The impact of the COVID-19 school closures on families with children with disabilities: A qualitative analysis

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Abstract

The unprecedented school closures in response to COVID-19 have been associated with a number of negative impacts on students and their families. In addition to these difficulties, parents of students with disabilities are faced with prepandemic stresses and challenges that may be exacerbated by the school closures. This qualitative study aimed to investigate the experiences and struggles of parents of children identified with a disability during the COVID-19 school closures. The 15 participants were parents of children with a range of disabilities, including Autism, Down Syndrome, ADHD, and learning disabilities. The analyses revealed four major themes: school connection, virtual learning, potential impacts for students, and managing change. The experiences of these caregivers during the COVID-19 school closures and subsequent shift to remote learning have implications for educational and treatment planning. Recommendations for how school psychologists and school teams may best support students with disabilities and their families are included.

KEYWORDS
COVID-19, disabilities, remote learning, school closures

According to the Centers for Disease Control and Prevention (CDC), the highly infectious COVID-19 virus spread globally over several months (Center for Disease Control and Prevention, 2020a). At one point in the spring of 2020, all 50 states were simultaneously under a disaster declaration (Smith-Schoenwalder, 2020) and most Americans were under stay-at-home orders (Secon & Woodward, 2020). School closures are one of the
non-pharmaceutical interventions (NPI) endorsed by the World Health Organization (WHO) to effectively mitigate virus spread, including COVID-19 (World Health Organization, 2009). Although not widely studied, research has indicated that this strategy can be effective in reducing virus transmission. For example, models using data from the 1957 Asian influenza pandemic demonstrated how timely school closures early in a pandemic can reduce virus spread by up to 22% (Vynnycky & Edmunds, 2008). Additionally, a strike-related school closure in Israel resulted in an estimated 40% reduction in respiratory infections in 1999 (Heymann et al., 2004).

The school closures that have resulted from the COVID-19 pandemic are unprecedented. Never before has the United States had so many schools close for such a long period of time. The school closures that began in mid-March impacted over 55 million students in more than 124,000 U.S. public and private schools (Education Week, 2020). Schools remained closed through the end of the 2020 school year and in many cases, these closures continued into the fall and early winter of 2020. As a result, students were removed from their routines, peers, and learning environments. Learning shifted to entirely virtual platforms, though its implementation varied widely depending on the district, school, and individual classrooms, with varying success.

The limited research examining the impact of school closures has generally centered around virus transmission and managing the physical health of children. However, prolonged school closures are highly disruptive (Hoffman & Miller, 2020) and have the potential to impact other areas of children's functioning and well-being. The challenging circumstances and ongoing and uncertain nature of the COVID-19 pandemic can lead to both acute and chronic stress (Center for Disease Control and Prevention, 2020b) for both children and their caregivers. Indeed, initial research into the impact of the pandemic on parents indicates significantly higher stress levels compared to those experienced pre-pandemic (Hiraoka & Tomoda, 2020). Although prior research examining the impacts of long-term school closures on students and families during a pandemic is limited, there is evidence of the socioeconomic hardships that many families face as a result (Chen et al., 2011). Indeed, many families rely on schools for childcare to participate in the workforce to provide financially for their families (Faden et al., 2020). Moreover, schools provide children with comprehensive academic and nonacademic supports, and consequently, there are social, emotional, academic, and health impacts that communities may face without schools running as usual (Hoffman & Miller, 2020). Almost 30 million children in the United States rely on school lunch daily (Dunn et al., 2020), and education personnel contribute to almost one fifth of all child abuse and neglect reports (Faden et al., 2020). In many cases, schools are the sole provider of children’s mental health interventions and supports (National Association of School Psychologists, 2016).

1 | CHALLENGES FOR STUDENTS WITH DISABILITIES AND THEIR FAMILIES

Families with children who have disabilities may be especially impacted by the pandemic and resulting school closures (Faden et al., 2020). According to the United Stated Department of Education, 13.7% of the student population in the United States qualifies for special education services (Snyder et al., 2019). These interventions help to ensure an equal educational opportunity through Individualized Education Programs (IEPs) developed and implemented by the child’s school team of special providers. Schools are responsible for providing students with disabilities the necessary tools and support to receive the highest quality education possible. Services offered in schools include occupational therapy, physical therapy, speech language therapy, assistive technology, mental health services, special education, and nursing, among others (Hill, 2020). Replicating the IEP can be especially challenging for parents at home and for professionals reliant on telehealth and virtual options.

Previous research examining the perspectives of parents of children with disabilities has revealed themes of shared challenges and growth (Goddard et al., 2000). Some of these studies showed that parenting a child with a disability can cause significant distress, with many parents feeling isolated and alienated without adequate support (Galpin et al., 2018; Lopez et. al., 2008). The responsibilities required to care for children with disabilities can be
extremely time consuming, physically demanding, and stressful, which in turn can impact the physical and emotional wellbeing of caregivers (Nurullah, 2013; Resch et al., 2010; Zablotsky et al., 2013). Additionally, parents of children with disabilities have reported elevated levels of stress related to the severity of their child’s symptoms (e.g., aggression, sleeping challenges, eating challenges etc.), which can cause tension between spouses/parenting partners and within sibling relationships (Nurullah, 2013).

Stress can also result from the social stigma that parents of children with disabilities face by society at large, and the lifelong advocacy required to challenge stereotypes and current policy (Galpin et al., 2018; Goddard et al., 2000; Nurullah, 2013; Resch et al., 2010). Parents of children with disabilities do not always feel understood by the professionals in the business of supporting their child (Goddard et al., 2000; Zeitlin & Curcic, 2014).

In a 2000 qualitative study, parents recounted their common trajectories of coming to terms with their child’s impairment and grieving the loss of the child they expected to have (Goddard et al., 2000). While acknowledging the challenges and barriers of parenting children with disabilities, parents also identified the positive outcomes of their journey, such as an increase in personal strength, confidence, and appreciation for life (Beighton & Wills, 2017).

Clearly, parenting a child with disabilities often requires advocacy skills and savvy navigation of the systems in place that control the availability of services and supports, including schools. The need for advocacy during the COVID-19 pandemic is even greater due to the challenges of service delivery during school closures and the risk of a backslide in learning (Hill, 2020). Parents of children with disabilities, particularly those from underserved populations, have reported feeling as though their perspectives and needs are not being considered in crucial community conversations about education (Breunlin, 2020). As such, the COVID-19 pandemic and the resulting school closures have the potential to exacerbate existing stressors for primary caregivers of children with disabilities.

Initial research related to COVID-19 suggests that the trauma of this event and the changes in and lack of community services may trigger or exacerbate preexisting vulnerabilities, further widening the gap for students with disabilities (Marazziti et al., 2020). As physical school buildings closed in the spring of 2020, special education and related services for students with disabilities were moved to alternative virtual delivery models, leaving parents feeling worried about the emotional, behavioral, and academic impacts of this sudden change (Villano, 2020). Parents called for more funding for services and programs under the Individuals with Disabilities Education Act (IDEA; 2004) to combat the inevitable backslide that many students with disabilities will face through their loss of service time, and to accommodate the growing number of students who will likely need extra supports following the pandemic (Hill, 2020).

Limited accessibility to online learning platforms has been documented as a barrier for students with disabilities in initial investigations of the impact of the pandemic on special populations of students (Hill, 2020). The individualized supports available and provided during in-person learning were not available for many as online learning began, leaving parents to fill the role of the experts who normally supported their children’s learning. Parents felt the stress of being asked to step into the role of teacher and therapist to support their child with academic instruction and special services. Additionally, students with special needs may have unique challenges engaging with teachers, providers, and lessons virtually. Accommodations and assistive technology are not always available remotely, and nuances that can be picked up during in-person interactions are not always as discernable on screen (Hill, 2020).

Children with disabilities who depend on regular school-based supports are particularly vulnerable to academic and social-emotional regression during the COVID-19 pandemic and their ability to access virtual learning may be limited (Hoffman & Miller, 2020). With less support from school, these parents and caregivers are at risk of feeling isolated and alienated (Galpin et al., 2018; Resch et al., 2010). Consequently, it is important for educators and other school personnel to understand the COVID-19 pandemic-related experiences and needs of students and families to effectively support them. The purpose of the present study is to describe the experiences of students and families
during the COVID-19 pandemic and to inform intervention and support efforts following long-term school closures resulting from a chronic stressor.

This research was guided by the following questions:

1. What are the experiences of parents with children with disabilities related to COVID-19 and school closures?
2. What did the shift to virtual learning look like for families with children with disabilities? What supports were in place?
3. What are the most challenging aspects of school closures? For example, were there challenges specific to parenting? To accessing resources? Were there challenges specific to academics/education?
4. Have there been any benefits of the school closures on the child or family?
5. What are the concerns for long-term impacts of school closures on child’s development?
6. How would parents like to see their schools and school districts address their concerns?

2 | METHOD

To examine the experiences of parents of children with disabilities during the COVID-19 pandemic, a phenomenological method of data collection was used in this study. Phenomenology seeks to understand the essence of shared experiences of multiple individuals within a particular setting. Data are usually collected through in-depth interviews, document analysis, or observations (Connelly, 2010). This was the most appropriate method of data collection as the purpose of this study was to explore the experiences of primary caregivers during the school closures associated with the COVID-19 pandemic. In this study, interviews were analyzed for themes that may not have been identified using surveys or other methods of data collection. This research adds to the currently growing body of literature surrounding the ongoing COVID-19 pandemic and related school closures.

2.1 | Participants

In qualitative research, the selection of participants is purposeful, rather than random, because the researcher seeks participants and sites that will yield the most information (Lancy, 1993). Participants in this study were 15 parents with at least one child diagnosed with a physical, developmental, and/or intellectual disability who were receiving special education and related services in the public school setting. The participants reside in the state of Colorado and their children attend a total of 10 public school districts; five of these districts are in the Denver metropolitan area and five are in rural counties. All 15 participants identified as female and the majority identified as White. Their children ranged in age from 5 to 16 years of age and two were adopted. Table 1 presents participant demographic information.

2.2 | Participants

Following institutional review board approval, a call for participants was sent through a community listserv for parents and providers of individuals with developmental disabilities. Potential participants contacted the researcher via email expressing their willingness to participate. Following email confirmation that the participant met the requirements for participation, verbal informed consent was obtained. A total of 15 participants expressed interest in participating in the study and all of these met inclusion criteria.
2.3 Procedures

Consistent with a qualitative research paradigm, this study utilized interviews for data collection. Interviews allow for an in-depth conversation and clarification from either party (Rowley, 2012). Specifically, one-on-one semi-structured interviews were conducted by the first author. This type of interview allowed the researcher to elicit specific information from all the participants yet permitted the researcher to respond to the worldview of the participant and to change the order or exact wording of the questions. This is thought to be the best way to elicit information pertinent to the study while leaving enough room for the participant to lead the conversation into areas that the researcher may have missed as being important (Rowley, 2012). The design for the interview guide was shaped by the professional literature related to challenges presented by pandemics and school closures (e.g., Van Lancker & Parolin, 2020). Initial interview questions were related to demographic information (e.g., age, gender, race, school district, age of child, identified disability). Questions designed to gather information related to participants’ experiences focused on those experiences related to COVID-19 and school closures; descriptions of the transition to online learning, including supports and barriers. Participants were also asked about the biggest stressors for their family throughout the pandemic, future concerns for their child related to the pandemic and school closures; and how the school and/or school district could best address their concerns moving forward. Interview questions are provided in Appendix A. Interviews were conducted through a HIPPA approved video conferencing system (Zoom) and were recorded for transcription purposes. The interviews lasted no more than 1 hour each. Participants were informed that they would be emailed a transcript to provide an opportunity for review and editing for accuracy, if necessary. This process of member checking is recommended for qualitative studies (Nastasi & Schensul, 2005). Recordings were deleted upon their transcription. Member checks did not result in any feedback from participants and no changes were made to any transcription.

TABLE 1 Demographic characteristic of participants and their children

|                          | n (%) |
|--------------------------|-------|
| Participant race         |       |
| White                    | 13 (86.66) |
| Asian                    | 1 (6.66) |
| Hispanic                 | 1 (6.66) |
| Participant marital status|      |
| Married                  | 11 (73.33) |
| Divorced                 | 2 (13.33) |
| Single                   | 2 (13.33) |
| Child gender             |       |
| Female                   | 8 (53.33) |
| Male                     | 7 (46.67) |
| Child disability         |       |
| Autism                   | 6 (40) |
| Other health impairment (includes down syndrome) | 5 (33.3) |
| Intellectual disability  | 2 (13.33) |
| Specific learning disability | 2 (13.33) |
2.4 Analyses

Once the transcriptions were complete, analyses were conducted using Dedoose, a qualitative data analysis tool that employs a web-based interface for efficient data coding and database searching retrieval. Dedoose incorporates the identification and exploration of coding patterns in qualitative data to be automated via program-generated tables and user-defined output. Analysis followed an inductive process such that themes are derived from the data itself. Using the process described by Miles and Huberman (1994), the lead author reviewed all interviews and conducted a content analysis. Then, the lead author and several graduate students in school psychology participated in the coding of the data. The coders demonstrated their understanding of the coding guidelines and a priori codes through identifying samples from interviews that fit within the established codes. The a priori codes included School Communication, Virtual Learning, Challenges, Benefits, and Future Considerations.

Grounded Theory was used to generate a general framework of understanding of the experiences of participants. In this way, emergent codes found in the data, along with the a priori codes, were compiled and merged or collapsed as necessary. The remaining codes were then used to create themes in the data, as agreed upon by the multi-person coding and analysis team. Within-case sampling is a technique that allows researchers to "collect comparable data points from each interviewee" (Miles & Huberman, 1994, p. 29). The coding team independently read each transcript multiple times to develop an initial classification system of emerging patterns of categories and to determine any themes across transcripts based on what was stated in each one. Important quotes related to the primary interview questions were identified throughout the coding process.

3 RESULTS

Four major themes about the experiences and impacts of COVID-19 school closures on families of students with disabilities emerged from the data: (a) School Connection, (b) Virtual Learning, (c) Potential Impacts for Students, and (d) Managing Change.

3.1 Theme one: School connection

The theme of School Connection centered around efforts put forth by the schools and school district to remain in contact with families and to disseminate information about changes to the school's typical operations resulting from the pandemic. The following codes were used to create this theme from the data: Communication, Relationships with School Personnel, and Collaboration.

3.1.1 Communication

Communication from schools, or lack thereof, was a major area of focus for participants in this study. All participants experienced a wide range of communication efforts from various school personnel (e.g., administration, teachers, and special service providers) and school districts over the course of the pandemic, including updates about the closures, and planning for their child's special services. The majority of participants expressed frustration about receiving "vague updates because of the fear of over promising and under delivering" via email and needing to follow up through phone calls. One participant shared her experience with what she described as a "reactive rather than proactive response" from her child's school, as "they said 'make sure you collect all your things, and by the way, we are going to extend spring break, and now we are not coming back'." One participant shared that "It took two to three weeks to receive meaningful information." Another participant offered her opinion of her school's
communication stating, "It was disheartening what we heard from the district. We received blanket communication, but none applied to my son." In the same vein, other participants shared, "I feel like we were not being treated with the same attention as typical kids. I want my questions answered and they're not. Only concrete questions were being answered." and another stating, "I felt very much alone, like his subset of kids weren't being tended to." Although many participants expressed frustration with the lack of communication specifically related to addressing the needs of students with IEPs, many participants expressed the need to "give grace" during these times and appreciate what the school teams are going through and have effectively worked through. One of those participants shared "Schools have way too much pressure on them and it makes them afraid to answer questions. I'm grateful for whatever they can do."

### 3.1.2 | Relationships with school personnel

Many participants described the importance of established relationships with particular teachers, special service providers, and/or paraprofessionals pre-pandemic, who helped them to navigate these new and unknown circumstances. One parent offered, "We had cultivated positive relationships with our team that has made the process bearable." Another stated that "Providers went above and beyond to have weekly FaceTime meetings with him and continued to reach out over the summer. The transition went better to school in the fall because of them." A few participants mentioned teachers or special service providers arranging for their child to pick up physical supplies from school to assist with their learning. For example, one participant shared "Her teacher sent her home with a squishy pillow that was perfect for her personality and for comforting her."

### 3.1.3 | Collaboration

A few parents shared their experiences, or wishes, for collaboration opportunities with their school teams in relation to school closures and the shift to virtual learning platforms. One parent shared, "It would have been nice to be included in discussions with teachers about virtual learning since parents are expected to be quasi-teachers." Another parent offered, "I used to feel like it was a partnership with parents and schools to work towards student education, but not anymore."

### 3.2 | Theme two: Virtual learning

The theme of Virtual Learning was defined as the online platforms that schools began utilizing following the closures of physical buildings due to the COVID-19 pandemic, particularly the student and parent experiences utilizing this modality. The following codes were used to create this theme from the data: Organizational Challenges, Accessibility Concerns and Benefits to Online Learning.

#### 3.2.1 | Organizational challenges

Almost half of participants expressed frustration around the need to learn and utilize multiple different online platforms for their child's learning throughout the school day (e.g., PowerSchool, Google Classrooms, Canvas, Zoom, etc.). For example, one parent shared, "It felt like for every subject there was a different app to learn." In addition to multiple platforms, the majority of participants explained their responsibility of organizing and planning their child's
school day by arranging times to meet with special service providers and working around the schedules of teachers. Parents and caregivers were expected to be the “middle man,” as labeled by one participant, between teachers and providers. The same participant shared that she “didn’t have time to read all the emails.” Describing her experience, another participant stated that she “got an overwhelming amount of emails from teachers, assistants and therapists, which gave different information from one to the next.”

3.2.2 | Accessibility concerns

Accessing virtual learning and special services is not possible for all children, as shared by many participants. One participant in particular explained, “I had to sit next to him to make sure he was focused,” and another stating “Doing anything through telehealth is not going to work. He couldn’t attend to virtual learning for any length of time. There has to be a hands-on component or he is checked out and it’s just background noise.” Similarly, other participants shared, “I’m required to sit down next to her and help her throughout the whole time she is learning. She can’t pick up on cues, like taking turns and muting and unmuting. It was me helping her constantly so that she appears to be involved and engaged to she can feel like she’s a part of that community.”, and “Engaging virtually was so hard for her. She needs someone to sit with her to help her answer questions and participate.” One challenge for another parent is her child’s distractibility on the virtual learning platform, stating “all the pictures and the chat boxes can easily throw her off and then she can't reengage.”

Some parents described making difficult decisions to “temporarily opt-out” their child from special services, such as occupational therapy, physical therapy, speech therapy and social skills groups because of their child’s lack of engagement on the virtual platform. Regarding her son’s social skills group at school, one participant shared, “We are doing it because they [the provider] is trying so hard, but the group is a waste of time. My son can’t engage that way.” Another parent shared, “I personally reached out to providers to say that we don't want anything and they can stop. Let’s just agree to part ways for now.”

3.2.3 | Benefits to online learning

As students adapted to the virtual model of education, a majority of the participants found benefits for their child with utilizing this platform. One parent stated, “We’ve had success with the self-paced lessons and the distractions from other kids were removed.” Similarly, another participant shared, “He did really well with the lessons that were video recorded that he could watch over and over again.” Another participant shared that she “liked that it was flexible” and that “in the classroom, my daughter was constantly being pulled out for disruptive behavior, and now we can just mute her microphone.” Three participants mentioned their relief that online learning offers protection for their child against bullying. For example, one participant explained, “My daughter wears pull-ups and is socially immature. I don’t have to worry about her having issues with peer acceptance when she learns from home.” Another stated, “He’s not stressed about seeing particular kids, which would have totally ruined his day before.”

Quite a few participants also described their newfound perspective of their child’s learning styles and abilities as a result of the shift to virtual learning. One parent stated, “I realized how much processing it takes to get from brain to paper and seeing it more helped us as parents.” Another participant shared, “I’m actually concerned that mainstreaming him may not be as effective as it used to be now that I’ve seen him compared to the other kids in his class. It’s amazing how much he was missing...at least 70% of it.” Similarly, another participant explained, “I knew her learning style going into COVID, but I got a really good sense of how she is learning and what she is learning and we have made significant progress.”
3.3  |  Theme three: Potential impacts for students

The theme of Potential Impacts for Students was defined as concerns or fears for a child's academic or developmental growth as a result of the COVID-19 school closures and subsequent shift to virtual learning. All participants discussed this theme throughout their interviews, reflecting on how their experiences of school closures may impact their child. The following codes were used to create this theme from the data: Academic Concerns and Social-Emotional Concerns.

3.3.1  |  Academic concerns

The majority of participants shared their concern regarding how the pandemic and resulting disruption to education and related aids and services would impact their academic progress. When it comes to assessing students, one parent stated, "I'm worried about her falling behind academically, and with her executive functioning." Another shared her fear that "I would hate to see doors closed because he is pushed further behind in his learning." This was echoed by another: "I worry about regression in learning."

3.3.2  |  Social-emotional concerns

Social-emotional concerns for their children as a result of the pandemic and related school closures was expressed by most participants. For example, one parent stated that for her son "it is hard to develop relationships from year to year as it is. He does not have the skillset to make friends remotely," and another shared that her son "doesn't hang out with or play or have conversations with other kids that aren't facilitated by adults." Another participant explained her feeling that "We are creating a generation of children with extreme anxiety," Referencing her daughter's disability, one participant stated, "We are already compromised. This is even more stunting to social skills and life skills." Regarding extracurricular activities, one parent acknowledged, "Most of his successful social interactions were in the club, and now they're not even offering it virtually." In the future, one participant noted her hope for "more social groups and more assessments and evaluations for social-emotional health."

3.4  |  Theme four: Managing change

The theme of Managing Change centers around the experiences of parents and caregivers adapting to the major shifts and changes that the COVID-19 pandemic and subsequent school closures brought to their lives. All participants discussed how they and their children experienced and adapted to the changes brought on by the pandemic related school closures. The following codes were used to create this theme from the data: Stress and Resiliency.

3.4.1  |  Stress

Almost all participants described the stress that their child with a disability experienced during this time. One parent shared, "He was so stressed. His sensory regulation was all messed up without enough stimulation.", while another shared that her son would "Roll over [in his wheel chair] to the back window in the direction of the school and cry." Another participant explained that her daughter had "major temper tantrums and behaviors that were better before COVID and physically affect her, and she started pulling her hair out again."
Virtually all participants shared their own experiences with stress throughout the time of the COVID-19 pandemic and school closures. One parent shared, "Parenting a child with special needs is isolating. We don't have the ability to be spontaneous. It takes a lot more planning and effort. There are some things we can't do. When we are used to having supports built in our lives and they all went away, it became apparent how overwhelmed we are." Another parent explained her difficulty managing virtual learning and her own work, stating, "I need to work. I have been trying to launch a business for a year and that's been impossible with these demands." Another parent stated, "I've been completely wiped out. I've been drinking wine every single night. I don't have time to exercise." Participants also discussed additional significant stressors in their lives going on during the time of the pandemic, such as divorce, custody battle, loss of job, health concerns, and navigating multiple children's online learning.

3.4.2 | Resiliency

A handful of participants reflected on their abilities to adapt, change, and be flexible as a result of having a child with a disability. One parent explained that her "ability to tolerate uncertainty was a gift given to me by my son." and another stated that, "We're used to handling the unexpected, so I think we were better equipped throughout all of this...we have perspective."

4 | DISCUSSION

While many students will likely be impacted by the COVID-19 school closures in some way, the subsequent shift to online learning and the inconsistent provision of in-person instruction and services pose unique challenges to students with disabilities and their families. Students with disabilities are often dependent on extra interventions and supports at school to access their education, while their parents and caregivers rely on their school teams for support, encouragement, a sense of community, and an increased quality of day-to-day life (Galpin et. al., 2018). Having an understanding of the pandemic-related experiences of families who have children with disabilities can provide insight into student and family needs and guide educational and treatment planning. This study gives voice to parents of children with disabilities in their experiences related to the COVID-19 school closures that began in March 2020. These lived experiences affirm the challenges for these families found in initial research related to the school closures.

An analysis of the interviews revealed four main themes capturing the experiences of parent of children with disabilities through the COVID-19 school closures. Consistent with initial research related to the pandemic, participants in the present study expressed a number of concerns related to school connectedness, including those related to communication and collaboration with the school and relationships with teachers and service providers. The participants' experiences highlighted the complex set of social and professional relationships in which they and their children are situated and how the school closures have exacerbated some existing challenges and created new ones. In contrast to initial research exploring parents' experiences with the COVID-19 school closures in which the vast majority of parents reported feeling adequately supported by school personnel (Garbe et al., 2020; Midcalf & Boatwright, 2020), many parents in the current study discussed the challenges of not feeling heard and included in planning for their child during this time. Such communication barriers for parents of students with disabilities have been documented previously (e.g., Tucker & Schwartz, 2013; Zeitlin & Curcic, 2014), highlighting that these are not new challenges that need to be addressed.

Virtual learning and virtual service delivery were put into place for all of the children of the participants in this study. Consistent with other research (e.g., Midcalf & Boatwright, 2020), parent participants in the present study expressed a number of difficulties related to the shift to remote platforms, including challenges related to navigating multiple online platforms and provide their child with direct support for them to participate. Having a child with a
disability appeared to exacerbate these challenges in that parents struggled to arrange their children’s schedules for both academics and special services and ensure their attendance in classes and interventions. Not all children are equipped with the skills to engage and participate in virtual learning (Barbour & Reeves, 2009), and for many children with disabilities this is especially challenging. Schools may need to actively teach these skills to their students, especially those with certain learning needs, in order for them to best access their virtual classrooms in the time of a school closure. Despite these challenges, many participants shared aspects of the platform that have been beneficial to their child in some capacity. Schools can capitalize on these benefits to better support students with disabilities in terms of learning and accessing the curriculum.

As is the case for many parents in general (Garbe et al., 2020), participants in the present study expressed concern about the potential impact of the school closures on their child’s academics and social-emotional development, particularly in the long-term. Although specific concerns for regression varied, some parents were interested in hearing the school’s plan to evaluate and address any degeneration of skills that occurs in relation to school closures. Unfortunately, many school districts are still navigating the waters of school closures and potential return to traditional face-to-face instruction and learning, thus may not be considering these long-term impacts and how to measure them. Schools will likely need to develop alternative ways of measuring student progress considering the circumstances related to the school closures. Transparent communication with parents addressing this concern and any planning that is occurring would likely decrease stress and provide parents with some relief.

Consistent with previous research on raising of children with disabilities and caregiver stress (Nurullah, 2013), parents in this study expressed the necessity for outside support to help manage the needs of their child and family during the time of COVID-19 school closures. In addition to their established responsibilities (e.g., working, providing medical care for their child), these parents have stepped into the role of teachers and service providers, and like parents in general (Garbe et al., 2020; Hiraoka & Tomoda, 2020), many reported struggling with managing these new roles and responsibilities, as well as increased levels of stress. The additional requirement of meeting the disability-related needs of their children contributed to a sense of overwhelm as expressed by a number of participants. Indeed, many participants in the study discussed how their own mental and physical health has deteriorated throughout the pandemic due to the extreme levels of stress they have experienced. Using what is known about the potential long-term impact of stress, schools have an opportunity to mitigate some of these effects with resources for parents and mental health intervention.

Parents had the opportunity to learn more about their child as a learner as they embarked on the journey through online learning; in many cases, sitting physically side by side with their child. The virtual platform in place at home has allowed some parents to better understand their children in the context of the classroom and how they compare developmentally and academically to their peers. Though this information can be enlightening, it can also be painful to recognize the significance of a child’s needs. Understanding these needs to a greater degree can shift priorities for parents when it comes to teaching their children the skills and tools they need to do their best in school. As advocates for their children, parents may be more empowered to help determine appropriate supports and services in the future. The parent perspective seems to be even more vital to their child’s educational decision-making than pre-COVID-19 school closures.

4.1 Limitations and future research

There are several limitations of this research that should be noted when interpreting the results. First, participants were all from the state of Colorado, limiting the generalizability of study findings to other geographic areas. Future research should a nationally representative sample of caregivers of students receiving special services in public schools. Additionally, the majority of participants were White and all identified as female. Considering the disproportionate impact of the pandemic on communities of color (Wozniak, 2020), as well as prepandemic
disparities in educational outcomes (de Brey et al., 2019), it will be important to examine the impact of pandemic-related school closures on families from diverse backgrounds who have children with disabilities.

Due to the nature of recruiting participants through parent listservs, the parents and caregivers who participated in the current study may be more active in their child’s schooling and disability advocacy. Additionally, due to the sampling strategies, it is likely that the participants had access to consistent access to internet at home to participate in the interview. As such, a wider pool of participants recruited through additional avenues and the use of other data collection methods (e.g., face to face interviews) would represent a wider variety of experiences.

Additionally, the parents and caregivers in this study have children with a wide range of disabilities which may have impacted their experiences related to the pandemic-related school closures. Despite this variation, the themes collected from the narrative documents were consistent throughout most parent experiences. Finally, because of the novelty of the topic, the findings require replication in large samples, which may allow identification of additional impacts of the COVID-19 school closures on families with children with disabilities to help drive educational and treatment planning.

4.2 Summary and implications

The narratives shared in this study begin to shine light on the impact of school closures on students with disabilities and their families and offer insight into how schools can support these members of the school community now and in the future. As key members of multidisciplinary teams with expertise in assessment, consultation, collaboration, and working with children with disabilities (Skalski et al., 2015), school psychologists have much to contribute in this regard. For example, school psychologists can facilitate the development of a coordinated outreach and communication plan for each family, as well as facilitate virtual opportunities for both parents and children to connect with others for support. These are critical steps given that parents of children with disabilities are at risk of feeling isolated and alienated without adequate support (Galpin et al., 2018; Lopez et al., 2008). Indeed, participants’ perspectives indicated that established connections with particular teachers and school providers served as a protective factor for families as they navigated this new territory. Some parents also discussed how receiving physical items from school during the closures helped to maintain their feelings of connectedness.

Prioritizing the development of relationships between staff and families, as well as providing students with hands-on supplies and items from their classrooms may help mitigate the stress and isolation these families experienced during the closures. Additionally, facilitating establishment of family-to-family networks can also increase support and a sense of belongingness while decreasing stress and isolation (Kerr & McIntosh, 2000).

Teams should consider developing communication plans that include components of Conjoint Behavioral Consultation (Sheridan & Kratochwill, 2008), a family-oriented, data-based consultative framework that has demonstrated success in fostering positive working relationships between families and educators (Sheridan et al., 2012, 2017). Such a model considers the child’s current context, something critical during the COVID-19 school closures.

With many parents expressing concern regarding the potential negative impact of the school closures and remote learning on their child’s academics and social emotional functioning, gathering valid data is critical to determining needs and appropriate supports and interventions. Given the expertise of school psychologists in this area, they can assume a leadership role in the gathering of data for decision-making. Although this is a challenging endeavor given the need for remote assessment and progress monitoring in many communities, school psychologists can use their knowledge of psychometrics, virtual assessment, and intervention to facilitate this process. Additionally, school psychologists can lead the integration of data from various team members and facilitate data-driven discussions. This will support the development of an educational program that is student-centered and can be implemented efficiently and effectively.
The potential benefits of online learning platforms and the multiple and flexible instructional modalities is something on which schools can capitalize for students who have disabilities. Training and collaborating with parents to facilitate opportunities to use the technology in ways that align with the unique needs and learning styles of these students may well assist in decreasing loss of academic skills and increase academic motivation.

Consideration must also be given to longer term planning. The stress experienced by many of these families resulted in part from a lack of protocols and plans in place for how the school closures were to be handled. As such, schools have an opportunity to take a more preventative approach in the future. With established pandemic preparedness/school closure plans, schools can maintain some form of control and predictability during other uncertain times. Additional planning in the development and maintenance of accessible remote learning platforms and opportunities is also needed. While all children need reliable access to technology, a stable learning environment, and adult caregivers who are available to support remote learning, this is especially critical for students with disabilities. Developing IEPs and service delivery plans that include the use of technology can benefit these children not only during school closures, but also within the context of traditional learning contexts. This is also true for school-based telehealth service delivery.

Pandemic/long-term school closure preparedness plans may be able to address specific concerns related to students with disabilities, such as clarifying how IEP’s will be implemented during school closures. Families described challenges with obtaining information in a timely manner and their school’s lack of responsiveness to addressing individualized concerns. Providing parents with information about what they can expect from schools and school districts in terms of communication could ease frustration and help maintain the home-school connection. Established communication trees would outline when and from whom parents will get information, without the need to seek out information on their own. School reopening guidelines could also be established and shared with parents so they have an understanding of how schools and districts are making decisions to reopen and what those plans look like. Transparency regarding uncertainty and the possibility of abrupt changes to schedules and plans is also critical.

While the Coronavirus pandemic and subsequent school closures presented a range of challenges and stressors for the parents who participated in this study, all of them identified silver-linings from their experiences. This ability to identify the positives of navigating the pandemic reaffirms the resiliency of this population established in previous research (Goddard, 2000; Zablotsky et al., 2013). Many parents associated the pandemic-related school closures to new-found insight into their child’s needs and discovered new tools that aid in their child’s learning. They expressed gratitude for the ability spend more time with their child and family doing leisure activities, and some noted relief from their child’s social anxiety or bullying. Schools have the opportunity to capitalize on this information as they move forward with updated learning plans for their students. The COVID-19 pandemic has put all students, regardless of disability status, in similar boats. All parents are likely experiencing some amount of stress, confusion, and burnout as a result of these circumstances. Parents of students with disabilities have histories of overcoming challenges and advocating for their child by participating in their educational decisions. Learning from these individuals and how they adapt through change, handle stress, and advocate for their child could be beneficial for entire school populations.

CONFLICTS OF INTEREST
The authors declare no conflicts of interest.

ETHICS STATEMENT
This study was approved by the Colorado Multiple Institutional Review Board in 2019. Informed consent was obtained from all individual participants included in the study.

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APPENDIX A

Semi-structured interview questions

1. Demographic information: age, gender, race, education level, school district, age of child, identified disability, supports indicated on student's IEP.
2. Describe your experiences related to COVID-19 and school closures.
   a. Did you have knowledge of the plans prior to the schools closing?
3. Describe the transition for you and your child to online learning.
   a. Supports?
   b. Barriers?
4. What are the biggest stressors for your family throughout the pandemic?
5. What future concerns do you have for your child related to the pandemic and school closures?
   a. Physical health?
   b. Mental health?
   c. Academic regression?
6. How do you think your school and/or school district could best address your concerns moving forward?