

Mothers As New Teachers During The COVID-19 Pandemic: Challenges and Opportunities

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ABSTRACT:

COVID-19, as a global pandemic, has generated extreme disruptions and challenges worldwide in social, economic, healthcare, and educational systems. To reduce the virus's transmission, education systems moved to remote learning in the spring of 2020, with little to no time for preparation. This paper examines the educational experiences of parents of students with disabilities whose children attended PreK-6th public schools in the US during the COVID-19 pandemic using a Disability Studies in Education theoretical framework. In this qualitative phenomenological study, we interviewed 15 mothers of students with disabilities on Zoom. Using constant-comparative data analysis, we identified a theme revealing mothers' new identities as teachers of their children with disabilities at home, which brought unique challenges and opportunities. The mothers' challenges were related to the school's overreliance on them in remote learning, balancing multiple responsibilities, the need to re-learn academic content and new technology, and the collision of teacher and mom identities and school and home boundaries. These challenges strained mother-child relationships and negatively influenced the mothers' mental health and well-being. However, their new identity as new teachers also generated new opportunities. Particularly, remote learning made school practices transparent, and mothers reconceptualized their children's abilities and realized their competence for learning.

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INTRODUCTION

COVID-19, an infectious respiratory disease, was declared a pandemic on March 11, 2020 (WHO, 2020). The unprecedented nature of the pandemic led to several quickly implemented protective measures. Social distancing and lockdowns, as preventative measures, have altered existing practices, generating extreme disruptions and challenges worldwide in social, economic, healthcare, and educational systems. In spring 2020, to reduce the virus's transmission, education systems worldwide moved to remote learning with little to no time for preparation. This new set of practices has created challenges for educators, families, and students (Ameis et al., 2020; Hamilton et al., 2020). However, little is known about the magnitude of remote schooling's impact on families of students with disabilities. Therefore, this research aims to unpack the educational experiences of parents of students with disabilities whose children attended PreK-6th public schools in the US during COVID-19.

A snapshot of the impact of COVID-19 on parents of students with and without disabilities

Moving to remote learning without preparation has generated many challenges for educators, families, and students. It has also widened educational equity gaps, such as through the accessibility of reliable internet and digital technology, for historically marginalized students, including students with disabilities and students living in poverty (Aguilar, 2020; Ameis et al., 2020; Catalano et al., 2021; Hamilton et al., 2020; Long et al., 2021; Relyea et al., 2023). Principals in the US reported that 86.5% of their students had limited internet access, and 64% did not have appropriate technological devices needed for remote learning. These disparities were prevalent in urban and high-poverty schools and were experienced by students of color more than white students (Hamilton et al., 2020). In another study, special education professionals shared that the expense of technological devices with high-bandwidth internet limited their students with disabilities access to remote learning (Long et al., 2021). Similarly, 298 of the 300 K-12 teachers in the Catalano et al. (2021) study reported that students with disabilities in high-needs schools were less likely to complete their assigned work than those in low-needs schools. Teachers attributed the unfinished work to two main factors: lack of support from parents at home, and limited or non-existent access to electronic devices, computers, or the Internet. Even when access was secured, both teachers and parents of children with disabilities shared these stu-

dents had challenges navigating electronic devices (Averett, 2021; Long et al., 2021). Although the academic outcome disparities among students are mostly unknown due to the recency of the pandemic, Relyea et al. (2023) found that the COVID-19 cohort students' reading achievement gains during the 2020-2021 academic year were lower than those of the pre-COVID-19 cohort students in the 2018-2019 academic year, with a more significant impact on younger students, students with the low socio-economic background, English language learners, and students with reading disabilities.

In remote learning, teaching has become the responsibility of parents, many of whom were not prepared, specifically families of young children and children with disabilities (e.g., Averett, 2021; Lee et al., 2021; Lipkin & Crepeau-Hobson, 2023; Long et al., 2021; Schuck & Lambert, 2020; Roitsch et al., 2021; Tomaino et al., 2021). Therefore, many women abandoned their jobs or significantly reduced work time for childcare and remote schooling responsibilities (Collins et al., 2020). Moreover, parents, especially from underserved backgrounds, had various barriers, such as limited space at home, access to the internet, and knowledge of digital literacy, in providing educational support to their children (Averett, 2021; Özer et al., 2020; Schuck & Lambert, 2020; Sellmaier & Kim, 2022). Special education professionals described that many parents had to step in as teachers, taking on new responsibilities that ranged from logging into classes to even developing lesson plans (Long et al., 2021; Schuck & Lambert, 2020). Tomaino et al. (2021) revealed that 90% of parents of students with developmental disabilities had to sit next to their children to support remote learning. Overall, many factors have impacted parents' ability to support educational needs, including lack of time to prepare, mental health concerns, caring for multiple children, lack of resources and support, and speaking a home language rather than English (Averett, 2021; Hong et al., 2021; Lee et al., 2021; Long et al., 2021; Murphy et al., 2021; Neece et al., 2020).

Parents of students with disabilities have reported various challenges, including inadequate communication with teachers regarding their children's academic and social needs, the need to learn and use multiple online platforms to support remote learning, and the inaccessibility of remote learning for their children without parental support (Averett, 2021; Lipkin & Crepeau-Hobson, 2023). Moreover, the pandemic led to significant disruptions in routines for children with ASD, as reported by their parents, which resulted in substantial challenges in their daily lives (Averett, 2021; Roitsch et al., 2021).

Similarly, parents expressed concerns about their children's physical activity during the pandemic, especially for children with Attention-deficit/hyperactivity disorder (ADHD), who require movement to excel in school and regulate their behavior due to excessive screen time and avoidance of going outside (Hong et al., 2021).

Parents, especially parents of children with disabilities, reported higher levels of stress, mental health symptoms, burnout, and social isolation worldwide (Asbury et al., 2021; Hong et al., 2021; Kerr et al., 2021; Lee et al., 2021; Lipkin & Crepeau-Hobson, 2023; Manning et al., 2021; Sellmaier & Kim, 2022; Willner et al., 2020). In Willner et al.'s (2020) study, parents of children with intellectual disabilities living in the UK showed significantly greater levels of anxiety, depression, defeat/entrapment, and wish-fulfillment coping styles and received significantly less social support than parents of children without disabilities. For families of individuals with autism spectrum disorder (ASD) living in the US, isolation, illness, and finance were the greatest stress factors (Manning et al., 2021). Similarly, Latinx families of children with ASD and developmental delay (DD) or intellectual disability (ID) were concerned greatly about being at home, finances, loss of services, health, and children's behavior issues (Neece et al., 2020). Furthermore, immigration status and language and cultural differences of parents of students with disabilities exacerbated their stress in supporting remote learning (Hong et al., 2021; Neece et al., 2020). In Hong et al. (2021) study, Korean immigrant parents of students with disabilities had greater stress due to a perceived lack of English proficiency and knowledge of the US education, which led to their hesitancy to contact teachers, eventually negatively impacting their children's academic outcomes.

COVID-19 resulted in a loss of or significant decrease in disability-related services (Averett, 2021; Lipkin & Crepeau-Hobson, 2023; Jeste et al., 2020; Murphy et al., 2021; Neece et al., 2020; Sellmaier & Kim, 2022). Among US caregivers of individuals with a genetic diagnosis, including DD, ID, or ASD, 74% reported that their child no longer received at least one therapy service that they routinely received prior to the pandemic (Jeste et al., 2020). Data from 307 parents showed "35% of children who should have been receiving physical therapy, 27% of children who should have been receiving occupational therapy, and 36% of children who should have been receiving applied behavioral analysis were not receiving services" (Murphy et al., 2021, p. 231). This upheaval of service delivery may further disparities in children's educational outcomes, which was a concern for many families (Averett, 2021).

The service delivery issues during COVID-19 resulted in a court case due to failure to comply with federal laws. Under the Individuals with Disabilities Education Act (IDEA), students with disabilities are entitled to receive a free appropriate public education (FAPE). The Office of Special Education Programs (OSEP) clarified that 'no matter what primary instructional delivery approach is chosen, SEAs [state educational agencies,] LEAs [local educational agencies], and individualized education program (IEP) Teams remain responsible for ensuring that a free appropriate public education (FAPE) is provided to all children with disabilities (OSEP, 2020, p. 2). Despite the pandemic, schools must continue to provide students with disabilities with needed services, supports, accommodations, and modifications to ensure a meaningful education. *Brennan and James v. Wolf, Rivera, and the Pennsylvania Department of Education* was a class-action lawsuit on behalf of verbal and nonverbal autistic students, educated in public schools, using augmentative and alternative communication devices. These students' families pressed charges that the governor, the secretary of education, and the Pennsylvania Department of Education failed to provide the plaintiffs with FAPE due to a drastic decrease in service hours. The students in the lawsuit went from 32.5 hours a week of service in brick-and-mortar settings to 1.25 hours per week in remote schooling. The number of services students received was changed without following official protocol to revise the IEP, violating FAPE and the parental input provisions of IDEA (Jameson et al., 2020).

Some parents of students with disabilities shared positive aspects of remote learning, including self-paced lessons, flexible scheduling, reduced distractions, and protection against bullying and peer pressure (Averett, 2021; Lipkin & Crepeau-Hobson, 2023; Roitsch et al., 2021; Sellmaier & Kim, 2022). Older children with disabilities were able to receive additional support and benefit from remote learning, while younger children seemed to be happier and less anxious at home (Averett, 2021). Parents also appreciated good support and communication from teachers during remote learning (Averett, 2021; Roitsch et al., 2021). Additionally, a mother of a child with ASD discovered that her son was surprisingly capable of completing online assignments independently and that remote learning had helped her appreciate her son's strengths and weaknesses (Roitsch et al., 2021).

In conclusion, the COVID-19 pandemic has presented unprecedented challenges for parents of students with disabilities. Although some studies have started to emerge, a significant knowledge gap still needs to be ad-

dressed. This study aims to address this gap by unpacking the educational experiences of parents of students with disabilities whose children attended PreK-6th public schools in the US during COVID-19.

THEORETICAL FRAMEWORK

We used a disability study in education (DSE) perspective to examine the voices of parents of students with disabilities regarding education during the pandemic. DSE considers disability as a social phenomenon, meaning that “disability is not a characteristic that exists in the person so defined, but a construct that finds its meaning in social and cultural context” (Taylor, 2006, p. xiv). Disability is seen as part of human diversity, not something to be cured, and is examined in relation to social, cultural, historical, and political contexts (Connor et al., 2008; Taylor, 2006). Therefore, DSE upholds the social model of disability over the medical model that regards disability as inherently pathological. DSE aims to disrupt the deeply held ableist notions embedded in education and society and rejects deficit perspectives towards students with disabilities to overcome exclusionary educational practices and ensure inclusive education (Connor et al., 2008). Deficit thinking perceives problems as within individuals, independent from external factors (Valencia, 1997). DSE provides a critical framework for this research by emphasizing the importance of centering the experiences and perspectives of parents of students with disabilities. Using a DSE lens, this study offers how parents navigated the educational system to secure meaningful, inclusive learning for their children and how it responded to students with disabilities’ needs during the pandemic. Moreover, the DSE framework helps to illuminate the structural inequities and systemic barriers that shape the educational experiences of students with disabilities and provides a foundation for advocating for more inclusive and equitable educational practices.

METHOD

In this qualitative study, we used a phenomenological approach to understand the lived experiences of parents of students with disabilities regarding education during the COVID-19 pandemic. A phenomenological approach explores “what all participants have in common as they experience a phenomenon” and describes ‘what’ and ‘how’ participants experience a phenomenon (Creswell, 2013, p. 76). We focused on the phenomenon of COVID-19 concerning education and specifically ex-

plored what parents of students with disabilities experienced and how they experienced it.

Participants

Participant recruitment started after receiving the approval of the institutional review board (IRB). Fifteen mothers having at least one child with a disability attending PreK-6th public schools in the US volunteered to participate in this study. Table 1 shows self-reported demographic information of the mothers and their children’s disabilities. It is important to note that although the study was open to all parents, only mothers contacted us to join the study. IRB protocol was followed to ensure the ethical conduct of this study. To protect participant confidentiality, we used pseudonyms for all names and places.

Data Collection

The first and second authors conducted 15 individual semi-structured interviews with mothers on Zoom between January and April of 2021. Before the interview started, mothers filled out a survey via Google Forms, including information about demographics, such as race and occupation, and their children with disabilities. Interviews lasted between one and three hours. The questions focused on a) family background and context, b) the impact of COVID-19 on families and their children with disabilities, and c) educational experiences during the pandemic, including remote learning, IEP meetings, and family advocacy. Some questions were, ‘What are some unique challenges as a parent that you have during the pandemic?’ ‘How has your child’s education looked like during the pandemic?’ ‘What are some of your child’s educational challenges during the pandemic?’ We also used probing questions, such as ‘Tell me more about that’ and ‘Give us an example,’ for clarification and elaboration.

Data Analysis

Data were analyzed using a constant comparative method (Glaser & Strauss, 1967) as iterative and recursive processes (Ravitch & Carl, 2016). The first and second authors engaged in inductive and systematic coding processes utilizing various codes, such as in-vivo (e.g., “I wasn’t prepared to do all these”), descriptive (e.g., “positive”), emotional (e.g., “I was exhausted and scared,”) and theoretical (e.g., “ableism”) to seek emergent categories and themes within and across the transcripts (Saldaña, 2013). During the first cycle of coding, we utilized open coding and writing memos for each transcript individually

Table 1. Participants' Demographics

Mother's pseudonym	Gender	Highest level of education	Race	Languages spoken at home	Occupation	Total number of children	Age(s) of child(ren) with disabilities	Child's disability	Eligible for free/reduced lunch
Amanda	F	BA	White	English	Stay-at-home parent (due to COVID)	2	10	ADHD, nonverbal learning disability	No
Ana	F	BA	Mixed	Spanish and English	Stay-at-home parent	2	11	DS	No
Beth	F	High school	White	English	Assistant teacher	2	7; 10	DS; SLD	Yes
Brittany	F	MA	White	English	Training manager	4	11; 8; 8	ASD and ADHD; SLD; anxiety disorder and epilepsy	Yes
Charlotte	F	BA	Mixed	English	Early childhood specialist	3	6	DS	Yes
Claire	F	MA	White	English and ASL	Retired (due to disability)	4	7; 7 (twins)	Progressive hearing and vision loss; SLD	No
Eliza	F	MA	White (Latinx)	English	Social worker	3	6	DS	No
Erika	F	JD	White	English	Lawyer	1	10	DS	No
Fallon	F	MA	Asian	English	Part-time independent consultant	3	7	DS	No
Jamie-Lynn	F	MA	White	English	Banking	2	7	DS	No
Joan	F	BA	White	English	Secretary	1	10	DS	Yes
Julie	F	MA	White	English	Nurse practitioner	2	5	DS	No
Marie	F	PhD	White	English	Teacher	2	6; 8	DS (both children)	No
Olivia	F	BA	White	English and French	Stay-at-home parent (due to COVID)	1	7	ASD, morning glory syndrome, hypotonia	No
Sally	F	MA	White	English	Stay-at-home parent	3	9	DS, expressive and receptive language disorder, mild hearing loss	No
Shanti	F	BA	Asian	Marathi and English	Stay-at-home parent	2	7	Rare genetics CDK13, speech and language impairment	Yes

BA: Bachelor's degree; MA: Master's Degree; PhD: Doctor of Philosophy; JD: Juris Doctor

ASD: Autism spectrum disorder; ADHD: Attention-deficit/hyperactivity disorder; SLD: Specific learning disability

using NVIVO 12 software. We compared and discussed the initial reactions, clarified misunderstandings, and solved disagreements about the codes during weekly data analysis meetings. Then, we moved to the second cycle of coding, looking at the codes across transcripts to find categories and themes by identifying relationships between various codes through recoding and merging similar codes (Saldaña, 2013). For example, we created a theme, “challenges,” which included various categories, such as “mental health” and “blurring home-school boundaries,” and each category grouped various related codes. To illustrate, “mental health” grouped codes including but not limited to “lots of stress,” “guilt,” and “having grey hair.” We finalized the categories and themes in the last cycle by reviewing each category and codes and rereading the excerpts for accuracy. Throughout the data analysis and collection process, we also documented our memos. For instance, after each interview, we recorded our initial thoughts of what was shared and its possible connections to DSE and other interviews. In this paper, we describe a theme—mothers as new teachers—along with associated categories—challenges and opportunities.

FINDINGS

Mothers as new teachers

All mothers described their new identities as teachers of their children with disabilities at home, which brought unique challenges and opportunities. They talked about their challenges related to the school’s overreliance on parents in remote learning, balancing multiple responsibilities, the need to re-learn academic content and new technology, and the collision of teacher and mom identities and school and home boundaries. These challenges strained mother-child relationships and negatively influenced the mothers’ mental health and well-being. However, their new identity as new teachers also generated new opportunities for them.

Challenges

Overreliance on parents: “I am recess, I am the lunch lady, I am the PE teacher.”

All mothers explained the considerable amount of work they needed to put into remote learning to keep up the education of their children with disabilities without adequate school support. For example, Brittany, who had three children with disabilities, advocated for herself regarding the school’s unrealistic expectations:

I said to them [educators], “Do you honestly teach from nine to three every day?” And they’re like, “Yes.”

I said, “No, you don’t.” “Did you get lunch?” You get a planning period. And the kids go to special and then you take them out for recess. I am recess [monitor]. I am the lunch lady. I am the PE [physical education] teacher... After the first day, we were 19 assignments behind it. You can’t catch up from that.

Brittany expressed having to do the work of multiple school staff members without the transition period built into the brick-and-mortar school day for teachers. Her being the sole person responsible for implementing lessons and a large amount of homework showed the school’s lack of planning and unrealistic expectations of the parents. It also revealed the school’s misunderstanding of remote learning, specifically that the same amount of work in a ‘traditional’ school day could simply be translated to an online format and be appropriate for the home setting. The assumption that students should be able to do the same amount and caliber of work from a different educational setting failed to consider the necessary modifications and adaptations students might need. Similarly, Shanti explained:

Virtually, they [educators] do not take into consideration how much time he [Shanti’s son with multiple disabilities] needs to sit, because, if he is there [at school], he is transitioning from [the] second [floor] building to the ground floor. It’s not a one-minute thing... But when he is virtual, they want me to be prompt online within one minute and not give him that time of transition, and that frustrates him... And you do not even take into consideration that he needs a break, or I need a break. I am literally sitting nine to four with him, and my husband is cooking and doing a job too... Everything is on us. We are constantly like a machine running behind him.

Shanti portrayed the school’s unrealistic expectations and false assumptions about the ability to implement remote learning without structural support. Although a transition process, which provides a mental and physical break to students and adults working with them, was happening in the brick-and-mortar school settings, it was not given to the family during remote learning. Lack of transition time frustrated Shanti and her son regardless of her husband’s additional support. She used a metaphor—a machine—to illustrate their busy life meeting the school’s expectations. This finding again revealed the school’s lack of understanding that brick-and-mortar school practices could not simply be translated, without thoughtful planning, to an online model. Furthermore, although implementing remote learning without consid-

ering the needs of students with disabilities, such as the lack of transition time, could be related to educators' lack of knowledge and preparedness, there may also be ableist assumptions at play in the design of remote learning that make it inaccessible and not meaningful for these students. The focus on able-bodied norms and assumptions that all students can easily adapt to remote learning without any additional support or accommodations can exacerbate the challenges faced by students with disabilities.

Balancing job, remote schooling, and home responsibilities

All mothers, especially those with job duties, struggled to balance work, remote schooling, and home responsibilities. They utilized their available resources and rearranged their work schedule to support their children at home. Julie, a nurse practitioner, explained:

There isn't really a whole work-life balance because my entire work schedule is built around me being able to support the kids in virtual school. So, I work a lot more weeknight shifts and weekends to be able to do that [virtual school] ... I did a lot of sleep for three hours after a night shift, so I could be awake to support whatever therapy was happening. Because it didn't really go so well with the respite worker, or I come home from work and then school had been a disaster that day for whatever reason. Then I'm doing fourth grade at 7:00 PM because we felt it needed to get done.

Julie was able to arrange her work schedule to support her child's remote school and therapies with the trade-off of losing sleep and needing to work over the weekend. Despite the support of a respite worker, she still needed to provide educational support to her children at the cost of her sleep.

Some parents without adequate social support experienced a greater struggle balancing job, home, and school responsibilities. For example, Erika, a single mom who was also the primary caregiver of her 87-year-old dad, shared:

It was very hard because I'm a single mom. I wouldn't start working till about noon... Chris, that's my biggest problem at home. Mommy, mommy, mommy, mommy, while I'm on the phone with clients. And one of the directors was like, Erika, go see what he wants. He just wants me. So honestly, it's hard for me to take calls.

Erika, a lawyer, struggled to meet the needs of her child with Down syndrome (DS) at home while fulfilling

even essential functions of her job. Stressing herself as a single mom could be interpreted as lacking social support in dealing with multiple responsibilities.

Managing multiple responsibilities simultaneously also generated mothers' concerns about the quality of support they provided to their children. Another mother, Jamie-Lynn, shared:

When they were in remote school trying to balance work and doing school and doing a quality job of it. I felt like she [her daughter with DS] needed the concept of reinforcement. I would try to do the worksheets with them that they [school] would send home. But it was so rushed. I felt like, you could've made it into more fun and kind of real-life applications. I didn't have time. There was so much stress with it.

Jamie-Lynn explained that her daughter with DS needed reinforcement. As part of her new teacher identity, she needed to support her daughter in completing the worksheet assignments, which were neither engaging nor meaningful. The lack of meaningful learning activities and time resulted in more significant stress and anxiety. From a DSE perspective, the mother's experiences highlighted ableism in remote learning during COVID-19. The lack of engaging and meaningful activities for students with disabilities showed how remote learning could be inaccessible and exclusionary.

Having multiple kids needing mothers' support academically and emotionally was challenging for mothers. Claire, who had four children, two with disabilities, needed to support her children during remote learning.

Claire: I'm sick of sitting with her [Ellen had hearing and vision loss] every single day doing math because then I have to sit with Maddy [had speech and language and specific learning disabilities] every single day to do her reading and writing. She has a meltdown if I don't. That's from 9:30 to 10:30. And then from 10:30 to 11:30 ... If I don't sit right with them, it doesn't get done. The reason I got disability from the government is because I have health issues, so some days, I'm not physically up to it.

Remote learning required Claire's physical and mental energy; her two daughters constantly needed her support to meet their educational expectations, which were otherwise not fulfilled. Newly retired due to her disability, she could not always find such energy, which constrained her ability to support her daughters. Claire's experience highlighted how remote learning disproportionately burdened parents with disabilities, who faced ableism in the form of overreliance on parental support without ade-

quate accommodations or resources from schools.

Some mothers, like Eliza, also explained that they needed to (re)learn the content to support their children at home:

I had to learn a lot of stuff. I'm not a teacher. The first time we shut down, okay, these activities and these activities. And I'm reading all these articles and trying to figure out how to do all this. It was very overwhelming. Plus, I have an older kid and a middle kid. The middle kid needed help with the schoolwork or grammar or math. I would be sending the teacher an email and saying, "can you link me to some quick YouTube on this content?" I don't want to teach her something different than what she's being taught. I'm 46. Grammar school was 30-something years ago for me. There's a lot of things that change how they learn.

Eliza had three children who were learning different content and needed a different level of support. Especially during the first shutdown, she felt overwhelmed by trying to learn the content to teach her daughter with DS the academic concepts as the school taught them while supporting her other two children. Despite having a bachelor's and master's degree, she needed to learn how to teach content, as instructional approaches had changed over time. She advocated for herself by asking teachers to send digestible resources related to the content, revealing the school's false assumption about parents' having necessary content knowledge.

Julie argued that parents of children with disabilities dealt with more challenges than parents of children without disabilities:

When you have a kid with a disability, there're even more [challenges] because I'm managing my work, I'm managing virtual school. I have a lot of friends that are also managing that. I'm also researching kindergarten math curriculums and emailing them to the special ed teacher and trying to figure out if there's another way that I can teach my five-year-old how to learn addition... Having four extra conversations about that and then spending a hundred dollars on Amazon to buy another math curriculum. That's always been a part of special needs parenting that I spend all spring worrying about an IEP when other parents don't have to do that.

While acknowledging all parents' struggles during remote learning, Julie argued that such struggles were more significant for parents of students with disabilities, who were most often the ones to ensure that the curriculum properly accommodated their children. Ensuring accessi-

bility of the curriculum required parents' time for searching out appropriate materials and communicating with teachers, and parents' economic resources to purchase the materials. Moreover, the IEP process caused additional stress for parents of students with disabilities, given the significance of IEPs for their children and the complexity of navigating the IEP process in general.

Blurring the boundaries between home and school and collision of mom and teacher identities

Remote learning blurred the existing home and school boundaries and caused a collision of mom and teacher identities, seen in children's resistance in doing the schoolwork with their mothers and low level of motivation. For example, Eliza expressed:

She's very routine driven... When we shut down in the spring for the first time, it was asynchronous. The teacher would send me the stuff and I would do it. It was a nightmare. She didn't want to do the work... She didn't want to watch the computer. So, my husband was like physically holding her. And she was like trying to get away... When she's home, she has a site mentality, this is my home, I do home stuff.

The first shutdown disrupted her daughter's routines, which Eliza described as a "nightmare." Asynchronous learning came with many new practices, routines, expectations, and responsibilities for parents and their children with disabilities. Home becoming like a school was a significant change for Eliza's daughter with DS, which challenged the entire family.

The collision of mothers' new identity as teachers with their mom identity was seen in their children's unwillingness to work with them. Brittany explained:

They [children] see especially Henry sees me, I am mom. Mom is mom... I am not a teacher. I will never be a teacher in his eyes. Mom gets me dinner, brings me breakfast, and plays with me. Mom is not Mrs. Baca, his OT. Mom is not a PT. So, the distinct roles are very... it's one or the other with him.

Here, Brittany shared that her children, especially Henry, had clear boundaries for her role as his mom, with specific tasks such as bringing breakfast and playing together. This made Brittany distinct from his teachers and service providers.

The mothers' identity collision influenced their children's education and negatively impacted some of their relationships. Olivia described:

I mean it's [being a teacher] a full-time commitment when I'm doing it. It is damaging. I'm just

[a] mom. Our home environment is nothing like a classroom environment. The peer pressure isn't there to comply with the expected behavior... Mom is not [a] teacher... So, sometimes, the only way that I can get my point across or for him to listen is by raising my voice. That was not the norm in our house at all. So, things are tense... So, in my email that I wrote to them [school], like, "It's destroyed our relationship."

Olivia perceived herself as "just [a] mom," instead of her son's teacher. The contextual differences between home and school were not motivating her son to engage in schoolwork with Olivia. Being a teacher at home changed the pre-COVID home norms, such as raising her voice to have her son listen to her, which harmed their relationship. By emailing the school about how this new culture destroyed their relationship, she advocated for herself and her son. Similarly, Fallon explained how her new identities as a teacher and therapist changed her relationship with her son:

Trying to be John's speech therapist, his occupational therapist, his special ed teacher and his teacher all at the same time. The relationship that John and I had before has changed... When he sees me now, he just automatically thinks work. I've been trying to snuggle up with him more and be more affectionate. When we're done with school, I give him a hug, but... he obviously favors my husband right now.

Fallon's multiple identities—mom, teacher, and therapist—required distinct ways of being and acts, which changed her and her son's relationships. She tried to differentiate her role as mom by hugging him and being more affectionate after school, yet identity boundaries did not disappear for her son, who now preferred his dad to his mom. Beth also described how her relationship with her daughter was strained by her new role:

It [remote learning] was really putting a strain on my relationship with my child because it was the refusals, the behaviors. School for the most part is a non-preferred activity for her. It was constant fighting. Her behavior then started spilling over into the rest of the day after school was done. And I've noticed that I basically have my little girl back now that we have a good one-to-one, and there was that separation between me being her mom and someone being there for school. The behaviors spilling over into the rest of the day have pretty much stopped now.

The collision of mom and teacher identities was explicit in Beth's experiences. As school was a non-preferred

activity for her daughter and her new teacher identity demanded completing schoolwork, conflict between mom and child resulted and new behavior issues emerged. With the one-on-one support, identity boundaries were restored, which terminated undesired behavior.

Mental health

Mothers' new identity as teachers brought various challenges, such as balancing work, school, and home, finding meaningful ways to support their children, and dealing with COVID-19 in general, which negatively influenced their mental health. For example, Erika, a single parent, explained with a trembling voice:

Chris has a love of learning... I just felt like I was crushing his love of learning... I bought so many things on Lakeshore Learning, that was my way of coping. Well, maybe this will help me. I don't know how much it helped or didn't help... I did not think I was going to make it. I was working, I wouldn't let my dad go out to the store. So, I did all the shopping, most of the cleaning, and I was teaching, and doing my job and trying not to lose my mind. I did lose it a couple of times. I'm very ashamed of this, but one time I picked up his paper and ripped it up. I couldn't cope anymore. Thinking back on being angry and yelling at him to get to the table. Why would he come to the table to learn if I'm yelling at him?... In that moment, I can't figure out what's motivating him because I'm too flummoxed by everything... I was exhausted, and stressed, and scared, and worried about what it would mean for his future to lose that many months of school.

Like many participating mothers, Erika felt guilty for not being able to provide adequate support to her son. As a single parent, she had multiple responsibilities, such as cleaning and shopping, while trying to find ways to support her son's education at home. Purchasing various educational programs was a coping mechanism for her, although she was unsure of their effectiveness. Some of her ways of dealing with the challenges, such as yelling, exacerbated her negative emotions, negatively influencing her mental health. Similarly, Brittany described,

I get to go to the grocery store at six in the morning, [had] no [to] very little sleep. There were days where, lots of tears, not going to lie. You feel bad for the kids because I am short with them, and you don't want to be short with them.

Many mothers, like Brittany, felt isolated and lonely and blamed themselves for their perceived unsuccessful

efforts in supporting their children. This could reflect the lack of support provided to families during the pandemic by schools and the larger systems. Olivia's experience was an example of the school's lack of support:

They're [educators] not acknowledging a need [behavior], then, they don't have to make a [IEP] goal. And then, there's no services that get assigned to it. So, it kind of stems from there. Everybody's just hoping that we can just ride it till all of this is over. And then, go back to how things were. But in the meanwhile, 'We're really suffering.' Virtual school really sucks in our house a lot.

For students to receive support, schools needed to acknowledge the need and include related services in their IEP. In Olivia's case, the school did not recognize and support the newly emerged behavior needs because they were not seen in the brick-and-mortar setting. For Olivia, the school expected parents to support on their behalf and acted like everything would be the same as before COVID-19, which led her to perceive schools as ignorant of the impact of the pandemic on their mental health and their children's educational progress. Olivia's experiences reflected the systemic barriers (e.g., not acknowledging the need leading to not redesigning the IEP) created by educators, which hindered her son's access to learning.

Opportunities

Transparency in School Practices

Mothers' new identity as teachers also created potentially positive opportunities. Remote learning made school practices transparent, allowing mothers to observe responsive and unresponsive school practices and reinforce learning at home, which were mentioned by twelve mothers. For example, Shanti realized that her son's school did not consider his apraxia while teaching.

Shanti: I knew their [school's] flaws because of COVID. Otherwise, I would have never understood what's happening in the classroom and why he's not progressing. They did not take into consideration his apraxia diagnosis. So, they were teaching him to count 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, without pause. With the apraxia, you can't do that because without pause, it becomes a one word for them. When I pointed it out to her [the special education teacher], she was like I want him to do the one-on-one counting. He does one-on-one counting, but he cannot pronounce seven. He cannot pronounce 11. He cannot pronounce 12. No matter how hard he tries, he's not going to be able to pronounce it... She, I think, continued the

same kind of education. They have a bad habit of not listening to me and trying [to do] their own. But what happened in February? She mentioned that he does not stop when he counts 1 to 10... because what you made him do that.

One of mothers' primary tasks in being a teacher at home was to sit next to their children during remote learning, allowing them to observe instructional practices. In this excerpt, Shanti realized that the teacher did not consider her son's disability—apraxia—during instruction. Once she identified the issue, she advocated her son by sharing it with the special education teacher. Yet, although she was the one implementing the educational programming, her voice was not valued by the teacher, as evident in unchanged practices. Shanti perceived the problem in unresponsive teaching practices and the teacher's perspectives instead of in her son, signifying a social model of disability. Similarly, Marie, an English teacher, explained,

I get a much closer look at what the school is doing and ... not doing with my kids. For example, Mary [is] in second grade and literacy is super important to me. We've done a lot of work on literacy at home, and she's got over 200 sight words. I decided that she was ready to learn phonics this year. And the school wasn't like, she'd occasionally get a worksheet on initial sounds, but nothing like concentrated and focused and systematic. And I hired a tutor, and I had a series of meetings with the school about wanting the reading specialist to work with my daughter. They pushed back and said that the special ed teacher could do it. And I had to call the special ed director privately and say like, look...I've seen the special ed teacher do reading instruction with my child and she's not good at it. What she does is not appropriate. It's too abstract. There are too many goals, and we need somebody else.

Here, Marie's and the school's literacy practices and expectations were not aligned. Having literacy content knowledge enabled Marie to evaluate the school's literacy practices and work on sight words with her daughter. However, once she decided to move on with phonics instruction, she realized that the school's literacy practices for her daughter were less challenging, which could be related to deficit perspectives toward students with disabilities. Utilizing her economic resources, she hired a tutor to compensate for the lack of systemic and well-designed school literacy practices. Simultaneously, she advocated for her daughter to receive literacy instruction from a

reading specialist, which was not acknowledged by the school. However, she persisted in her request by providing her observations of the special education teacher giving an abstract and inappropriate reading instruction as evidence.

Reconceptualizing children's abilities

Some parents may have internalized notions regarding their children's abilities due to the systemic portrayal of ableism and deficit-oriented ideas toward children with disabilities in education and society. Mothers' new identity as teachers enabled some of them to reconceptualize their children's abilities and realize their competence for learning. Regarding the positive side of COVID-19 and opportunities due to remote learning, for instance, Jamie-Lynn expressed:

Even now, from when in January there were things [that] we were working on. I am like she is never [going to] get this. And then when we were doing remote school last week to see how far she had come with it. That was really neat to see academically. But I don't think I give her enough credit for how she can progress because I'm in here and now. It just takes so much repetition. Secondly, spending more time with the kids. Third that I'm lucky enough having a job that I could be like I'm not scheduling calls during this time. I'm not available. And they're supportive.

Here, Jamie-Lynn re-examined her previous deficit assumptions about how much her daughter could learn and progress when she had an opportunity to work with her during remote learning. The acquisition of this knowledge can be leveraged to challenge systems that maintain low expectations for students with disabilities. Jamie-Lynn also acknowledged her privileges and resources, such as having a flexible and supportive job, that allowed her to spend adequate time with her daughter to reinforce learning. Similarly, Fallon expressed her knowledge about where her son was academically and the importance of reinforcing.

I feel like he's learning a lot...I've never been like his teacher. So, I really do know what he knows, what he doesn't...also which days he seems to do really well, which days he doesn't...It's taught me kind of how [he is learning]. Right now, he's learning the seasons and [I am] kind of showing him all of that. Being able to reinforce some of that at home, even when it's not during school time has been really good for him. I can now offer a way more during his IEP meetings as to know what

works for him, what doesn't work for him, and also continue to be an advocate for him for inclusion.

Fallon's new identity as her son's teacher gave her opportunities to have insights about her son's current academic performance and learning preferences. This new knowledge about her son will be helpful for future advocacy in IEP meetings and advocating for inclusive placement. Fallon continued reflecting on her implicit deficit assumptions about her son, which transformed through her realization of his abilities:

I think that's something that I need to carry with me to not assum[e] that he's not going to get something, to underestimate him. There was one time I was talking to his speech therapist. And then John and Lucy, my two-year-old, they were hanging out together and [I was] hearing all this noise in the bathroom and I was like [I] have to clean that up later. When I was done talking to her, I asked my two-year-old if she needed to go to the bathroom. She's like, I already did. Like, 'What do you mean?' And so, John had taken her to the bathroom. He had put her on the potty and then like he had gotten her off. Like he had done all this stuff. I've never thought that he could do that. He's seven. He's still really young. But the fact that he had the thought to do all of that, even without calling me, asking for help. ... I really need to not underestimate them. I often think that other people are underestimating them. And so often I realized that I am too.

Fallon's realizations allowed her to reflect on her implicit deficit perspectives on her son with DS. Her experiences revealed the internalized ableism which could exist within a family by inadvertently limiting students with disabilities' academic potential. Her new teacher identity and spending time with her son disrupted her deficit notions and strengthened her presumption of competence.

DISCUSSION

This study examined the educational experiences of parents of students with disabilities during the COVID-19 pandemic. The findings revealed mothers' new identities as teachers of their children with disabilities at home during remote learning, which brought unique challenges and opportunities. Although participating mothers received different levels of support from their partners and disability-related services, they were the primary educational support to their children with disabilities, which is

consistent with previous studies (Lee et al., 2021; Long et al., 2021; Kerr et al., 2021; Collins et al., 2020; Tomaino et al., 2021). This finding could exemplify historical gender norms, indicating that mothers take on more childcare and schooling responsibilities than fathers (Collins, 2021).

One of the participating mothers' main challenges was educators' overreliance on them in remote learning, requiring them to sit with their children with disabilities throughout the day without adequate transition periods and to complete assignments with them. This finding showed that educators simply translated in-person teaching to a virtual format without differentiation, failing to acknowledge families' needs, other responsibilities, and contextual differences between home and school, which exemplified ableism. This "one-size-fits-all" approach in remote learning was not considered effective for diverse learners (Gillett-Swan, 2017). Similarly, 90% of parents of children with developmental disabilities in a US study reported the significant level of support that their children needed from them during remote learning (Tomaino et al., 2021).

Mothers challenged with balancing multiple responsibilities—jobs and multiple children—during remote learning tried to deal with these responsibilities by utilizing their available resources (e.g., economic and social), rearranging their job schedule, and relinquishing their personal needs (e.g., sleep). Such struggles were also noted in previous studies (Garbe et al., 2020; Harrison, 2021; Shaw & Shaw 2021; Tomain et al., 2021). For instance, in Garbe et al.'s (2020) study, parents reported overwhelming challenges in balancing job demands and children's remote schooling, supporting multiple children at home, and lack of time for self-care. Moreover, Harrison (2021) positioned her family as a "privileged white family" with economic security, revealing the economic demand of remote schooling on parents of children with disabilities, such as needing to hire someone to support her daughter's IEP goals.

The study findings showed that remote learning blurred home and school boundaries, caused a collision of mothers' mom and teacher identities, changed the home norms, and resulted in children's resistance to engaging in schoolwork and lack of motivation. Therefore, the relationship of mothers and their children was strained, which was also documented in Greenway and Eaton-Thomas's (2020) study. In addition, children's low level of motivation towards remote learning was found in previous studies (e.g., Garbe et al., 2020; Shaw & Shaw, 2021). Moreover, disruption of old routines and adjusting to new ones caused frustration and behavior

issues in children with and without disabilities during the pandemic (Greenway & Eaton-Thomas, 2020; Lee et al., 2020).

Mothers expressed increased mental health concerns, such as anxiety, due to these overwhelming challenges, which is in line with previous studies conducted with parents of children with disabilities (Asbury et al., 2021; Greenway & Eaton-Thomas, 2020; Shaw & Shaw, 2021; Neece et al., 2020; Ren et al., 2020). Ren et al. (2020) found that family income, parents' educational level, parents' working at home during the pandemic, and having social support negatively correlated with parents' anxiety levels. Participating mothers explained their sense of guilt due to their perceived lack of support for their children, which was also found in Greenway and Eaton-Thomas's (2020) study. Maternal guilt is a widespread feeling among women, perpetuating a sense of perceived bad mothering or not being enough for their children, which is shaped within social, cultural, political, and economic contexts (Collins, 2021).

Although mothers experienced significant challenges, they also highlighted potential opportunities regarding their new teacher identity. They could evaluate responsive and unresponsive school practices that became transparent during remote schooling, reinforce learning throughout the day at home, and gain insights about how their children learn, leading them to reconceptualize their children's abilities. Parents of students with disabilities in Ocasio-Stoutenburg and Harry's (2021) case studies also observed nonchallenging and unresponsive instructional practices due to the transparency of remote learning. Participating mothers' input about ways to support their children with disabilities was not taken into account by some educators, which is consistent with studies conducted before COVID-19 (e.g., Trainor, 2010). This finding revealed that professional and parental knowledge is wrongly in a hierarchical relationship, as the former holds more power than the latter, although parents' engagement and voice play a crucial role in securing inclusive education (Kalyanpur et al., 2000).

Mothers' realization of their own implicit deficit assumptions about their children with disabilities could disrupt the ableist assumptions and practices that hinder children with disabilities' potential. Some shared that they would use their new learning in their future advocacy for inclusive education during IEP meetings and in general. Pre-COVID studies extensively documented parents' continuous advocacy to secure inclusive education for their children with disabilities (e.g., Ocasio-Stoutenburg & Harry, 2021).

Implications and Recommendations

This study provides implications for educational practice and research. Regardless of the pandemic, remote schooling could be utilized for teaching and learning in educational practice for various reasons, such as severe weather conditions and national disasters. Therefore, learning from the parents' experiences is crucial to ameliorate remote educational practices. Remote learning should be a collaborative effort between teachers and parents. In addition, it should not simply translate in-person teaching to an online format and should acknowledge parents' multiple responsibilities. Therefore, pre-service and in-service training about inclusive remote learning should be provided to educators.

Participating mothers dealt with mental health issues, including increased anxiety and guilt, while trying to support their children with disabilities. Thus, future educational practices should provide families with adequate support and specific mental health resources.

The transparency of remote learning created various opportunities, which could also be beneficial to in-person teaching. For instance, educators could share curricula, materials, and differentiated learning methods with families to reinforce learning at home naturally. Simultaneously, educators should acknowledge parents' knowledge about their children with disabilities learning and incorporate them into their teaching.

This research highlights the importance of effective communication and collaboration between parents of students with disabilities and teachers. Additionally, it is essential to recognize the significant knowledge that parents possess about their children's abilities, challenges, and needs. As demonstrated by the findings, moth-

ers played a vital role in leveraging their knowledge to support their children during remote learning. To best support students with disabilities, it is recommended that parents be empowered and encouraged to contribute their perspectives during IEP meetings and in educational decision-making more broadly. By valuing and utilizing the expertise of parents, teachers, and professionals, it is possible to create more inclusive and equitable learning environments that enable all students to achieve their full potential.

LIMITATIONS

This study has a noteworthy limitation. Although we aimed to recruit more diverse parents, primarily White, middle-class, and English-speaking mothers contacted us to participate in the study. Therefore, our participants' experiences may not fully portray the educational experiences of diverse families of students with disabilities. Also, the lack of diverse families, especially historically underserved families, could be related to their lack of time and the urgency of other responsibilities due to the pandemic. Future studies could focus on diverse under-represented families, such as African American and Latina/o/x.

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