy.

Policymakers in the MOCD, MOE and KHDA could utilise findings from this study since they provide important information about parents' perspectives and their roles in the transition, as well as how different microsystems can interact and collaborate to overcome any obstacles facing the transition process and move the children and their parents from ECI to suitable educational settings.

To implement a successful transition, a framework should be implemented which consists of several fundamental elements. The assessment of the children and their family's priorities provide parents with necessary information, and the transition decision and preparation for the children and their parents create an effective collaboration system between senders and receivers, assign the parents a role and follow up in the new setting, addressing all challenges that may occur during the implementation (Wildenger & McIntyre, 2010; McIntyre et al., 2007; Al Khatib 2016; MOCD 2019b). Senders and receivers should plan carefully for each step of transition in order to have a successful implementation. Having the coordination between government entities, particularly MOCD and MOE with carefully and well-planned transition procedures, will have a great impact on the process.

5.6.2 Parents' roles:

Parents are an essential component in contributing to the development of their children with SEND. They are also an important subset in the transition process as they play their roles beyond the ECI premises. They are the ones who are exposed to the community on a daily basis. However, the study concluded that parents are not involved enough to play active roles during the transition. Furthermore, parents reported that they are not contributing to crucial decisions related to their children's educational future. Therefore, empowering them to perform their roles requires more support, training and counselling in the transition trajectory.

There is a need for parents' access to a variety of possible roles that could assist with available transition choices for their children. Parents' participation in the design and implementation of the IFSPs in centre premises and other natural environments would be a great chance to practise their roles during the transition. ECI professionals could also provide appropriate formal and informal training regarding the parents' roles and responsibilities. This would give them more

confidence in training strategies they use to meet their children's different needs at home and in other natural environments.

5.6.3 Parents' perspectives:

The study noted that parents have multiple interchangeable perspectives towards transition according to the new placement or stages of transition. Most parents feel stress when it comes to transition to inclusive settings, as they lack community support or clear information about the new settings. In addition to the above, the study found that parents were puzzled as a result of poor coordination from entities and unclear pathways of transition. This would suggest the necessity of enabling parents with required knowledge about their children's capabilities and available transition pathways along with full community support for transition options, especially into regular schools.

5.6.4 Early education policies:

The results of this study have direct implications for transition practices into inclusive schools, particularly in the methods we use to transition children after the ECI phase. Currently, several prominent policy documents on the federal and local levels outline the need to include children with SEND into schools, while promoting ECI culture and practice require corresponding policies among different entities in order to implement them. The MOCD and MOE should update their policies to work congruently with each other to guarantee a safe transition for children and their families from the ECI to regular schools. Professionals in both sending and receiving settings should provide guidance, support, and advocacy in regards to parents' roles and responsibilities during the whole journey of transition. ECI centres, regular schools, and POD centres need to become partners in a collaborative effort to raise awareness of the transition pathways. Therefore, early education and intervention policies should be formulated in a continuum trajectory for mutual benefits to secure a safe and smooth transition for children with SEND from ECI premises to other educational settings, with full support, portraying inclusion as priority for the child and provide full support to the family's choice in case of inclusive education.

5.6.5 Children with SEND in the UAE ecosystem

The results of the study highlighted that the UAE ecosystem is not supporting the transition of children with SEND to inclusive settings, particularly children with intellectual disabilities and autism. It is still believed that POD centres are the best place for them, even though some parents are trying to transition them to inclusive settings. This study appears to support the argument for a change in attitudes of different microsystems (i.e., extended family, school teachers, peers) to support the transition to regular schools.

Increasing a positive perception towards children with SEND involves changing attitudes in the UAE culture. Campaigning awareness strategies need to be spread to the community at large in order to target the entire ecosystem. A more positive image of POD and their achievements both locally and internationally, need to be presented to the public. A great focus is needed on microsystems surrounding children (e.g., extended families, schools, teachers and peers) to foster social support of the transition and create appropriate interactions among the microsystems.

In the UAE, public awareness related to the inclusion of students with SEND, public teachers' attitudes, families' points of view and the collaboration of entities needs to be encouraged to support the suitable transition pathways. Parents, ECI professionals, regular teachers and stakeholders should coordinate and collaborate together to enhance the quality of support and care for children in ECI and their families. This would help pave the way towards a smooth and easy transition as per the UAE's early education policies.

5.7 Contribution to Mixed Methods Literature

This study supports the use of the exploratory sequential design to investigate parents' perspectives by collecting qualitative data in order to use its findings for the next quantitative stage. Parents' perspectives towards the transition process and how they view their roles were initially elicited qualitatively, as well as the policies of early education that regulate children's education and their parents' roles during the process. The qualitative part provided a more in-depth exploration of parents' feelings during the transition and contributed more insight on obstacles surrounding them in their way to find suitable educational placement for their children. However, the quantitative part collected from the descriptive and inferential analysis of the questionnaire helped to investigate the significant differences among parents' perspectives in regard to the demographic variables. This comprehensive understanding of

parents' perspectives and their roles in the transition, and how these views differ among them, would not have been possible to achieve without a mixed-methods approach of study.

The exploratory sequential mixed-methods design demonstrates a worthy in-depth depiction of the investigated issue, as it utilised interviews followed by a questionnaire. The use of document analysis of policies, on the other hand, supplemented the triangulation evidence collected from semi-structured interviews and questionnaires. The experiences of the parents explored through interviews and questionnaires demonstrated a full image of their views and the possible roles parents can play in a smooth transition in the UAE.

In order to achieve a better understanding and clarity of the parents' perspectives in both qualitative and quantitative phases, results were integrated to display the study findings in a smooth order. The qualitative findings helped emerging parents' main themes in how they viewed their roles during the transition and how they perceived the process in general. However, including the quantitative results, an investigation for the findings was also possible. Thus, enabling parents with comprehensive knowledge about the transition process would promote their active roles towards a smooth transition for their children to suitable educational settings in the near future.

5.8 Recommendations

The transition framework: Based on the study's findings, the following is a list of key recommendations that can be helpful for educators and policymakers to improve the transition process after ECI:

A fundamental outcome of this research showed a crucial need for a holistic transition approach that includes all stakeholders. The proposed framework is based on The Bioecological Theory of Development by Bronfenbrenner, which represents the ecosystems surrounding the child as enablers to their transition to the next stage. It provides suggestions for integrating ecosystem components with education stakeholders to secure a safe and smooth transition to inclusive education. The framework suggests three main pillars, constructed based on the parents' views and literature review, which are Enablers, Stakeholders, and Inclusive Educational Settings, as shown below in figure 8:

Enablers	Stakeholders	Inclusive Educational Se...

Community

Policies

ECI

Family

Child

Transition Plans

Parents MOCD MOE KHDA

Teachers Peers Physical accessibility Curriculum Differential instruction Assessment
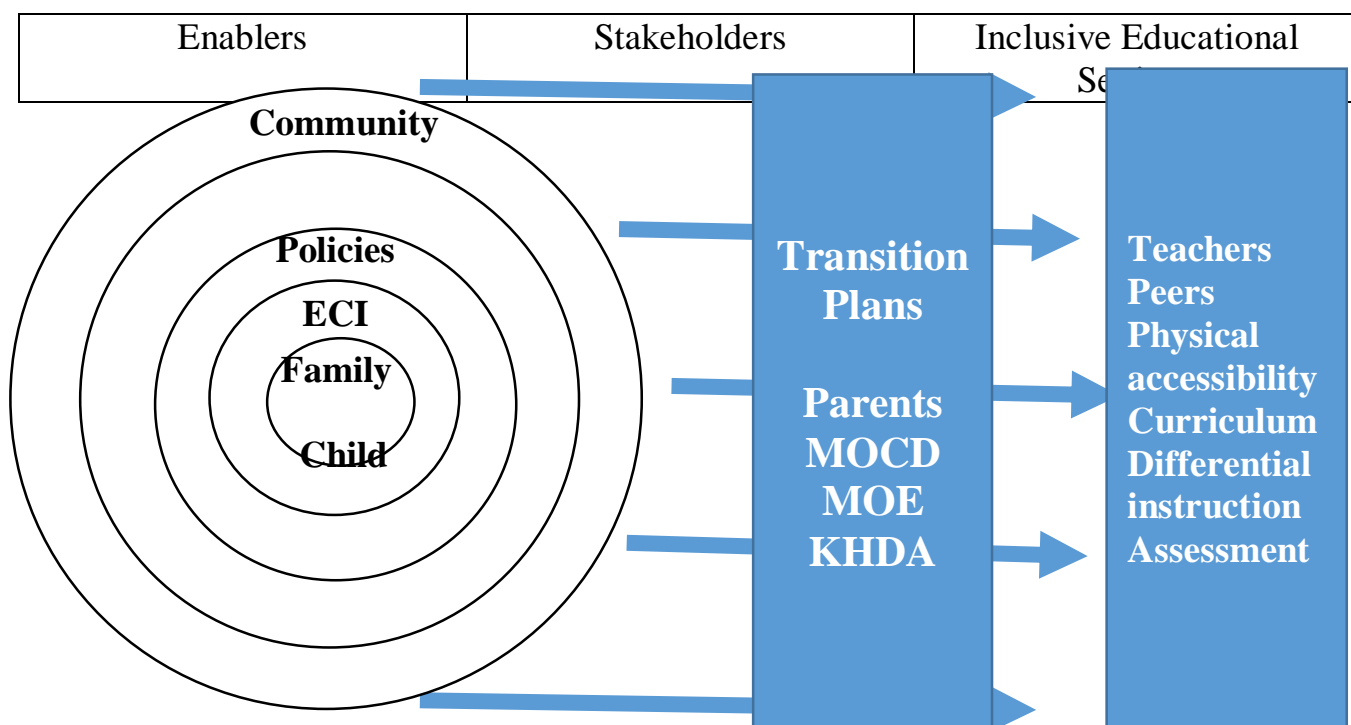
Figure 8: Early Childhood Intervention Transition Framework

The first pillar is the "Enablers" that consists of the ecosystem that children and their parents live in. These enablers support the child's transition to a later educational environment, and any deficiency in it may lead to confusion of the transition process or feelings of stress, as the parents reported.

According to Bronfenbrenner work, family represents the fundamental microsystem in which the child's life is influenced and shaped. At the time that the child has many transitions in his or her life, the move from preschool to school stage is mainly the big move. Meanwhile, the robust proximal process between parents and their child support positive transition within the mesosystem (Hayes, O'toole & Halpenny 2017). Therefore, family is considered as the core of the enablers, where family embraces the child and leads them to a safe transition.

231

The ECI is the programme that promotes services that prepare and enable the child as well as the family to play its role at later stages, so the interaction and collaboration between the family and the ECI help to bring the child to suitable placement. The positive experiences that the child has from the beginning of the transition in ECI tend to position them for more positive outcomes in the following educational setting. The other enablers are the policies that focus on the child and support their family. It is part of the exosystem that influence the development of rich learning environments and support children in the new educational settings. However, it is not enough that policies are supportive and well-formulated; they must also be applicable and consistent with each other, to support the child's smooth and specified trajectory from one educational environment to another.

The community component also is a major enabler to the transition, as the culture in which the child and their family live is automatically impact the educational settings to which the child is transitioned. The school environment is a reflection of the society attitudes, where the acceptance of the larger community to children with SEND, would lead to the acceptance of the child in the educational environments. Therefore, social awareness about inclusion is important to prepare educational environments to be inclusive.

The second pillar of the suggested framework is the "Stakeholders". The role of parents is essential in the process of transition, as parents have reported, and the transition decision must come with the parents' consent and complete assurance. Senders and receivers must also agree on the transition steps and the ultimate goal. For instance, the MOCD prepares the transition plan in cooperation with parents and the child's transitioned setting. It is very important that the school follows the transition plan, establishes a method for continuous collaboration with the ECI to follow-up the child in the new setting and ensures the proper implementation of the transition plan. The lack of proper coordination between concerned entities, as reported by the parents, led to feelings of confusion during the transition. Therefore, MOCD, MOE and KHDA should agree on a unified transition plan and use it as an official document recognised and approved by all parties.

The third and final pillar is the "Inclusive Educational Settings", which is a key factor in guaranteeing the transition. The parents involved in the study have reported that regular schools are not ready to receive children with SEND, and teachers are not qualified to teach these children and do not welcome them. Therefore, completing the transition process and ensuring

its success depends on teachers' attitudes and teaching qualifications and the schools' readiness to receive children with SEND.

To make school environments inclusive means that all children should have the opportunity to learn regardless of their learning abilities and with adequate support when needed. Creating inclusive environments requires accommodations in physical and human elements, such as physical accessibility, curriculum accommodations, differential instruction, teaching and assessment methods, as well as positive attitudes towards children by teachers and peers (UNESCO 2017). Within the Bioecological Theory of Development framework, Hayes, O'toole & Halpenny (2017) suggested a transformation in early learning environments with plentiful opportunities for children to become involved in the learning process, and to have access to different contexts with a flexible and responsive role of the educators.

In order to ensure a successful transition, this framework should involve community support, as well as active family participation through understanding and exercise of their roles and responsibilities. It is important also to create a culture of inclusion in schools among teachers, staff and peers, and invent a unified coordination mechanism among the concerned parties that ensure policies' consistency and implementation on common ground.

Parents' support: Transition choice often occurs with ECI professionals, with limited participation from parents who need the opportunity to be involved and to be able to speak up during the process of transition. Parents may need to be fully aware of the available options and their pros and cons; they need to explore ways to include their children in potential educational settings. Therefore, parents need to be enabled to make the transition decision, and more awareness sessions on their roles and responsibilities during the transition process. This empowerment comes through the collaborative team that parents should work with, as professionals in ECI facilitate decision-making and follow-up with the other team after the transition, to ensure that parents continue to play an active role in the new educational settings, and overcome the obstacles and stress that may result from the transition.

It is now important to equip parents with adequate knowledge and understanding of the transition process its implementation within the ECI premises and the next settings. Only by doing this will parents be able to take part in the transition and exercise active roles during it. The training and support programme *"Ta'alouf"* is a great example of the support programmes

233

in the UAE that offer a chance for parents and teachers to come face-to-face to discuss the challenges facing inclusion (Gaad and Thabet 2016).

Transition pathways: Parents expressed their concerns towards the future of their children after early intervention, as transition pathways are not clear for them. There are two main transition pathways from the EECI; one of them is to the regular schools, which are mainly for children with physical and sensory disabilities, and the other pathway is to POD centres which receive children with intellectual disabilities, ASD and multiple disabilities (MOCD 2019b).

Interestingly, the option of special education is still available in the UAE as a transition choice after early intervention, and it is where most of the cases are transitioned to (MOCD 2015). Therefore, the choice of a child's pathway should not be taken for granted depending on the type of disability, but rather should be discussed with parents after evaluating the child and choosing the most suitable place for them. Since special education is still a transition option in the UAE, this pathway must be narrowed and limited to severe cases that face real challenges in regular schools. However, the inclusion pathway must be expanded and not limited to specific disabilities, and should instead be opened for different types of disabilities with suitable accommodations to ensure successful inclusion.

Policies alignment: Although early education and intervention policies exist in the UAE, and support the transition of children with SEND to inclusive settings both at the federal and local levels, these policies need to be aligned with each other. A form of collaborative discussions is required between the MOCD, MOE and KHDA to create a consistent policy that responds to the children's educational needs and the needs of their families at early ages, and supports the children's transitions from one facility to another smoothly. These entities should preferably work closely with parents, practitioners in ECI, POD centres and regular schools to review the existing policies and integrate their feedback as an essential part of the policies' development. This consistency in policies will impact the understanding of transition practices and the clarity of available educational pathways after the ECI stage, and will eventually bridge the gap between policy and practice.

Entities collaboration: The transition after ECI is the responsibility of several parties, and the success of the transition in achieving its goals depends on the extent of the coordination and collaboration between these parties. Therefore, the partnership between the MOCD, the MOE

and KHDA must be strengthened and aligned with the early education and intervention policies, which will inevitably intensify these entities' ability to meet students' educational needs. Having an effective collaboration between concerned entities should start from the initial drafting of the transition plans, with agreement on the expected outcomes and the new transitional place. The roles of each entity should be defined and elaborated in the transition plans, with a common coordination mechanism to ensure the follow-up and implementation of the plans.

Teacher training: Schoolteachers are an important component of the successful transition to public education as they receive students from ECI and pursue the transition through their roles. However, teachers need comprehensive training, as demanded by the participating parents. This training will allow teachers to develop fundamental knowledge about students with SEND, understand their roles during transition and gain the practical skills needed to provide differential instruction.

Furthermore, school teachers should have training opportunities that teach them to communicate and treat students with different types of disabilities, cultivating a positive attitude towards them. The implementation of transition plans requires qualified teachers who are able to meet the educational needs of diverse students' abilities. Hence, it is highly recommended to prepare school teachers to receive transitioned students from early intervention, as well as follow the requirements of individualised transition plans. Consequently, this would alleviate parental stress and ambiguity and bridge the gap between the two educational settings.

*Culture attitudes***:** As a final thought, parents reported that the surrounding culture can support the transition to inclusive settings, as this would create an accepting environment that welcomes students with SEND and recognises their rights to learn side by side with their peers in regular schools. It is necessary to gather all community efforts to build a culture of inclusion that tolerates people with different abilities and accepts special needs. This culture can be promoted by recognising SEND from an early age and dealing with them as a normal component in society. Such inclusive societies, that promote inclusive programmes and support collective initiatives that do not leave anyone behind, will unintentionally reflect this philosophy on schools and enrich diverse abilities in a place for all.

The UAE has taken a very important step in the direction of an inclusive community and changing attitudes towards disability, by adopting the new terminology of "people of determination," to recognise the capabilities and achievements of persons with disabilities in several aspects (MOCD 2017). A new policy has also been approved by the cabinet to protect POD from different types of abuse, particularly emotional abuse, which includes depriving POD of their right to education, rehabilitation, and basic services on an equal basis with others (MOCD 2019c). This will hopefully empower the status of POD in the community, and promote awareness about their rights to adequate education, as well as community inclusion.

5.9 Original Contribution of this Study

Several studies globally have contributed to developing knowledge transition from ECI (Lee 2015; Foster 2013); however, there is a dearth of research on this topic in the Arab world. By investigating the transition from ECI to other educational settings from the parents' perspectives, and trying to answer questions related to parents' roles during the transition (considering the UAE ecosystem), this study contributes to the growing literature in ECI and transition in particular in the UAE, the region, and even global literature.

This study focuses on a topic for which there is a lack of research, particularly in the Arab world. A great deal of emphasis has been placed on special education and inclusion from the perspectives of professionals and policymakers. However, little attention is given to parents' views, particularly in the early intervention stage. Parents' viewpoints are seldom studied, despite the fact that they spend more time with their children than professionals, and their roles and decisions in the transition process have a great impact on their child's future. Parents understand how the transition to suitable settings has tremendous importance in the life of young children and how it facilitates challenges and complexities related to inclusion and ecosystems.

This study broadened what "transition" connotes from the parents' perspective. In the study, their perspectives towards transition, including their roles, have gained focus as never before in the UAE, as have their struggles and feelings during the transition to find better places for their children. To some extent, the results of this study certainly expanded and further reinforced previous research globally, and opened the way for a new area that needs further research in the country and the region.

The study provided an accurate and deep understanding into current ECI transition, policies, and practices in the UAE, which can offer a stepping stone for adapting a collaborative transition framework between all related entities in the UAE context, as well as place parents with their children at the core of the process to enable them to play active roles during the transition. Hopefully, this study will inspire more research projects in the field of ECI in the UAE.

5.10 Implications for Further Research

Given the limitations of this study and based on its findings, the following recommendations are made for further research:

1- This study could be replicated using larger samples for the qualitative aspects, and the perspectives of other related participants, such as teachers and professionals, could be captured.

2- More studies in relation to the transition process after ECI are needed to provide a broader picture in the other Emirates of Abu Dhabi and Sharjah, as these two Emirates have their own ECI programmes affiliated with their local governments.

3- A comparative study between a replicated study in local governments and this study would reveal the similarities and differences between local and federal ECI programmes.

4- A follow-up study would be helpful if done five years later to follow-up on the changes in parents' perspectives towards the transition process and how their roles in the process will have changed.

5- It is recommended that a study following up on how the ecosystem in the UAE culture would encourage the transition of children with SEND to inclusive settings is conducted.

6- Since the majority of children are transitioned to POD centres, it is suggested that further studies are conducted to explore the changes in these percentages over time, taking into account variables such as type of disability.

7- This study highlighted that the parents consider the transition as a stressful process for them. Therefore, further studies are needed to investigate how parents deal with these stresses and how it affects the child's educational future.

5.11 A Final Thoughts

As a psychologist who has been working in the field of special education in the UAE for more than seventeen years, and particularly with young children with SEND, their parents and professionals, my personal background has had a great impact on investigating the transition that connects ECI with other educational settings. As an assistant researcher worker for many years with a team of professional researchers at UAE University, and who has investigated very important aspects of disability status in the UAE, I have also gained new experiences through this study in exploring a new area of research that hasn't been addressed before. And lastly, as an ECI supervisor currently working in the EECIP, the findings of the study mean a lot to me through its implications that would lead to any transformations in the UAE transition system, and it was a spectacular feeling for me that I have played a small role in showing the need to review the transition process based on the parents' views.

References

Acar, S. & Akamoğlu, Y. (2014). Practices for parent participation in early intervention/ early childhood special education. *International Journal of Early Childhood Special Education*, vol. 6(1), pp. 80-101.

Ahtola, A., Silinskas, G., Poikonen, P. L., Kontoniemi, M., Niemi, P., & Nurmi, J. E. (2011). Transition to formal schooling: do transition practices matter for academic performance?. *Early Childhood Research Quarterly,* vol. 26(3), pp. 295–302.

Ainscow, M. (2007). Taking an inclusive turn. *Journal of Research in Special Educational Needs*, vol. 7 (1), pp. 3–7.

Ainscow, M. (2016). Diversity and equity: A global education challenge. *New Zealand Journal of Educational Studies*, vol. 51 (2), pp. 143–155.

Alahbabi, A. (2009). K-12 Special education teachers' attitudes toward the inclusion of students with special needs in general education class in the United Arab Emirates (UAE). *International Journal of Special Education.* [online]. vol. 24 (2), [Accessed 1 October 2018]. Available at: http://www.internationaljournalofspecialeducation.com/articles.cfm?y=2009&v=24&n=2

Alborno, N.E., (2013). *The journey into inclusive education: A case study of three Emirati government primary schools.* EdD Thesis. The British University in Dubai. [Access 15 Jan 2017]. Available at: http://bspace.buid.ac.ae/handle/1234/512

Alliston L. (2007). *Principles and practices in early intervention: A literature review for the Ministry of Education* [online]. New Zealand: Research New Zealand. [Accessed 28 June 2018]. Available at: http:// www.educationcounts.govt.nz.

Alobeidli, A., (2017). *An investigative study of the factors affecting the attitudes of female Emirati teachers toward the inclusion of students with intellectual disabilities in the government primary schools in Dubai, the United Arab Emirates.* EdD Thesis. The British University in Dubai. [Access 15 Jan 2017]. Available at: http://bspace.buid.ac.ae/handle/1234/512

Alshamsi, A. (2010). *Promoting the right to work of disabled people in the United Arab Emirates: Lessons drawn from the experiences of the US, Great Britain, Sweden and Belgium*. Ph.D. Thesis. School of Law, University of Essex.

American Psychiatric Association (APA). (2013). *Diagnostic and Statistical Manual of Mental Disorders, (DSM-5).* 5th ed. Washington, DC, United States: American Psychiatric Publishing.

Ary, D., Jacobs, L., Sorensen, C. & Walker, D. (2013). *Introduction to research in education*. New York: Cengage Learning.

Al Khatib, J. (2016). *Quality standards for early intervention services guide.* Dubai: MOCD, Department of welfare and rehabilitation of persons with disabilities.

Bailey, D., Bruder, M., Hebbeler, K., Carta, J., Defosset, M., Greenwood, C.,Barton, L. (2006). Recommended outcomes for families of young children with disabilities. *Journal of Early Intervention*, vol. 28, pp. 227-243.

Bailey, D., Raspa, M. and Fox, L. (2011). What is the future of family outcomes and family-centered services?. *Topics in Early Childhood Special Education*, 31(4), pp.216-223.

Bampi, L.N. da S., Guilhem, D. & Alves, E.D. (2010). Social model: A new approach of the disability theme. *Revista Latino-Americana de Enfermagem*, vol. 18 (4), pp. 816–823.

Barnes & C. Thomas (eds). *Disabling barriers* – enabling environments. 2nd. ed. London: Sage. Ch. 1.

Bergman, M. M., (2008). *Advances in mixed methods research*. London: SAGE Publications.

Bowen, S. (2016). Early intervention: A multicultural perspective on d/Deaf and hard of hearing multilingual learners. *American Annals of the Deaf*, vol. 161(1), pp. 33–42.

Bowen, G. A. (2009). Document analysis as a qualitative research method. *Qualitative Research Journal*, vol. 9(2), pp. 27-40.

Bradshaw, K., Tennant, L. & Lydiatt, S., (2004). Special education in the United Arab Emirates: anxieties, attitudes and aspirations. *International Journal of Special Education,* vol.19(1), pp. 49-55.

Brisenden, S., (1986). Independent living and the medical model of disability, *Disability, Handicap and Society.* vol. 1(2), pp. 173, 178.

Bronfenbrenner, U. (1979). *The ecology of human development: experiments by nature and design.* Cambridge: Harvard University Press.

Bronfenbrenner, U. (1994). Ecological models of human development. In International Encyclopedia of Education, vol. 3, 2nd. Ed. Oxford: Elsevier. Reprinted in: Gauvain, M. & Cole, M. (Eds.), Reading on the development of children, 2nd Ed. pp. 37-43. NY: Freeman.

Bronfenbrenner, U., & Morris, P. A. (1998). The ecology of developmental processes. *Handbook of Child Psychology*, vol. 1, pp. 993-1028.

Brown, S. & Guralnick, M. (2012). International human rights to early intervention for infants and young children with disabilities, tools for global advocacy. *Infants & Young Children.* vol. 25(4), pp. 270-285.

Bruder, M.B. (2010). Early childhood intervention: A promise to children and families for their future. *Exceptional Children*, vol. 76(3), pp. 339–355.

Buhumaid, H. (2018). Her Excellency Hessa bint Essa Buhumaid speech, Minister of Community Development in the UAE. *Global Disability Summit*, International Disability Alliance London. July.

Burford, S.L. (2005). *Transition to kindergarten for children with disabilities: A survey of family experiences, appraisal and coping.* (Doctoral dissertation). Retrieved from ProQuest Dissertations and Theses database. (UMI No. 3194535).

Cabinet Decree (2017). *Cabinet Decree No. (1/6w) for the year 2017, session No.* (6), National policy to empower people of determination, United Arab Emirates.

Cabinet Decree (2018). *National Classification of Disabilities (people of determination) in the State, annexed to the Cabinet Decree No. (3) for the year 2018*. United Arab Emirates.

Carlson, E., Daley, T., Bitterman, A., Heinzen, H., Keller, B., Markowitz, J. & Riley, J. (2009). *Early school transitions and the social behavior of children with disabilities: Selected from the pre-elementary education longitudinal study.* Washington, DC: National Center for Special Education Research.

Carroll, C. (2016). *Understanding early intervention services in Ireland: a conceptual evaluation*, [online]. PhD. Thesis. National University of Ireland Galway. [Accessed 24 September 2018]. Available at: http://hdl.handle.net/10379/6361.

Carroll, C. & Sixsmith, J. (2016). A trajectory of relationship development for early intervention practice for children with developmental disabilities. *International Journal of Therapy and Rehabilitation*, vol. 23(3), pp. 131-140.

Cohen, L., Manion, L. & Morrison, K. (2007). *Research Methods in Education*. 6th edn. Oxon: Routledge.

Collins, K., Onwuegbuzie, A., & Sutton, I. (2006). A model incorporating the rationale and purpose for conducting mixed-methods research in special education and beyond. *Learning Disabilities: A Contemporary Journal*, 4(1), 67-100.

Community Development Authority (CDA). (2018). *Dubai Early Childhood Development Centre.* [Accessed 24 September 2018]. Available at: https://www.cda.gov.ae/en/socialcare/peoplewithdisabilities/decdc/pages/childhoodcenter.aspx.

Connolly, N. & Devaney, C. (2018) Parenting Support: Policy and Practice in the Irish Context. *Child Care in Practice*, vol. 24(1), pp. 15-28.

Creswell, J. (2012). *Educational research, planning, conducting, and evaluating quantitative and qualitative research.* 4th edn. Boston: Pearson.

Creswell, J. (2013). *Qualitative inquiry & research design: choosing among the five approaches*. Thousand Oaks, CA: Sage Publications, Inc.

Creswell, J. (2014). *Research design, qualitative, quantitative, and mixed methods approaches.* 4th edn. Thousand Oaks, CA: Sage.

Creswell, J.W. & Miller, D. L. (2000). Determining validity in qualitative inquiry. *Theory into Practice*, vol. 39(3), pp. 124–131.

Creswell, J. & Plano C. (2007). *Designing and conducting mixed methods research.* Thousand Oaks, CA: SAGE Publications.

Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process.* Thousand Oaks, CA: Sage.

Curle, D., Jamieson, J., Poon, B., Buchanan, M., Norman, N. & Zaidman-Zait, A. (2017a). Working together: communication between stakeholders during the transition from early intervention to school for children who are deaf or hard of hearing. *Exceptionality Education International.* vol. 27 (2), pp. 54-71.

Curle, D., Jamieson, J., Buchanan, M., Poon, B., Zaidman-Zait, A. & Norman, N. (2017b). The transition from early intervention to school for children who are deaf or hard of hearing: Administrator perspectives, *Journal of Deaf Studies and Deaf Education*, vol. 22 (1), pp. 131–140.

DeMeures, P. (2000). *Transitions for early childhood special education to kindergarten: A study of three transition plans and their effectiveness as reported by families and kindergarten teachers.* Retrieved from ProQuest Dissertations.

Dubai Health Authority (DHA). (2016). *Health inclusive policy – draft.* Dubai

Dukmak, S. (2009). Rehabilitation services in the UAE as perceived by families of children with disabilities. *Journal of rehabilitation,* vol. 75(4). pp. 27-34.

Dunst, J. (2002). Family-centered practices: Birth through high school. *Journal of Special Education,* vol. 36, pp. 139–147.

Dunst, C., Bruder, M., Trivette, C. & McLean, M. (2001). Natural learning opportunities for infants, toddlers and pre-schoolers. *Young Exceptional Children*, vol. 4(3), pp. 18 - 25.

Eapen, V., Grove, R., Aylward, E., Joosten, A., Miller, S., Watt, G., Fordyce, K., Dissanayake, C., Maya, J., Tucker, M., & DeBlasio, A. (2017). Transition from early intervention program to primary school in children with autism spectrum disorder, *World Journal of Clinical Pediatrics,* vol. 6 (4), pp. 169–175.

Elhoweris, H., (2008). The effect of the child's disability on United Arab Emirates in-service teachers' educational decisions regarding gifted and talented children. *Educational Studies*, vol.34(5), pp. 557-564.

Epley, P., Summers, J., & Turnbull, A. (2011). Family outcomes of early intervention: Families' perceptions of need, services, and outcomes. *Journal of Early Intervention*, 33(3), pp.201-219.

Federal Competitiveness and Statistics Authority (FCSA). (2019). *Demography and Social Statistics* [online]. Dubai: FCSA. [Accessed 20 November 2019]. Available at: https://fcsa.gov.ae/en-us/Pages/Statistics/Statistics-by-Subject.aspx#/%3Ffolder=Demography%20and%20Social/Population/Population&subject=Demography%20and%20Social

Fontil, L. & Petrakos, H. (2015). Transition to school: the experiences of Canadian and immigrant families of children with autism spectrum disorders. *Psychology in the Schools*, vol. 52(8), pp. 773-788.

Foran, S. & Sweeney, J. (2010). Accessing specialist early intervention for preschool children. *Learning Disability Practice,* vol. 13(2), pp. 30-35.

Foster, K. (2013). *Self-reported early intervention transition practices of special education directors in southwestern Pennsylvania: implications for policy and practice* [online]. EdD. Thesis. University of Pittsburgh. [Access 3 Dec 2017]. Available at: https://pdfs.semanticscholar.org/bdfa/49c441c2145539e8b3e79591f92e150d2a07.pdf

Fraenkel, J. R. & Wallen, N. E. (2009). *How to design and evaluate research in education.* 7th edn. McGraw-Hill.

Franco, v., Melo, M., Santos, G., Apolónio, A., & Amaral, L. (2017). A national early intervention system as a strategy to promote inclusion and academic achievement in Portugal. *Frontiers in Psychology.* [online]. Vol. 8. [Access 8 Dec 2019]. Available at: https://www.frontiersin.org/articles/10.3389/fpsyg.2017.01137/full

Gaad, E. (2001). Educating children with Down's syndrome in the United Arab Emirates, *British Journal of Special Education*, v 28(4). pp. 195-203.

Gaad, E. (2004). Cross-cultural perspectives on the effect of cultural attitudes towards inclusion for children with intellectual disabilities. *International Journal of Inclusive Education,* vol. 8(3), pp. 311-328.

Gaad E. (2006). The social and educational impacts of the first national Down syndrome support group in the UAE. *Journal of Research in Special Educational Needs,* vol. 6 (3), pp. 134–142.

Gaad, E. (2011). *Inclusive education in the Middle East*. New York: Routledge.

Gaad, E. (2013). Assessing the needs of people with disabilities in the Emirate of Abu Dhabi, UAE. *Journal of Education and Vocational Research,* vol. 4(10), pp. 331-338.

Gaad, E. (2015). Look who's coming to school: the Emirati student voice in an intervention-based study on inclusion of learners with intellectual disabilities in Emirati mainstream

government schools. *Journal of Research in Special Educational Needs* · vol. 15(2)· pp. 130–138.

Gaad, E. & Khan, L. (2007). Primary mainstream teachers' attitudes towards inclusion of students with special educational needs in the private sector: a perspective from Dubai. *International Journal of Special Education*, vol. 22(2), pp. 95-109.

Gaad, E. & Thabet, R.A., (2016). Behaviour support training for parents of children with autism spectrum disorder. *Journal of Education and Learning*, vol.5(1), pp. 133- 153.

Gallagher, D.J., Connor, D.J. & Ferri, B.A. (2014). Beyond the far too incessant schism: Special education and the social model of disability. *International Journal of Inclusive Education*, vol. 18 (11), pp. 1120–1142.

Gavidia-Payne, S., Meddis, K. & Mahar, N. (2015). Correlates of child and family outcomes in an Australian community-based early childhood intervention program. *Journal of Intellectual and Developmental Disability*, vol. 40 (1), pp. 57–67.

Gatling, V. (2009). *The transition from early intervention to early childhood special educaton programming: three case studies* [online]. EdD. Thesis. Virginia Polytechnic Institute and State University. [Access 3 Dec 2017]. Available at: https://vtechworks.lib.vt.edu/bitstream/handle/10919/26632/GatlingDissertationfinal.pdf.

Ghanooni, A.R., (2012). A review of the history translation studies. *Theory and Practice in Language Studies*, vol.2(1), pp. 77-85.

Glesne, C. (2006). *Becoming qualitative researchers, an introduction*. 3rd edn. Boston: Pearson Education.

Guralnick, M. (2001). A developmental systems model for early intervention. *Infants and Young Children*, vol. 14(2), pp. 1-18.

Guralnick, M. (2017). early intervention for children with intellectual disabilities: an update. *Journal of Applied Research in Intellectual Disabilities,* vol. 30, pp. 211–229.

Guralnick, M. & Bruder, M. (2016). Early childhood inclusion in the United States. *Infants & Young Children*, vol. 29(3), pp. 166–177.

Hackman, C. & Jones, K. (2005*).* 'Inclusive practice for children with special education needs', in T. Waller (eds). *An introduction to early childhood. a multi-disciplinary approach.* London: Paul Chapman Publishing.

Hanson, M., Beckman, P., Horn, E., & Sandall, S. (2000). Entering preschool: family and professional experiences in this transition process. *Journal of Early Intervention,* vol. 23(4), pp. 279-293.

Hanson W., Creswell J. W., Clark, P., V., Petska K. & Creswell J. D. (2005). Mixed methods research designs in counselling psychology. *Journal of Counseling Psychology*, 52, 224-235.

Hart, K., Graziano, P., Kent, K., Kuriyan, A., Garcia, A., Rodriguez, M., & Pelham, W. (2016). Early intervention for children with behaviour problems in summer settings: results from a pilot evaluation in head start preschools. *Journal of Early Intervention,* vol. 38(2), pp. 92-117.

Hayes, N., O'toole, L., & Halpenny, A. (2017) *Introducing Bronfenbrenner, a guide for practitioners and students in early years education*. New York: Routledge.

Ivankova, N., Creswell, J. & Stick, S. (2006). Using mixed-methods sequential explanatory design: from theory to practice. *Field Methods*, vol.18 (1), pp. 3-20.

Jaco, U., Olisaemeka, A., & Edozie, I. (2015). Developmental and communication disorders in children with intellectual disability: the place early intervention for effective inclusion. *Journal of Education and Practice*, vol. 6(36), pp. 42-46.

Janus, M., Kopechanski, L., Cameron, R., & Hughes, D. (2008). In transition: Experiences of parents of children with special needs at school entry. *Early Childhood Education Journal,* vol. 35(5), pp. 479-485.

Jinnah, H.A., & Walters, L.H. (2008). Including parents in evaluation of a child development program: relevance of parental involvement. *Early Childhood Research & Practice* [online]. vol. 10(1). [Accessed 6 December 2017]. Available at: https://files.eric.ed.gov/fulltext/EJ848824.pdf

Johnson, B. & Christensen, L. (2008) *Educational Research: Quantitative, Qualitative and Mixed Approaches*. 3rd edn. London: Sage.

Johnson, B. & Christensen, L., (2012). Educational Research: Quantitative, Qualitative, and mixed Approaches. 4th. edn. Thousand Oaks: SAGE Publications.

Johnson, B. & Christensen, L., (2014). Educational Research: Quantitative, Qualitative, and mixed Approaches. 5th. edn. Thousand Oaks: SAGE Publications.

Johnson, B. & Onwuegbuzie, A. (2004). Mixed Methods Research: A Research Paradigm Who's Time Has Come. *Educational Researcher*, vol. 33 (7), pp.14-26.

Kang, J. (2010). *Kindergarten transition: Does family involvement make a difference in children's early school adjustment.* (Doctoral dissertation). Retrieved from ProQuest Dissertation and Theses database. (UMI No. 3412920).

Kanter, A. (2003). The globalization of disability rights law, Syracuse *Journal of International Law and Commerce,* vol. 30, pp. 241-262.

Knowledge and Human Development Authority (KHDA). (2006). Law no. (30) of 2006 establishing the knowledge and human development authority in Dubai [online]. [Accessed 02 August 2018]. Available at: https://www.khda.gov.ae/CMS/WebParts/TextEditor/Documents/Law_No_30_of_2006_Establishing_KHDA_Arabic.pdf

Knowledge and Human Development Authority (KHDA). (2017). *Dubai Inclusive Education Policy Framework*. United Arab Emirates, Dubai: Knowledge and Human Development Authority.

Kohler, F.W. (1999). Examining the services received by young children with autism and their families: A survey of parent responses. *Focus on Autism and Other Developmental Disabilities,* 14(3), pp. 150-158.

Kotrlik, J. & Higgins, C. (2001). Organizational research: determining appropriate sample size in survey research appropriate sample size in survey research. *Information Technology, Learning, and Performance Journal*, vol. 19(1), pp. 43-50.

Kraft-Sayre, M. & Pianta, R. (2000). *Enhancing the transition to kindergarten linking children, families, & schools* [online]. Doctor of Education Thesis. University of Virginia. [Accessed 6 December 2017]. Available at: https://www.pakeys.org/uploadedContent/Docs/Transition%20into%20Formal%20Schooling/Enhancing%20the%20Transition%20to%20Kindergarten%20rev.PDF.

Krejcie, R.V. & Morgan, D.W. (1970). Determining sample size for research activities. *Educational and Psychological Measurement,* vol. 30, pp. 607-610.

Kruse, A., D. (2012). *Understanding experiences of families and their partnerships as they navigate early intervention, transition, and early childhood special education* [online]. Doctor of philosophy thesis, Iowa State University. [Accessed 6 December 2017]. Available at: http://lib.dr.iastate.edu/cgi/viewcontent.cgi?article=3682&context=etd.

Kumar, R. (2005). *Research Methodology: A Step by Step Guide for Beginners.* 2nd edn. London: SAGE Publications.

Kvale, S. (1996). *Interviews: an introduction to qualitative research interviewing*. Thousand Oaks, CA: Sage Publications.

Lantolf, J.P. (2000). 'Introducing sociocultural theory', *in T*. Lantolf (eds). *Sociocultural theory and second language learning*. Oxford University Press.

Law, M., Hanna, S., King, G., Hurley, P., Kertoy, M., & Rosenbaum, P. (2003). Factors affecting family-centred service delivery for children with disabilities. Child, Care. *Health and Development Journal*, vol. 29(5), pp. 357-366.

Lee, E. & Song, D. (2015). *Maritime logistics value in knowledge management,* New York: Routledge.

Lee, Y. (2015). The paradox of early intervention: families' participation driven by professionals throughout service process. *International Journal of Child Care and Education Policy,* vol. 9(4), pp. 1-19.

Lincoln, Y., Lynham, S. & Guba, E. (2011). Paradigmatic controversies, contradictions, and emerging confluences, revisited. *The Sage Handbook of Qualitative Research*, vol. 4, pp. 97-128.

Lovett, D. & Haring, K. (2003). Family perceptions of transitions in early intervention. *Education and Training in Developmental Disabilities,* vol. 38(4), pp. 370–377.

Lu, W. & Fang, H., (2012). Reconsidering peter newmark's theory on literal translation. *Theory and Practice in Language Studies*, vol. 2(4), pp. 741-746.

Malatsi, N., Mpuang, K., & Mukhopadhyay, S. (2015). Early childhood interventions for children with disabilities in Botswana: policy and practice, *The journal of the international association of special education*, vol. 16(1), pp. 68-76.

Marshall, J., Adelman A., & Kesten S. (2017). Parents' experiences navigating intervention systems for young children with mild language delays, *Journal of Early Intervention,* vol. 39(3), pp. 180-198.

Massachusetts Department of Public Health (MDPH). (2013). *Early intervention operational standards*. 1st edn. Viewed 24 March. 2018. http://www.mass.gov/eohhs/docs/dph/com-health/early-childhood/ei-operational-standards.pdf.

Maxwell, J.A., (2005). *Qualitative research design: an interactive approach*. 2nd edn. Thousand Oaks(CA): Sage Publications.

McIntyre, L.L., Eckert, T. L., Fiese, B. H., DiGennaro, F. D., & Wildenger, L. K. (2007). The transition to kindergarten: family experiences and involvement. *Early Childhood Education Journal*, 35, pp. 83-88.

McWilliam R. (2016). 'Birth to three: early intervention'. In Reichow B., Boyd B., Barton E., Odom S. (eds). *Handbook of early childhood special education*. Springer, Cham.

Merriam, S.B. (2009). *Qualitative research: a guide to design and implementation.* San Francisco: Jossey-Bass.

Mertens, D. (1998). *Research methods in education and psychology, integrationg diversity with quantitative & qualitative approaches.* Thousand Oaks, CA: Sage.

Mertens, D. M. & McLaughlin, J. A. (1995). *Research Methods in Special Education.* Thousand Oaks, CA: Sage.

Mertens, D. M. & McLaughlin, J. A., (2004). *Research and evaluation methods in special education*, Thousand Oaks, CA: Sage.

Ministry of Community Development (MOCD). (2015). *Annual report*, Dubai: Ministry of Community Development.

Ministry of Community Development (MOCD). (2017). *National policy to empower people of determination,* Dubai: Ministry of Community Development.

Ministry of Community Development (MOCD). (2019a*). Statistical database in the Department of Care and Rehabilitation of People of Determination,* Dubai: Ministry of Community Development.

Ministry of Community Development (MOCD). (2019b*). family journey guidelines in the emirates early childhood intervention programme,* Dubai: Ministry of Community Development.

Ministry of Community Development (MOCD). (2019c*). Protection policy for people of determination-draft.* Dubai: Ministry of Community Development.

Ministry of Education (MOE). (2010). *School for All: general rules for the provision of special education programs and services (public & private schools)*, Dubai: Ministry of Education.

Ministry of Education (MOE). (2017). *UAE education system 2015-2017, three years of achievements* [online]. Dubai: Ministry of Education. [Accessed 26 July 2018]. Available at: https://www.moe.gov.ae/Ar/Legislation/Pages/Laws.aspx.

Ministry of Education (MOE). (2018). *Policy framework for inclusive education*, *draft*, Dubai: Ministry of Education.

Ministry of Education (MOE) & Ministry of Community Development (MOCD). (2016). *Memorandum of Understanding between the Ministry of Education and Ministry of Community Development regarding students with disabilities programmes and services,* Dubai: MOE & MOCD.

Ministry of Health and Prevention (MOHAP). (2014). *Ministry of Health Launches UAE National Polio Immunization Campaign* [online]. Dubai: Ministry of Health and Prevention. [Accessed 19 November 2019]. Available at: https://www.mohap.gov.ae/en/MediaCenter/News/Pages/1361.aspx.

Ministry of Social Affairs (MSA). (2006). *Federal Law No. (29) for the year 2006 concerning the rights of disabled, Amended federal law No. (14) for the year 2009.* Dubai: Ministry of Social Affairs.

Ministry of Social Affairs (MSA). (2008). *Strategic Plan of the Ministry of Social Affairs 2008-2010*, Dubai: Ministry of Social Affairs.

Ministry of Social Affairs (MSA). (2010). *Minister resolution no. (479) in the year 2010 for integration children with disabilities in nurseries*. Dubai: Ministry of Social Affairs.

Ministry of Social Affairs (MSA). (2011). *Strategic Plan of the Ministry of Social Affairs 2011-2013,* Dubai: Ministry of Social Affairs.

Ministry of Social Affairs (MSA). (2014). *Ministerial decree number (890) on the implementation of the early intervention programme*. Dubai: Ministry of Social Affairs.

Morse, J.M. (1991). Approaches to qualitative-quantitative methodological triangulation. *Nursing Research*, vol. 40(1), pp. 120–123.

Muijs, D. (2011). *Doing Quantitative Research in Education with SPSS*. 2nd edn. Thousand Oaks, CA: Sage.

Niles, M. & Byers, L. (2008). History matters: United States policy and indigenous early childhood intervention*, Contemporary Issues in Early Childhood*, vol. 9(3), pp. 191-201.

Ngui, E.M., & Flores, G. (2006). Satisfaction with care and ease of using health care services among parents of children with special health care needs: The roles of race/ethnicity, insurance, language, and adequacy of family-centred care. *Paediatrics*, vol. 117(4), pp. 1184-1196.

Noyes-Grosser, D., Rosas, S., Goldman, A., Elbaum, B., Romanczyk, R. & Callahan, E. (2014). Conceptualizing child and family outcomes of early intervention services for children with ASD and their families, *Journal of Early Intervention,* vol. 35(4), pp. 332-354.

Raspa, M., Bailey, D.B., Nelson, R., Robinson, N., Simpson, M., Guillen, C., Olmsted, M. G., & Houts, R. M. (2010). Measuring family outcomes in early intervention: findings from a large-scale assessment. *Exceptional Children,* 76(4), pp.496-510.

Odom, S.L., Brantlinger, E., Gersten, R., Horner, R.H., Thompson, B. & Harris, K.R. (2005). Research in special education: scientific methods and evidence-based practices. *Exceptional Children*, vol. 71(2), pp. 137–148.

Odom, S.L., Hanson, M.J., Blackman, J.A., & Kaul, S. (2003). *Early intervention practices around the world.* Baltimore, MD: Brookes.

Oliver, M. (1990). *The individual and social models of disability* [online]. [Accessed January, 13 2020]. Available at: https://disability-studies.leeds.ac.uk/wp-content/uploads/sites/40/library/Oliver-in-soc-dis.pdf.

Oliver, M. (2004). 'If I had a hammer: The social model in action', in J. Swain, S. French, C. Barnes & C. Thomas (eds). *Disabling barriers – enabling environments*. 2nd. ed. London: Sage. Ch. 1.

Oliver, M. (2013). The social model of disability: thirty years on. *Disability & Society*, vol. 28 (7), pp. 1024–1026.

Organisation, E.C. & Development. (2012). *Equity and quality in education supporting disadvantaged students and schools*. Paris: OECD.

Pang Y. (2010). Facilitating family involvement in early intervention to preschool transition. *The School Community Journal,* vol. 20(2), pp. 183-198.

Peters, S. (2010). *Literature review: transition from early childhood education to school.* New Zealand: Report to Ministry of Education.

Petrakos, H.H. & Lehrer, J.S. (2011). Parents' and teachers' perceptions of transition practices in kindergarten. *Exceptionality Education International,* vol. 21(2), pp. 62–73.

Podvey, M., Hinojosa, J. & Koenig K. (2011). Reconsidering insider status for families during the transition from early intervention to preschool special education, *The Journal of Special Education,* vol. 46(4) pp. 211-222.

Quah, M. (2006). Family-centred early intervention in Singapore, *International Journal of Disability. Development and Education*, vol. 44(1), pp. 53-65.

Rabinowicz, S. (2018) Knowledge translation supports, challenges, and opportunities for change in early intervention. *Infants & Young Children*, vol. 31(2), pp. 144–156.

Rattray, J. & Jones, M. (2007). Essential elements of questionnaire design and development. *Journal of Clinical Nursing*, vol. 16(2), pp.234-243.

Rimm-Kaufman, S., & Pianta, R. (2000). An ecological perspective on the transition to kindergarten: a theoretical framework to guide empirical research. *Journal of Applied Developmental Psychology*, vol. 21(5), pp. 491-511.

Rosenkoetter, S., *Hains, A. & Dogaru, C.* (2007) Successful transitions for young children with disabilities and their families: roles of school social workers. *Children & School,* vol. 29(1), pp. 25-34.

Rosenkoetter, S., Schroeder, C., Rous, B., Hains, A., Shaw, J., & McCormick, K. (2009). *A review of research in early childhood transition: Child and family studies. Technical Report #5* [online]. Lexington: University of Kentucky, Human Development Institute, National Early Childhood Transition Center. Available at: http://www.niusileadscape.org/docs/FINAL_PRODUCTS/LearningCarousel/ResearchReviewTransition.pdf.

Rous, B., Hallam, R. (2012). Transition services for young children with disabilities: research and future directions. *Topics in Early Childhood Special Education,* vol. 31(4) pp. 232–240.

Rous, B., Hallam, R., Harbin, G., McCormick, K., & Jung, L. A. (2007). The transition process for young children with disabilities: a conceptual framework. *Infants & Young Children,* vol. 20(2), pp. 135-148.

Rous, B., Harbin, G., Hallam, R., McCormick, K., & Jung, L. A. (2006). 'The research base'. in B. Rous & R. Hallam (eds.), *Tools for transition in early childhood: A step-by-step guide for agencies teachers, and families.* Baltimore, MD: Brookes.

Rous, B., Myers, C. & Stricklin, S. (2007). Strategies for supporting transitions of young children with special needs and their families. *Journal of Early Intervention,* vol. 10(1), pp. 1-18.

Rune j.S., (2003*). Early childhood development and children with disabilities in developing countries* [online]. [Accessed 10 October 2016] Available at: http://siteresources.worldbank.org/DISABILITY/Resources/280658-1172613258997/EarlyChildhoodSimeonsson.pdf

Russell, F. (2003). The expectations of parents of disabled children. *British Journal of Special Education,* vol. 50(3), pp. 44-149.

Sautner, B., (2008). Inclusive, safe and caring schools: connecting factors. *Developmental Disabilities Bulletin,* vol.36 (1&2), pp. 135-167.

Schischka, J., Rawlinson, C., & Hamilton, R. (2012). Factors affecting the transition to school for young children with disabilities. *Australian Journal of Early Childhood, 37* (4), 15-23.

Shapiro, Joseph (1993). *No pity: people with disabilities forging a new civil rights movement.* New York: Times Books.

Sharjah City for Humanitarian Services (SCHS). (2019a). *About. Our History.* [online]. [Accessed 20 November 2019]. Available at: https://www.schs.ae/en/our-history

Sharjah City for Humanitarian Services (SCHS). (2019b). *Early Intervention Center.* [online]. [Accessed 21 November 2019]. Available at: https://www.schs.ae/ar/early-intervention-center.

Seidman, I. (2012). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. Teachers college press.

Siddiqua, A. (2014). *Exploring experiences of parents of children with special needs at school entry: a mixed methods approach* [online]. Master Thesis. Mcmaster University. [Accessed 6 December 2017]. Available at: https://macsphere.mcmaster.ca/handle/11375/16487.

Simon, M. (2011). *Dissertation and scholarly research: Recipes for success* (2011 ed). Seattle, WA: Dissertation Success, LLC.

Spencer-Brown, A. (2015). *Parental Expectations and Perspectives as They Relate to Their Children with Special Education Needs (SEN) During Transition From Early Intervention/Preschool to Kindergarten* [online]. Doctor of Education Thesis. Brandman University. [Accessed 6 December 2017]. Available at:

https://digitalcommons.brandman.edu/cgi/viewcontent.cgi?referer=https://www.google.ae/&httpsredir=1&article=1020&context=edd_dissertations.

Stake, R.E. (2006). *Multiple case study analysis*. NY: Guilford Press.

Starr, E., Martini, T., & Kuo, B. (2016). Transition to kindergarten for children with autism spectrum disorder: a focus group study with ethnically diverse parents, teachers, and early intervention service providers, *Focus on Autism and Other Developmental Disabilities*, vol. 31(2), pp. 115 – 128.

Tavakol, M. and Dennick, R. (2011). Making sense of Cronbach's alpha. *International Journal of Medical Education,* vol. 2, pp. 53-55.

Teddlie, C. & Tashakkori, A. (2003): 'Major issues and controversies in the use of mixed methods in the social and behavioral sciences', in: Tashakkori, A. & Teddlie, C. (eds.). *Handbook of mixed methods in social & behavioral research.* Thousand Oaks.

Teddlie, C., & Tashakkori, A. (2009). *Foundations of mixed methods research: Integrating quantitative and qualitative approaches in the social and behavioral sciences.* Thousand Oaks, CA: Sage.

Teijlingen, E. & Hundley, V. (2002). The importance of pilot studies. *Nursing Standard*, vol. 16(40), pp. 33-36.

The Union of the Physically Impaired against Segregation and the Disability Alliance (UPIAS). (1975). *Fundamental Principles of Disability,* London: Union of the Physically Impaired Against Segregation.

The Cabinet (2013). *Constitution of the United Arab Emirates.* [Accessed 27 September 2018]. Available at: https://uaecabinet.ae/en/the-constitution.

The Cabinet (2017). *The Cabinet Decree no. (6/1w) for the year 2017, session no. (6). the national policy to empower people of determination,* UAE: The Cabinet.

The Cabinet (2019). *The Cabinet Decree no. (20/6w) for the year 2019, session no. (6). the establishment of the higher committee for people of determination services in the country*, UAE: The Cabinet.

The UAE Government Portal. (2019a). *About the UAE. History* [online]. [Accessed 20 November 2019]. Available at: https://government.ae/more/history-of-the-uae.

The UAE Government Portal. (2019b). *About the UAE. Population* [online]. [Accessed 20 November 2019]. Available at: https://government.ae/en/about-the-uae/fact-sheet.

The UAE Government Portal. (2019c). *About the UAE. Strategies, initiatives and awards. Federal governments' strategies and plans.* [online]. [Accessed 20 November 2019]. Available at: https://www.government.ae/en/about-the-uae/strategies-initiatives-and-awards.

The UAE Government Portal. (2019d). *Information and* services. Regulatory authorities of K-12 education [online]. [Accessed 20 November 2019]. Available at: https://www.government.ae/en/information-and-services/education/school-education-k-12/regulatory-authorities-of-k-12-education.

Tomasello, N.M., Manning, A.R. & Dulmus, C.N. (2010). Family-centered early intervention for infants and toddlers with disabilities. *Journal of Family Social Work*, vol. 13 (2), pp. 163–172.

Trach, J. S. (2012). Degree of collaboration for the successful transition outcomes, *Journal of Rehabilitation*, vol. 78(2), pp. 39-48.

UAE Vision (2018a). *United Arab Emirates Vision 2021* [online]. Accessed [20 November 2019]. Available at: https://www.vision2021.ae/en

UAE Vision (2018b). *United Arab Emirates Vision 2021* [online]. Accessed [20 November 2019]. Available at: https://www.vision2021.ae/en/national-agenda-2021/list/card/family-cohesion-index.

UNESCO (2017). *A guide for ensuring inclusion and equity in education.* the United Nations Educational, Scientific and Cultural Organization, Paris: UNESCO.

United Nations (1948). *Universal Declaration of Human Rights*. [online]. [Accessed 5 December 2019]. Available at: https://www.un.org/en/universal-declaration-human-rights/index.html.

United Nations (2006). *Convention on the Rights of Persons with Disabilities*. [online]. [Accessed 12 March 2018]. Available at: http://www.un.org/disabilities/convention/conventionfull.shtml.

Vargas-Barón, E., Janson, U. & Mufel, N. (2009). *Early childhood intervention, special education and inclusion: a focus on Belarus*, UNICEF, Regional office for CEE/CIS.

Vermont Early Childhood Work Group. (2001). *Moving on: Planning your child's transition from the family, infant and toddler project to essential early education.* ERIC Microfiche ED 470384.

Villeneuve, M., Chatenoud, C., Hutchinson, N., Minnes, P., Perry, A., Dionne, C., Frankel, E., Isaacs, B., Loh, A., Versnel, J., & Weiss, J. (2013). The experience of parents as their children with developmental disabilities transition from early intervention to kindergarten, *Canadian Journal of Education,* vol. 36 (1), pp. 4-43.

Waddington, L., & Diller, M. (2002). 'Tensions and coherence in disability policy: the uneasy relationship between social welfare and civil rights models of disability in American, European and international employment law', in Yee S., and Breslin, M., (eds). *Disability Rights Law and Policy: International and National Perspectives*. New York: Ardsley Transnational Publishers.

Walker , S., Carrington, S. & Nicholson, J. (2012). The transition to school of children with developmental disabilities: Views of parents and teachers. *Australasian Journal of early Childhood,* vol. 37(3), pp. 22-29.

Welchons, L.W., & McIntyre, L.L. (2015). The transition to kindergarten for children with and without disabilities: an investigation of parent and teacher concerns and involvement. *Topics in Early Childhood Special Education,* vol. 35(1), pp. 52–62.

Wertsch, J., 1985. *Vygotsky and the social formation of mind*. UK: Harvard University Press.

Williams, C., Walter, E., Henderson, C. and Beach, A. (2015). Describing undergraduate STEM teaching practices: a comparison of instructor self-report instruments. *International Journal of STEM Education*, vol. 2(1), pp.1-14.

Williams, M. and Burden, R., 1997. *Psychology for language teachers, a social constructivist approach*. UK: Cambridge University Press.

Wodon, Q. (2016). Investing in early childhood development: essential interventions, family contexts, and broader policies. *Journal of Human Development and Capabilities,* vol. 17(4), pp. 465-476.

Yousef, J.M. (1993). Education of children with mental retardation in the Arab countries. *Mental Retardation*. vol. 31(2), pp. 117-121.

Zayed Higher Organization for People of Determination (ZHO). (2019). *ZHO profile. About Us.* [online]. [Accessed 20 November 2019]. Available at: https://zho.gov.ae/en/ZHOProfile/Pages/AboutUs.aspx

Zheng, Y., Maude, S.P., Brotherson, M.J. & Merritts, A. (2016). Early childhood intervention in China from the families' perspective. *International Journal of Disability, Development and Education*, vol. 63 (4), pp. 431–449.

Ziviani, J., Darlington, Y., Feeney, R., & Head, B. (2011). From policy to practice: a program logic approach to describing the implementation of early intervention services for children with physical disability. *Evaluation and Program Planning,* 34, pp. 60–68.

Appendices

Appendix 1: Semi-structured interview Questions and Potential Probes (English)

A. Opening questions/discussion

1. Where is your child currently enrolled?

2. How long did your child receive services in the early childhood intervention programme?

3. How do you see the services provided in the early intervention stage?

4. Have you been provided with sufficient information about the transition process in the early childhood intervention stage? How?

B. Grand tour questions (possible probes may be used to echo the interviewee's words)

5. Since your child has transitioned from the early childhood intervention stage, what are your impressions toward the mechanism by which children move from early intervention to other educational institutions?

6. Did you understand your role as a parent towards your child in the early intervention phase to ensure better transition to the next phase? If yes, what is it?

7. How was the decision made to transition your child from early childhood intervention? Have you contributed in this decision? If yes, how?

8. Does the social environment in which the child lives (parents, family, community,..) support the child's transition to public education or to disability centres? How?

9. Have you been given any tasks as a parent to support your child's transition to the appropriate educational place? What was it? Do you satisfy with this role? Why?

10. What roles should parents play during and after the transition from early intervention?

11. Do you think that there is cooperation and harmony between the environments in which the child lives (community, family, public education institutions, early intervention centre) to ensure the child's inclusion in public education? Why?

12. What are the roles required of the community to ensure a smooth transition of children from early intervention to the suitable educational place for them?

13. Do you think your child is sufficiently empowered in order to be transitioned to the right education place after early intervention? How?

14. Do you think the educational place your child is currently enrolled in is the right place for him/her? Why? If not, what is the right educational place for your child, and why?

15. What is your role now towards your child after the transition from early childhood intervention?

16. Overall, how would you describe your experience at the time your child was in the early intervention stage and during the transition process as well? With all its pros and cons? Why do you describe it this way?

C. Closing question

17. What other things would you like to tell me about your experience in the early intervention and transition stage? Is there anything else you would like to share with me?

Appendix 2: Semi-structured interview Questions and Potential Probes (Arabic)

أسئلة المقابلة والأسئلة اللاحقة المحتملة

أ ـ الأسئلة الافتتاحية

1. أين يلتحق طفلك حالياً طفلك حاليا؟

2. كم كانت مدة التحاق طفلك بخدمات برنامج التدخل المبكر؟

3. كيف ترى الخدمات المقدمة في مرحلة التدخل المبكر؟

4. هل تم تزويدك بمعلومات كافية حول عملية الانتقال من مرحلة التدخل المبكر؟ كيف؟

ب ـ سؤال المرحلة الأساسية من المقابلة (يمكن استخدام اسئلة محتملة لترديد كلمات الشخص الذي تمت مقابلته)

5. بما أن طفلك انتقل من التدخل المبكر ، فما هي انطباعاتك تجاه الآلية التي ينتقل بها الأطفال من التدخل المبكر إلى المؤسسات التعليمية الأخرى؟

6. هل فهمت دورك كأحد الوالدين/ ولي أمر تجاه طفلك في مرحلة التدخل المبكر لضمان انتقال أفضل إلى المرحلة اللاحقة؟ إذا نعم، ما هو؟

7. كيف تم اتخاذ قرار انتقال طفلك من التدخل المبكر؟ هل شاركت في هذا القرار؟ إذا كان الجواب نعم ، كيف؟

8- هل تدعم البيئة الاجتماعية التي يعيشها فيها الطفل (الوالدين ، الأسرة ، المجتمع ..) انتقاله إلى التعليم العام أم إلى مراكز الإعاقة؟ كيف ذلك؟

9. هل تم تحديد مهام لك كأحد الوالدين/ ولي أمر من أجل دعم انتقال طفلك إلى المكان التربوي المناسب؟ ما هي؟ هل أنت راضٍ عن هذا الدور؟ لماذا ا؟

10. ما هي الأدوار التي يجب أن يلعبها الوالدان/ أولياء الأمور خلال وبعد الانتقال من التدخل المبكر؟

11. هل تعتقد أن هناك تعاوناً وتناغمًا بين البيئات التي يعيش فيها الطفل (المجتمع والأسرة ومؤسسات التعليم العام ومركز التدخل المبكر) لضمان دمج أطفال التدخل المبكر في التعليم العام؟ لماذا

12. ما هي الأدوار المطلوبة من المجتمع لضمان انتقال الأطفال على نحو سلس من التدخل المبكر إلى المكان التعليمي المناسب لهم؟

13. هل تعتقد أنه تم تمكين طفلك بالقدر الكافي من أجل الانتقال إلى المكان التربوي الصحيح بعد التدخل المبكر؟ لماذا؟

14. هل تعتقد أن المكان التعليمي الذي يلتحق به طفلك حاليًا هو المكان المناسب له / لها؟ لماذا؟ إن لم يكن كذلك، باعتقادك، ما هو المكان التعليمي المناسب لطفلك، ولماذا؟

15. ما هو دورك حالياً نحو طفلك بعد أن انتقل من مرحلة التدخل المبكر؟

16. بشكل عام، كيف تصف لي تجربتك عندما كان طفلك في التدخل المبكر وخلال عملية الانتقال أيضاً؟ بكل إيجابياتها أو سلبياتها؟ لماذا تصفها بهذا الشكل؟

ج. السؤال الختامي

17. ما الأشياء الأخرى التي ترغب في إخباري بها عن تجربتك في مرحلة التدخل المبكر ومرحلة الانتقال؟ هل هناك أي شيء آخر تريد مشاركته معي؟

Appendix 3: The cross-sectional survey (English)

Parents' Perspectives towards Transition of Children with SEND from Early Intervention to other Educational Settings

Dear parent,

This questionnaire is part of a doctoral thesis which aim to investigate your perspectives towards transition of children with special educational needs and disabilities (SEND) from early intervention to other educational settings. Note that early intervention stage is a transitional phase for the next educational setting, which might be a disability centre or inclusive education. Therefore, your perspectives as a parent towards the transition process are crucial in order to achieve the purposes of this study.

The answers you provide will be only used for statistical analysis for the purpose of the current research. Thus, your cooperation in completing this survey is greatly appreciated.

If you have any questions or emphasis regarding the research or the survey, please contact the researcher: rawhiabdat@gmail.com, or mobile number: **0504795869.**

If you are agree to participate in the research, please sign this form.

Signature: _____   Date: /   /

Thanks again for your time and effort.

The researcher; Rawhi Abdat   PhD candidate/ British University in Dubai

A. Demographic Information

Parent information			
Parent's Gender	1. Father 2. Mother	**Educational Level**	1. Literacy and below 2. High school 3. Bachelor's degree and above
Child information			
Child's Gender	1. Male 2. Female	**Educational Status**	1- Currently in early intervention (will be transitioned during the next couple of years) 2- Transitioned to inclusive education 3- Transitioned to POD centre
Type of Educational Needs	1- Developmental delay 2- Sensory impairment 3- Intellectual disability 4- Autism spectrum disorder 5- Physical disability 6- Multiple disability	**Place of ECI Services**	1- Dubai 2- Ajman 3- Ras Al Khaimah 4- Fujairah

B. Parents' roles in the transition stage

As a parent, please express your opinion on each of the following statements regarding the effectiveness of your role in early childhood intervention to transition your child to next educational setting smoothly. Response (5) means a strongly effective role, response (1) means a very weak role.

N	Statement	1 Very Weak	2 Weak	3 Don't Know	4 Effective	5 Strongly Effective
1.	The clarity of my role as a parent in early intervention stage, which supports my child to move on to the next educational stage.					
2.	My knowledge about transition steps to other educational settings after the early intervention stage.					
3.	My participation as a parent in establishing my child's goals, which help in his/her transition to appropriate educational placement later on.					
4.	Practicing my role as a parent towards my child, which leads to a successful transition to the next stage.					
5.	My role as a parent in following up my child with the team members, which leads to smooth transition after early intervention stage.					
6.	My participation in educational decisions that affect my child future after the early intervention stage.					

C. Policies in early childhood intervention

Kindly express your views towards early childhood intervention policies in the UAE, and to what extent they support children inclusion and empower their parents. Response (5) means very strongly support, response (1) means very poor support.

N	Statement	1 Very Poor Support	2 Poor Support	3 Don't Know	4 Strongly Support	5 Very Strongly Support
7.	Early intervention policies support individual plans that help children transition to inclusive education later on.					
8.	Early intervention policies urge following up SEND children to ensure their transition to inclusion environments after early intervention.					

N	Statement					
9.	Early intervention policies encourage the provision of services in natural environments such as (home, kindergarten, school, etc.).					
10.	Early intervention policies support children's transition to inclusive learning settings.					
11.	Early intervention policies enable families towards full participation with their children, which lead to a successful transition after early intervention stage.					
12.	Early intervention policies support families to exercise their roles to move their children to appropriate educational settings after early intervention stage.					

D. The transition Journey:

Express your perspectives towards the clarity/ smooth transition pathway and the child's journey from early intervention to other educational environments, whether it is an inclusive environment or a disability centre. Response (5) means extremely significantly, response (1) means very poor.

N	Statement	1 Very Poor	2 Poor	3 Don't Know	4 Significant	5 Extremely Significantly
13.	The clarity of children's transition pathway after the early intervention stage.					
14.	The clarity of children's transition plans from early intervention to next educational settings.					
15.	The ease of children's transition to inclusive environments after early intervention.					
16.	The support from early intervention team for children and parents to accomplish a successful transition after early intervention.					
17.	The team support to children in inclusive settings, to move them to appropriate settings after the early intervention stage.					
18.	The compatibility of educational settings "to which children are transited after the early intervention stage" with their educational needs.					

N	Statement	Very Poor Support	Poor Support	Don't Know	Strongly Support	Very Strongly Support
19.	The coordination between entities to ensure successful transfer of children after the early intervention stage.					

E. Environments surrounding the child:

Kindly, how you perceive the support of settings around your child in his smooth transition from early intervention stage to inclusive settings. Response (5) means very strongly support, response (1) means very poor support.

N	Statement	Very Poor Support	Poor Support	Don't Know	Strongly Support	Very Strongly Support
20.	The educational environment in early intervention supports children's transition to appropriate educational settings later on.					
21.	The support of early intervention team that provides rehabilitation to the children.					
22.	The effectiveness of communication between the early intervention settings and other educational settings such as (kindergartens and inclusive schools)					
23.	The effectiveness of family members' roles towards children transition from early intervention to inclusive settings.					
24.	The effectiveness of public education schools' roles in motivating the admission of SEND children, who are transitioned from referred early intervention.					
25.	The teachers' support in inclusive environments (kindergartens or schools) when receiving children from early intervention.					
26.	The peers support in inclusive settings for children who transited from early intervention stage.					
27.	The support of UAE community's culture to inclusion of children after the transition from early intervention stage.					

F. Open-ended questions regarding your perspectives towards the transition process from early intervention to the next educational settings:

28. As a parent, are you **familiar with the transition process** from early intervention to other educational settings? If yes, how?

_____

_____

    If no, why?

_____

_____

29. What is the appropriate educational setting for your child after the early intervention stage, for example: kindergarten, school, POD centre? Why?

_____

_____

_____

_____

30. What **age** do you think is appropriate for children's transition from early intervention to the next educational setting? Why?

_____

_____

_____

_____

31. How do you see **your child's future** after moving from early intervention?

_____

_____

_____

_____

32. Any **suggestions** that meet your child's needs for the transition to another appropriate learning setting?

_____

_____

_____

_____

Thank you for completing this survey!
Your feedback is critical to the improvement and success of early intervention goals

---

حضرة الأم/الأب المحترم/ـة

تحية طيبة وبعد،،،

هذا الاستبيان هو جزء من دراسة للحصول على درجة الدكتوراة في (التربية الخاصة والدامجة) والتي تهدف إلى **(التعرف على انطباعات الوالدين نحو عملية انتقال الأطفال ذوي الإحتياجات التربوية الخاصة والإعاقة من مرحلة التدخل المبكر إلى البيئات التربوية الأخرى).** حيث قد تكون المرحلة اللاحقة للتدخل المبكر هي مركز أصحاب الهمم، أو رياض الأطفال ومدارس الدمج، لذلك فإن انطباعاتك كأحد الوالدين نحو مرحلة الانتقال من مرحلة التدخل المبكر هي غاية في الأهمية لتحقيق أغراض هذه الدراسة.

إن استجاباتك التي ستقدمها سيقتصر استخدامها على التحليل الاحصائي للأغراض البحثية في الدراسة الحالية، وإن تعاونك في تعبئة هذا الاستبيان هو محل تقديرنا. وإذا كان لديك أية استفسارات نحو موضوع الدراسة أو فقرات الاستبيان، فالرجاء التواصل مع الباحث عبر البريد الالكتروني rawhiabdat@gmail.com أو موبايل: 4795869 050

في حال موافقتك على المشاركة يرجى التوقيع على هذا النموذج.

التوقيع: _____   التاريخ: /   /

شكرا مرة أخرى، إن وقتك والمعلومات التي قدمتها للباحث هي محل تقديري

الباحث: روحي عبدات   طالب دكتوراه/ الجامعة البريطانية – دبي

أ.المعلومات الديمغرافية:

	معلومات الوالدين/ ولي الأمر		
النوع	1. أم 2. أب	المستوى التعليمي	1. قراءة وكتابة فما دون 2. ثانوية عامة 3. بكالوريوس فأعلى
	معلومات الطفل		
النوع	1. ذكر 2. أنثى	الحالة التربوية الراهنة للطفل	1. ملتحق ببرنامج التدخل المبكر 2. تم تحويله إلى الدمج 3. تم تحويله إلى مركز أصحاب الهمم
نوع الاحتياجات التربوية	1. تأخر نمائي 2. إعاقة حسية	مكان تلقي خدمات التدخل المبكر	1. دبي 2. عجمان

3. رأس الخيمة	3. إعاقة ذهنية
4. الفجيرة	4. اضطراب توحد
	5. إعاقة جسدية
	6. إعاقة متعددة

ب. دور الوالدين في مرحلة الانتقال

عبّر عن رأيك كأحد الوالدين تجاه كل من الفقرات التالية فيما يتعلق بفعالية دورك في مرحلة التدخل المبكر للانتقال السلس بطفلك إلى المرحلة اللاحقة. علماً أن الاستجابة (5) تعني فعالية الدور، والاستجابة (1) تعني ضعف الدور.

م	الفقرات	1 ضعيف للغاية	2 ضعيف	3 لا رأي	4 فعال	5 فعال للغاية
1.	وضوح دوري كأحد الوالدين في مرحلة التدخل المبكر بما يقود طفلي للانتقال للمرحلة اللاحقة.					
2.	معرفتي بخطوات انتقال الأطفال إلى البيئات التربوية الأخرى بعد مرحلة التدخل المبكر.					
3.	مشاركتي كأحد الوالدين في وضع أهداف طفلي بما يساعد في انتقاله فيما بعد للمكان التربوي المناسب.					
4.	ممارستي لدوري كأحد الوالدين نحو ابني بما يقود لانتقاله الناجح للمرحلة اللاحقة.					
5.	دوري كأحد الوالدين في متابعة طفلي مع فريق العمل بما يقود لانتقاله السهل بعد مرحلة التدخل المبكر.					
6.	مشاركتي في اتخاذ القرارات التربوية التي تؤثر في مستقبل ابني بعد التدخل المبكر.					

ج. سياسات التدخل في مرحلة الطفولة المبكرة

لطفاً عَبر عن نظرتك نحو السياسات المتبعة في مرحلة التدخل المبكر، ومدى دعمها لإدماج الأطفال وتمكين أولياء أمورهم. علماً أن الاستجابة (5) تعني الدعم الكبير، والاستجابة (1) تعني الدعم القليل.

م	الفقرات	1 دعم قليل جداً	2 دعم قليل	3 لا رأي	4 دعم كبير	5 دعم كبير جداً
7.	دعم السياسات في مرحلة التدخل المبكر لوجود خطط فردية تساعد في انتقال الأطفال إلى الدمج التعليمي فيما بعد.					

	5	4	3	2	1	الفقرات	م
						حث سياسات التدخل المبكر على متابعة الأطفال بما يضمن انتقالهم إلى بيئات الدمج بعد التدخل المبكر.	8.
						تشجيع السياسات لتقديم الخدمات للأطفال في البيئات الطبيعية مثل (البيت، رياض الأطفال، المدرسة...)	9.
						دعم السياسات في مرحلة الطفولة المبكرة لانتقال الأطفال فيما بعد إلى بيئات التعليم الدامج.	10.
						تمكين سياسات التدخل المبكر للأسر من المشاركة الكاملة مع أطفالها، بما يقود إلى انتقال ناجح للطفل بعد مرحلة التدخل المبكر	11.
						دعم سياسات التدخل المبكر لأسر الأطفال للقيام بدورهم نحو انتقال ابنائهم إلى البيئات التربوية المناسبة بعد مرحلة التدخل المبكر.	12.

د. رحلة الانتقال

حدد انطباعاتك نحو وضوح/ سلاسة مسار الانتقال ورحلة الطفل من مرحلة التدخل المبكر إلى البيئات التربوية الأخرى، سواء كانت بيئة دمج أو مراكز الإعاقة. علماً أن الاستجابة (5) تعبّر عن سهولة الانتقال، والاستجابة (1) تعبّر عن عدم سهولته.

5 بشكل كبير جداً	4 بشكل كبير	3 لا رأي	2 ضعيف	1 ضعيف جدا	الفقرات	م
					وضوح مسار انتقال الأطفال إلى ما بعد مرحلة التدخل المبكر	13.
					وضوح خطط انتقال الأطفال من التدخل المبكر إلى البيئات التربوية اللاحقة	14.
					سهولة انتقال الأطفال بعد مرحلة التدخل المبكر إلى بيئات الدمج	15.
					دعم فريق عمل التدخل المبكر للطفل والوالدين لتحقيق انتقال ناجح بعد التدخل المبكر	16.
					دعم فريق العمل في بيئات الدمج لأطفال التدخل من أجل انتقالهم إلى البيئات المناسبة بعد التدخل	17.
					انسجام البيئات التعليمية التي ينتقل إليها الأطفال بعد مرحلة التدخل المبكر مع احتياجاتهم التربوية	18.

م	الفقرات	1 دعم قليل جداً	2 دعم قليل	3 لا راي	4 دعم كبير	5 دعم كبير جداً
19.	التنسيق بين الجهات من أجل ضمان انتقال الأطفال الناجح بعد مرحلة التدخل المبكر					

هـ البيئات المحيطة بالطفل:

من فضلك، كيف ترى دعم البيئات المحيطة بطفلك لعملية انتقاله السلس من برنامج التدخل المبكر إلى البيئات التعليمية الدامجة. علماً أن الاستجابة (5) تعني الدعم الكبير، والاستجابة (1) تعني الدعم القليل.

م	الفقرات	1 دعم قليل جداً	2 دعم قليل	3 لا راي	4 دعم كبير	5 دعم كبير جداً
20.	دعم البيئة التعليمية في التدخل المبكر لانتقال الطفل إلى المكان التربوي المناسب فيما بعد.					
21.	دعم فريق التدخل المبكر الذي يقدم خدمات التأهيل للأطفال.					
22.	فعالية التواصل بين بيئة التدخل المبكر والبيئات التعليمية الأخرى مثل (رياض الأطفال ومدارس الدمج).					
23.	فاعلية دور أفراد الأسرة المحيطين بالطفل نحو انتقاله من التدخل المبكر إلى بيئات الدمج.					
24.	فاعلية دور مدارس التعليم العام في تشجيعها لاستقبال الأطفال بعد تحويلهم من مرحلة التدخل المبكر					
25.	دعم معلمي بيئات الدمج (رياض الأطفال أو المدارس) عند استقبال الطفل المحول من التدخل المبكر إلى الدمج.					
26.	دعم الطلبة الزملاء في بيئات الدمج للأطفال المحولين من التدخل المبكر إلى الدمج.					
27.	دعم الثقافة المجتمعية في الامارات لإدماج الأطفال بعد مرحلة التدخل المبكر إلى بيئات الدمج.					

و ـ أسئلة مفتوحة تتعلق بانطباعاتك حول مرحلة الانتقال من التدخل المبكر إلى البيئات التربوية اللاحقة:

28.كأحد الوالدين، هل أنت على **معرفة بعملية انتقال الأطفال** من التدخل المبكر إلى الأماكن التعليمية الأخرى؟ إذا كان الجواب نعم ، كيف؟

_____

_____

إذا كان الجواب لا، لماذا؟

_____

_____

29. ما **المكان التربوي الملائم** لطفلك بعد مرحلة التدخل، مثلاً: روضة أطفال، مدرسة، مركز أصحاب الهمم، لماذا؟

_____

_____

_____

_____

30.ما **العمر** الذي تراه مناسباً لانتقال الأطفال من مرحلة التدخل المبكر إلى البيئة التربوية اللاحقة؟ لماذا؟

_____

_____

_____

_____

31.كيف ترى **مستقبل طفلك** بعد مرحلة التدخل المبكر؟

_____

_____

_____

_____

32.أية **اقتراحات** تلبي احتياجات أطفال التدخل المبكر للانتقال للبيئات التربوية المناسبة لهم؟

_____

_____

_____

_____

<div style="border:1px solid">

شكراً لك لاتمامك هذا الاستبيان

ملاحظاتك أمر بالغ الأهمية لتحسين ونجاح أهداف برنامج التدخل في مرحلة الطفولة المبكرة

</div>

Appendix 5: Correlation scores between each item and its domain

Items	Coefficient alpha (Parents' role in transition) Domain	Items	Coefficient alpha (ECI policies) Domain
1	0.890	7	0.727

2	0.726	8	0.808
3	0.779	9	0.812
4	0.749	10	0.707
5	0.728	11	0.765
6	0.713	12	0.783
Items	Coefficient alpha (Transition journey) Domain	Items	Coefficient alpha (Environments around children) Domain
13	0.827	20	0.853
14	0.703	21	0.811
15	0.779	22	0.726
16	0.737	23	0.870
17	0.819	24	0.869
18	0.734	25	0.842
19	0.731	26	0.778
-	-	27	0.869

Appendix 6: Official Permission letter to the MOCD by the British University in Dubai

10/14/2018

To : Ms. Wafaa Hamad Bin Sulaiman
Ministry of Community Development

This is to certify that Mr.Rawhi Abdat with Student ID number 2016121001 is a registered part-time student in the Doctor of Education from the Faculty of Education offered by The British University in Dubai since September 2016.

Mr. Abdat is currently collecting data for his thesis (Parents' perspectives towards transition from early childhood intervention to other educational settings)

He is required to gather data through conducting interviews with the concerned parties in the field that will help him in writing the final thesis. Your permission to conduct his research in your organisation is hereby requested. Further support provided in this regard will be highly appreciated. Hence, in order to achieve his academic objective and to validate his research hypothesis, your support is highly appreciated in accepting our request to allow him to make the interviews , and surveys.

Any information given will be used solely for academic purposes.

This letter is issued on Mr.Abdat's request.

Yours sincerely,

Dr. Amer Alaya
Head of Student Administration

PO Box 345015 · Block 11 Dubai International Academic City Dubai U.A.E · T +971 4 279 1400 · F +971 4 279 1490
FB.com/BUID:Team   BUID_Team   youtube.com/BUIDadmin   @BUID_Team   BUID

Appendix 7: Approval letter from the Ministry of Community Development

270

التاريخ : 2018/10/21
المرجع : 2018/25

الأستاذ / روحي عبدات   المحترم
طالب دكتوراه في الجامعة البريطانية – دبي
(ID 2016121001)
تحية طيبة وبعد،،،

الموضوع: تطبيق دراسة "وجهات نظر الوالدين تجاه انتقال الأطفال ذوي الاحتياجات التعليمية الخاصة
والإعاقة من التدخل المبكر إلى البيئات التربوية الأخرى"

تبعاً لرسالتكم الموجهة إلينا من الجامعة البريطانية في دبي لتسهيل مهمة إجراء دراسة في مجال التدخل
المبكر، فلا مانع لدينا من تطبيق الدراسة المذكورة أعلاه في مركز التدخل المبكر وأقسامه في مراكز تأهيل
أصحاب الهمم، والتي تتضمن تحليل الوثائق وإجراء المقابلات وتوزيع الاستبيان الخاص بالدراسة على
أولياء الأمور.

متمنين لكم التوفيق والنجاح
وتفضلوا بقبول الاحترام والتقدير،،،

وفاء حمد بن سليمان
مدير إدارة رعاية وتأهيل أصحاب الهمم

Appendix 8: Participant's consent form – Arabic

<div dir="rtl">

نموذج الموافقة على إجراء المقابلة
عنوان الدراسة: (وجهات نظر الوالدين تجاه انتقال الأطفال ذوي الاحتياجات التعليمية الخاصة والإعاقة من التدخل المبكر إلى البيئات التربوية الأخرى)

حضرة ولي الأمر المحترم،
السلام عليكم ورحمة الله وبركاته،،،

شكرا جزيلا لموافقتك على المشاركة في هذه الدراسة.

سيتم التعامل مع جميع المعلومات الواردة دون ذكر اسمك وبأكبر قدر من السرية. اسمك غير مطلوب ذكره في الدراسة أو حتى أي مؤشرات معينة يمكن من خلالها التعرف عليك. وبعد الانتهاء من الدراسة سيتم التخلص من البيانات الأصلية. تعتبر مشاركتك في الدراسة تطوعية تماماً، لذا يمكنك التوقف عن مشاركتك فيها في أي وقت. إذا كان لديك أي أسئلة حول الدراسة، يرجى توجيهها إلى rawhiabdat@gmail.com أو يمكنك الاتصال على رقم جوال الباحث (050-4795869). لديك أيضًا الحق في الاطلاع على نتائج الدراسة حين اكتمالها، أو توجيهك نحو الدراسة حين نشرها إذا كان هذا يهمك، في حال موافقتك على المشاركة يرجى التوقيع على هذا النموذج.

التوقيع: ــــــــــــــــــــــــــــــــ   التاريخ: /   /

شكرا مرة أخرى، إن وقتك والمعلومات التي قدمتها للباحث هي محل تقديري

الباحث: روحي عبدات
طالب دكتوراه/ الجامعة البريطانية ــ دبي

</div>

Appendix 9: Excerpts from the Interviews Transcriptions

Q: Have you been provided with sufficient information about the transition process in the early childhood intervention stage? How?

Parent-11: Yes, the first thing they did was refer him to the Special Education Support (Centre), and they re-evaluated him there.

Q: Were you aware of these procedures?

Parent-11: Not so much because the beginning (for the Early Intervention Centre) was difficult, but currently, they care about them (The children) ... They send them to the WC, wash them, help them, but at school, it is over, and he has to depend on himself.

Q: So, this is the difference between early intervention and general education?

Parent-11: Yes.

I mean, in early intervention, there is more attention because they make them try to depend on themselves and help them, but in school, this does not exist.

They gave me written information, and the supervisor spoke to me: "Don't worry... in God willing, he will adapt". And they also visited him several times in school after the transition, then it was over; this is the place, and he doesn't even want to come to me here (in the EEC).

Q: Since your child has transitioned from the early childhood intervention stage, what are your impressions toward the mechanism by which children move from early intervention to other educational institutions?

Parent-4: It was excellent. It is better for my child to be included with other children in public schools, but the problem is in the curriculum because it is above their capabilities. As their linguistic perception is incomplete, they have weakness in some concepts and vocabularies that make it difficult to understand the curriculum. Not all the SEND students understand these vocabs or suit their language level.

The transition process was clear for me because I believe my child should be included in public education. I don't force my child to transition to inclusion, but I am convinced that her abilities qualify her for inclusion.

Q: Did you understand your role as a parent towards your child in the early intervention phase to ensure better transition to the next phase? If yes, what is it?

Parent-3: Following-up my son, helping him and being with him through the process Yes, they told me that I should -follow-up with my child. The instructions given to me were verbal and not written.

Q: How was the decision made to transition your child from early childhood intervention? Have you participated in this decision? If yes, how?

Parent-3:

Yes, the teacher said he was fit for inclusion, so I agreed with inclusion as long as they knew his abilities more than me. I cannot say no for inclusion and to keep my child in the early intervention or to move him to a disability centre. They informed me and I agreed, I was happy when they told me that he would transit from the early intervention centre. Currently in the kindergarten, my son is confused because of teaching him in Arabic and English together.

Parent-7: They made the transition decision and informed me through the WhatsApp, so I had no objection as long as they believe transition to disability centre is the best for him.

Q: Does the social environment in which the child lives (parents, family, community,..) support the child's transition to public education or to disability centres? How?

Parent-2: I do not feel that.

The community looks at these children as poor people (masakeen), and in need for empathy; meanwhile, I treat my son equally like his other brothers. If my son commits something wrong, I put him under accountability as same as his brother. His uncle and grandmother also follow the same way of treatment, so within our family, my son is treated usually just like other children; however, it's difficult to change the community attitudes toward them.

This attitude does not help them unless the community treats them like their peers but not with pity and empathy (يا حرام مسكين). The society should view them as healthy human beings who have no faults and can participate. I wish the community treats my son as I do.

274

Q: Do you think that there is cooperation and harmony between the environments in which the child lives (community, family, public education institutions, early intervention centre) to ensure the child's inclusion in public education? Why?

Parent-1: When we go to public places, we found that some people have already experienced such cases while others did not. There are those who understand my son and those who do not. Therefore, I sometimes prefer to isolate my son from the public because people do not accept him. Sometimes I prefer not to take him with me to my parents' house because they don't tolerate him for his hyperactivity.

Parent-5: There is a cooperation between some parents in the centre, but not between the early intervention centre and public schools because schools do not include children with Down syndrome like my son. Schools have misconceptions toward people with Down syndrome, they believe that people with Down syndrome cannot learn, but this is not true, some of them have abilities and can learn.

The early intervention centre told us that students with Down syndrome are not eligible for inclusive education, but I do not know if their point of view is right or not. One of the mothers tried to include her son with Down syndrome in a public school, but the school rejected her request. Even the private schools do not open their doors to our children for inclusion. There is only one private school in Ras Al Khaimah that include people of that determination. This school accepted my son, but I refused to enrol him in it because of its reputation as a for-profit school, so I was afraid that it would be unfair for my son to enrol in that school.

Parent-8: For the early intervention centre, yes, there is collaboration, but not with the private disability centres, because they are commercial centres, and their only concern is money.

The nurseries also don't care and do not pay attention to or cooperate with people of determination. I do not support the admission of disabled persons to nurseries unless they have specialised staff or a department of people of determination.

These institutions do not support the inclusion of children with SEND in public education or even collaborate between each other.

Q: What are the roles required of the community to ensure a smooth transition of children from early intervention to the suitable educational place for them?

Parent-7: The community should support these students through the available rehabilitation centres. Fortunately, the country is offering all of these services, thank God, in terms of disability centres, schools and festivals. The community should take part in the activities of determined people and support them; this already exists where high-ranking officials are participating. Moreover, the UAE has a global reputation for caring for people of determination, thank God. People should support and participate in people of determination's activities because they have the same right as the rest of the people.

Parent-10: The community should support families of children with special needs and stand beside them, and there should be collaboration between schools, disability centres and early intervention centres to educate children with disabilities

Q: Do you think the educational place your child is currently enrolled in is the right place for him/her? Why? If not, what is the right educational place for your child, and why?

Parent-5: I cannot confirm that it is the right place for my son, here at the disability centre. My son doesn't receive accredited certificates from the MOE; he gets progressive reports about his developmental abilities, which are worthless.

Parent-6: Yes, inclusion in kindergarten is the appropriate educational setting for my daughter, but the level of care in the kindergarten is not like the early intervention stage, where they pay more attention to the children. Currently, the class teacher is working hard with my daughter because she has more than one child with hyperactivity in the class.

I hope more services will be provided for my daughter here in the kindergarten. The relationship with the parents was stronger in the early intervention phase than the kindergarten. Instructions here are strict.

Q: Overall, how would you describe your experience at the time your child was in the early intervention stage and during the transition process as well? With all its pros and cons? Why do you describe it this way?

Parent-8: It was ok, I feel fine with it because previously I spent money in the private centres with no benefit, so I was nervous, but now, God willing, my daughter is improving. I was afraid that they would not accept her at the disability centre, so I was happy when they accepted her later on. It is not important even if she missed one academic year or more. The important thing for me is that she is getting better.