

**IMPROVING THE WRITTEN COMMUNICATION OF PSYCHOEDUCATIONAL
RECOMMENDATIONS: A VIGNETTE STUDY**

by

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Abstract

It is often the parent's responsibility to follow through with the recommendations outlined in their child's psychoeducational report. Yet, despite research demonstrating the importance of effective professional-client communication in fostering follow-through with recommendations, as well as low adherence rates, few studies have examined how to best communicate recommendations to parents. This is an unfortunate reality given that the recommendations are often the most crucial component of the psychoeducational report in enriching the child's future functioning. In turn, many children's needs are not attended to and the usefulness of the psychoeducational report is drastically diminished.

In the present study, parents' preferences for the way in which recommendations are communicated in a psychoeducational report was examined. Specifically, by developing a procedure to assist in exploring this topic and field testing different recommendation formats, we hoped to gain insight into parents' preferences for how written recommendations are presented and communicated. Additionally, the recommendation formats influence on parent's likelihood to adhere to recommendations was also explored. To accomplish this, a multi-stage, Vignette based, case-study design was employed which combined the Vignette technique with a survey format. Four broad themes and nine subthemes emerged from parents' review of the different recommendation formats, including: organize recommendations into subject areas with headings, provide recommendations with detailed instructions, provide goals and explain how to monitor progress, and, make recommendations specific. Results also indicated a statistically significant difference in likelihood of adherence depending on which recommendation format was reviewed.

Preface

The graduate student, under the supervision of the research supervisor, conducted the present study. The research supervisor assisted in study design and participant recruitment. The graduate student also participated in study design and participant recruitment, and was primarily responsible for the analysis of results and writing of the present study. This thesis is therefore representative of the graduate student's work as co-investigator and lead author. The UBC Behavioural Research Ethics Board granted approval to conduct the present study (certificate number H12-02561).

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Chapter 1: Introduction

Overview

Parent involvement in children's learning and schooling is a topic that must be considered by school psychologists since a strong positive relationship between student achievement and parent involvement in education has been documented (Christenson, Rounds & Gorney, 1992). The notion that parent involvement has positive effects on student achievement is supported by a substantial body of literature, including several literature reviews demonstrating the presence of this relationship. In a review of 18 parent involvement studies, it was concluded that parent involvement correlated highly with student achievement (Henderson, 1987). Likewise, in Christenson and colleagues review of 160 manuscripts numerous parent-centered correlates of positive academic outcomes for students were identified, with general findings being consistent and of a sufficient magnitude to be considered meaningful (Christenson et al., 1992). In a more recent study, the benefits of parental involvement in children's schooling have also been highlighted (Amaral, 2003). Such findings help to identify parent involvement as a broad area of influence for school psychologists to use in both assessment and intervention for student's learning. However, there exists an inadequate focus on parents in the psychoeducational assessment process of school-aged children, a critical component of understanding children's learning needs. This void, both in practice and in the literature, calls for the need for more research in this area.

Definition of Key Terms

Psychoeducational Report. A *psychoeducational report* is a type of psychological report that focuses on assessment and interpretation of results from psychological and educationally related tests, including tests of cognitive abilities, achievement abilities and tests of behaviour or attention.

Recommendation. A *recommendation* is a suggested course of action, made by a psychologist, aimed to remediate a child's educational, behavioural or social-emotional difficulties. For example, a recommendation may be an educational recommendation, such as an instructional recommendation or accommodation, or a recommendation for further assessment or other services (e.g., psychological counseling or therapy).

Vignette. A *Vignette* is a short, carefully constructed description of a person or situation, representing a systematic combination of characteristics, which is used to assess the importance of Vignette factors which influence individual responses to contextualized but hypothetical Vignette situations (Atzmuller & Steiner, 2010).

Chapter 2: Review of the Literature

Parents and the Psychoeducational Assessment Process

Within the broad topic of parent involvement and childrens' learning, a specific area where parental involvement is particularly important is the implementation of recommendations following a child's psychoeducational assessment. Parents play a critical role in children's follow-through with professional recommendations, given the prominent role parents play as provider of legal consent, transportation and financial support (Nock & Ferriter, 2005).

Therefore, it is critical that school psychologists have an understanding of parents' perceptions, needs and experiences in the context of psychoeducational assessment. Few studies, however, have investigated the psychoeducational assessment process, directly from a parents' perspective (Human & Teglasi, 1993).

Some researchers, however, have explored various aspects of the psychoeducational process and related outcomes with an emphasis on parents. Bostrom, Broberg & Hwang (2009), for example, explored differences in parents' descriptions and experiences following their child's identification of an intellectual disability. Through an applied interpretive phenomenological approach, it was found that for most parents there is a combination of positive and negative emotions towards the child with an intellectual disability. In a similar study by Dyson (1996), through parents' accounts of family experiences, it was found that parents in families of children with a learning disability experience significantly more stress but place a greater emphasis on personal growth. More recently, mothers' experiences with participating in the feedback conference for their child's psychoeducational assessment was explored (Merkel, 2010). A key finding was that mothers brought certain prior expectations with them to the feedback conference, which influenced their thoughts and attitudes during and after the feedback

conference, and that factors such as the presence of a support system and a parents understanding of the purpose and value of the recommendations plays into their decision to follow through with psychological recommendations (Merkel, 2010).

The rich and valuable information gleaned from studies such as these, highlights the need to explore the psychoeducational assessment process directly from a parents' perspective. As discussed at the outset of this chapter, this necessity is underscored by the significant role parents play in childrens' psychoeducational assessment.

The Communication of Assessment Information to Parents

Since most children are too young to receive assessment information directly, it is usually communicated to parents with the expectation that they will retain and understand this information. In 1988, Williams and Hartlage pointed out that the literature contained "very little information" (p.230) about how accurately parents received psychoeducational information. Although this topic has gained some attention in recent years, few studies have investigated the communication process between parents and psychologists within the context of psychoeducational assessment in the over 25 years since the Williams and Hartlage research. A small number of studies have focused on the communication of verbal assessment information between parents and psychologists, with less attention on the communication of written information. Most research on this topic has focused on the communication process between patient and clinicians in medical settings.

Of exception, William and Hartlage (1988) studied parental understanding and the accuracy of the transfer of verbal diagnostic information. Participants included parents of 20 children who received psychoeducational evaluations due to academic or behavioural difficulties. It was found that there was only 47 percent agreement between what the

psychologist said and what the parents' perceived immediately after being given a summary of test results. A week later there was only 44 percent agreement between what the psychologist actually told the parents and parents' perceptions of what was said. Interestingly, parents were more consistent in their own recollection of diagnostic information than in their recollections of what was actually told to them (William & Hartlage, 1988). Overall, these results indicated poor oral communication of diagnostic information between psychologist and parents, despite parents' satisfaction and comfort with the feedback sessions.

In a more recent study, Harvey (1997) demonstrated the continuation of poor communication between psychologists and parents. As Harvey (1997) stated, 'psychologists working in school, clinics and independent practice often write reports at levels higher than the educational level of their audience, particularly parents' (p. 271). A focus on the communication of written assessment information to parents is particularly relevant to the current study. In Harvey's review of 20 psychological reports written by practicing psychologists in schools and independent clinics, it was found that the reading level of the report required advanced skills for comprehension. Writing samples from 75 psychological reports written by graduate students were also reviewed. It was found that psychologists in training also wrote reports at a level that was 'very difficult' to understand (i.e., Flesch level 14.09). Harvey (1997) provided possible explanations for why psychologists often write reports that are too difficult to understand, including: a desire to impress the reader and bolster prestige, the belief that their primary audience is other professionals, or simply their tendency to write in a manner that reflects their own level of education.

The unfortunate reality of poor written communication between psychologists and parents is supported by a more recent study of 11 recent graduates from a university-based

training program (Harvey, 2006). Results indicated that these novice psychologists wrote reports that were very difficult to read for four main reasons, including: poor model reports available to psychologists in training, poorly defined technical terms, the substantial amount of time it takes to write a report that is easily understood, and confusion about how to address multiple audiences. According to Harvey (2006), recent graduates are unsure as to whether reports should be written for parents or other professionals. Furthermore, psychoeducational reports are likely to include jargon, poorly defined terms, to have poor or illogical explanations of results, to make vague or inappropriate recommendations, to be poorly organized, to emphasize numbers rather than explanations and to be of an inappropriate length (Harvey, 2006); thereby hindering the successful communication of assessment information to the reader. This claim is supported by Mastoras, Climie, McCrimmon, & Schwean (2011), who state that despite long standing research stressing the importance of having psychoeducational reports written in a readable and clear manner, this is not always the case.

Pain (1998) has also shed light on the subpar communication of written assessment information to parents. In a study of 11 parents of children between the ages of four and eight years old with learning and physical disabilities, it was found that parents far preferred personal communication (e.g., face-to-face-) over written communication. For these parents, written information was considered more of a 'back up to what had been said' (p. 303).

Overall, a review of the literature suggests that the communication lines between psychologists and parents are poor. In particular, findings suggest that assessment information communicated in written form, including psychoeducational recommendations, is compromised by the poor readability of psychological reports.

Characteristics Influencing the Communication of Written Assessment Information

Recognizing that assessment information continues to be poorly communicated to parents, as previously discussed, and that the psychoeducational report remains the primary vehicle for communicating assessment information (Mastoras et al., 2011), there is a great need to explore characteristics of the psychoeducational report that may be hindering the communication of written assessment information. This knowledge may help inform practices within a psychoeducational setting, improve the usefulness of written recommendations for parents, and on a broader level, facilitate their follow-through with recommendations.

Most studies have examined characteristics of the psychoeducational report as a whole, however due to the focus of the current study, characteristics impacting the communication of the ‘Recommendations section’ specifically, are emphasized in this review. There are a few research findings that suggest that the way in which written recommendations are communicated in a psychoeducational report may influence how effectively they are received by the reader, and consequently, how likely they are to follow-through with recommendations. Lichtenberger, Mather, Kaufman & Kaufman (2004) discuss characteristics of recommendations that may impede the communication between the writer (i.e., psychologist) and the reader (i.e., parent). These researchers suggest that recommendations that are too vague, lengthy, time consuming, or not understood by the person responsible for implementation (p. 162), are communicated less effectively. Similarly, Mastoras et al. (2011) also discuss how providing well-reasoned connections between the results and the recommendations in the psychoeducational report may improve the communication of the recommendations to the reader by making them “more meaningful, stronger and persuasive” (p. 137).

As previously discussed, the readability of text has been found to impact how effectively written recommendations are communicated. In a study by Weiner & Kohler (1986), which examined 45 parents of children with learning difficulties, it was found that the organization of information, the clarity of behavioural terms and the specificity of recommendations enabled parents to better comprehend the information (Weiner & Kohler, 1986). Similarly, in an earlier study by Weiner & Kohler (1985) they also found that teachers' comprehension of psychoeducational reports, including the recommendations, was also influenced by these same variables (e.g., organization, clarity of terms, specificity). In a more recent study by Carriere (2010), although not focusing on the 'Recommendations section' specifically, a significant difference in teachers' comprehension of three different report writing models was detected. More specifically, Carriere (2010) found that the 'referral-based report' model scored highest for comprehension, compared to the 'domain-based' and 'test-based' models. This finding suggests that specific characteristics of the 'referral-based report', such as the integration of assessment data or the framing of the results within the context of the referral questions, may have improved the communication of written assessment information to teachers.

In summary, these studies highlight important characteristics of the psychoeducational report that may impact how effectively written assessment information is communicated to the reader. In doing so, it also highlights the need for psychologists to carefully consider their own report writing practices and the multiple consumers of their reports.

Guidelines for Writing Recommendations

A primary function of the psychoeducational report is to provide viable recommendations for accommodations and interventions, as well as to communicate those recommendations in a manner that is understood and appreciated (Weiner & Costaris, 2012). In

fact, it is the ‘Recommendations section’ of the psychoeducational report that provides the crucial link between the assessment process and enriching a child’s functioning. Therefore, it is critical that psychologists have a clear understanding of how to best communicate written recommendations to the reader. Unfortunately, research has focused primarily on related topics such as the degree to which scores should be reported or how to structure and organize test results in psychological reports, rather than on how to effectively communicate written recommendations.

Some professional resources are available to psychologists to assist in the writing of recommendations. Montgomery, Dyke & Schwean’s (2008) S.M.A.R.T principles for recommendations, for example, is a framework for ensuring that recommendations are concrete and useable. The S.M.A.R.T principles, which stand for Specific, Measurable, Attainable, Realistic and Timely (Mastoras, Climie, McCrimmon, & Schwean, 2011) have helped guide practising psychologists in their writing of recommendations. These principles have also been used to explore the structure and content of psychoeducational recommendations. For example, Mallin, Schellendberg & Smith (2012) conducted a content analysis of 90 existing psychology reports, examining organizational style, reading level, relevance to the referral question, balance of strengths and weaknesses, as well as usefulness of recommendations. It was found that as a percentage of all recommendations reviewed (90 reports), the element ‘specific’ (indicating either persons and responsibilities, or program materials or processes involved) was apparent in 45% of recommendations, ‘measurable’(provides a basis for student achievement to be described, assessed or evaluated) in 2% of recommendations, ‘achievable’ (indicated a rationale for choosing realistic goals for the student) in 15%, ‘relevant’ (meaningful or rewarding for the

student) 40% and ‘time-bound’ (specific time period identified) in 11% of recommendations. Such information helps direct psychologists on how to improve their recommendations.

Tharinger, Hersh, Christopher, Finn, Wilkinson & Tran (2008) suggest three different ways that psychologists can share written feedback with parents following their child’s psychoeducational assessment. First, they suggest providing a modified psychological report to parents that is highly comprehensible. Second, they suggest writing separate letters to different audiences (e.g., parents, school, referring professionals) that are concise and tailored to the reader. Lastly, they suggest providing parents with both a comprehensive report and tailored letters. These researchers emphasize that regardless of how the written information is communicated to parents, it is important to share all documents with the parents so they are fully informed (Tharinger, Hersh, Christopher, Finn, Wilkinson & Tran, 2008).

Guidelines for writing recommendations are also emphasized in the C.L.E.A.R. Approach to report writing (Mastoras et al., 2011). In this approach each letter corresponds to an important aspects to consider when creating psychoeducational reports: 1) child centered perspective, 2) link referral questions, assessment results, and recommendations, 3) enable the reader with concrete recommendations, 4) address strengths as well as weaknesses and 5) readability. As part of the C.L.E.A.R Approach, the importance of explicitly linking the recommendations to the referral question, results, and conclusions, and also providing readers with concrete and implementable recommendations is discussed. More recently, the communication of written psychoeducational recommendations has also been a topic of discussion in Carriere and Hass’ book (in press) which provides guidelines for school psychologists on how to provide clear, feasible and individualized recommendations that respond

to referral concerns in a format easily understood by parents and teachers (Carriere & Hass, 2014).

Lichtenberger et al. (2004) urge report writers to carefully construct their recommendations by paying special attention to the focus of the recommendation, their complexity and placement within the report, as well as the number of recommendations, their specificity, and the prescriptive nature of the recommendations. Moreover, Harvey (2006) reminds psychologists to include recommendations that are appropriate and that can be “implemented with undue duress” (p.14). Psychologists are advised to avoid using ‘canned’ recommendations and instead, make recommendations that complement parents and teachers’ skills, knowledge and experience (Harvey, 2006).

In summary, there are several resources available to help guide psychologists in their writing of recommendations, yet there appears to be a lack of perspective directly from parents on how to make these recommendations more applicable to them.

Parents’ Follow-Through with Psychological Recommendations

Exploring parents’ preferences for how written recommendations are communicated is inherently tied to the broader goal of increasing their follow-through with psychoeducational recommendations. Therefore, a review of variables that have been found to impact follow-through with psychological recommendations is fitting.

A limited number of studies have explored follow-through with recommendations in psychoeducational settings (MacNoughton & Rodrigue, 2001), with even fewer studies investigating parents perspective on this topic (Human & Teglasi, 1993). Greater emphasis has been placed on researching treatment attrition, or participant drop-out, with a focus on “variables of convenience” (Nock, 2005, p.153), which often lack theoretical perspective.

Some studies, however, have gained insight into important variables that may influence parents' follow-through with psychological recommendations. For example, Schour & Clemmens (1974) studied a group of parents of children with school-related problems, to investigate factors associated with increased implementation of recommendations relevant to the child's learning problem. Recommendations were divided into four groups (medical, mental, education, other). Results indicated that the only significant variable in implementation was the pertinence of the medical recommendations to the child's learning problem. These results indicated a large difference in implementation between recommendations 'related to the learning problem' and those 'unrelated to learning problems' (p. 906). In a more recent study by MacNaughton and Rodrigue's (2001), which investigated predictors of adherence to recommendations by parents of clinic-referred children, it was found that the number of perceived barriers was the strongest predictor of parents' adherence to recommendations.

Of particular relevance to the current study is the finding that good communication and minimizing recommendations for treatments that are too complicated, long or require significant lifestyle changes are variables associated with increased likelihood that recommendations will be followed (Meichenbaum & Turk, 1987). Similarly, Harvey (2006) also identified the clarity and length of psychological reports, and the complexity of recommendations as variables tied to follow-through with recommendations. Moreover, Borghese (1994) conducted a qualitative examination of 25 elementary teachers' perceptions of issues relating to the implementation of recommendations from psychoeducational assessments. Results indicated that, among other variables, the format for presenting the recommendations was a factor that influenced school teachers' perceived implementation.

Other variables identified in the literature that may influence parents' follow-through with recommendations include: characteristics of the psychologist (e.g., expressed confidence), parent (e.g., stress level, motivation level, perceived barriers) and family (e.g., time constraints, socio-economic status), as well as the type the recommendation (Conti, 1975; Dryer 2010; Human & Deglasi, 1993; MacNaughton & Rodrigue, 2001). In a recent study by Merkel (2010), it was found that lack of time, parent and child difficulties (e.g., personality or behaviour), and financial concerns inhibited mothers' follow through with their child's recommendations.

Overall, there appear to be numerous variables that may influence a parents' decision to follow-through with psychological recommendations, including those related to psychologist, child and parent, as well characteristics of the recommendations themselves.

Frameworks and Models

A secondary focus of the current study was to investigate the influence between the way in which recommendations are communicated in psychological reports, and parents likelihood of following through with them. Two models have particular relevance in the context of psychoeducational assessment and provide insight into this relationship. First, an adaptation of Rosenstock's Health Belief Model (1974) emphasizes the role of parents' perceptions and the utility of recommendations in explaining parents' follow through and satisfaction with recommendations (Human & Deglasi, 1993).

Second, in an adaptation of the Barriers-to-Treatment Model (Kazdin, Holland, & Crowley, 1997; Kazdin & Wassell, 1999), a parents' perception of barriers is viewed as predictive of non-adherence (MacNaughton & Rodrigue, 2001). Specifically, MacNaughton & Rodrigue (2001) propose four types of barriers to following through with psychological recommendations, including: problems with access to service, negative attitudes and beliefs,

scheduling problems and financial problems. The adapted models of Rosenstock (1974) and Kazdin and colleagues (1997, 1999) have aided in the development of research questions to investigate adherence within psychoeducational settings.

The Present Study

The primary purpose of the current study was to explore parents' preferences for the way in which written recommendations are communicated in a psychoeducational report. This need is underscored by the realization that parents play a key role in managing childrens adherence (Nock & Ferriter, 2005). Due to the need for improved approaches to research in this area, a series of vignettes were developed and validated to assist in the investigation of how to better communicate written recommendations, from a parents' perspective. Additionally, the vignettes influence on parents' perceived likelihood of adhering to the recommendations was explored. A need for research in this area is underscored by the fact that even the most comprehensive and expertly conducted psychoeducational assessment is significantly diminished if recommendations go unheeded by parents, which is all too often the case (Pollack, 1988). By seeking to understand report-related characteristics that may impact the communication of recommendation to parents, this study aimed to maximize the usefulness of psychoeducational recommendations provided to parents and, on a broader level, help ensure that a child's needs are attended to. The following research questions were addressed:

Research Questions.

1. Is there a preference for the way in which parents prefer recommendations to be communicated in a psychoeducational report?

2. Do parents perceive that the way in which recommendations are communicated in a psychoeducational report will influence their likelihood of adhering to treatment recommendations?

Chapter 3: Method

Overview

The aim of the present study was to better understand parents' preferences for the way in which recommendations are communicated in a psychoeducational report through the development and field testing of a series of Vignettes. A preliminary exploration of recommendation formats and their influence on parent's likelihood to adhere to recommendations made by a psychologist following their child's psychoeducational assessment was also conducted. In this chapter the three stages of data collection used in the present study are highlighted. The goal of Stages 1 and 2 was to develop and gain feedback on the Vignettes in order to refine and improve these measures before they were field tested with a group of parents, as well as to ensure that all Vignette formats were clearly written. In Stage 3, a Field Test was conducted with a sample of parents in order to gain insight into their recommendation preferences and factors associated with adherence of psychoeducational recommendations. Parents reviewed all three Vignette formats and completed the Parent Feedback Questionnaire. Details of the present study, including the research design, recruitment of participants and eligibility criteria, procedural information, method for data analysis, ethical considerations and measures for ensuring scientific rigor are discussed below.

Design

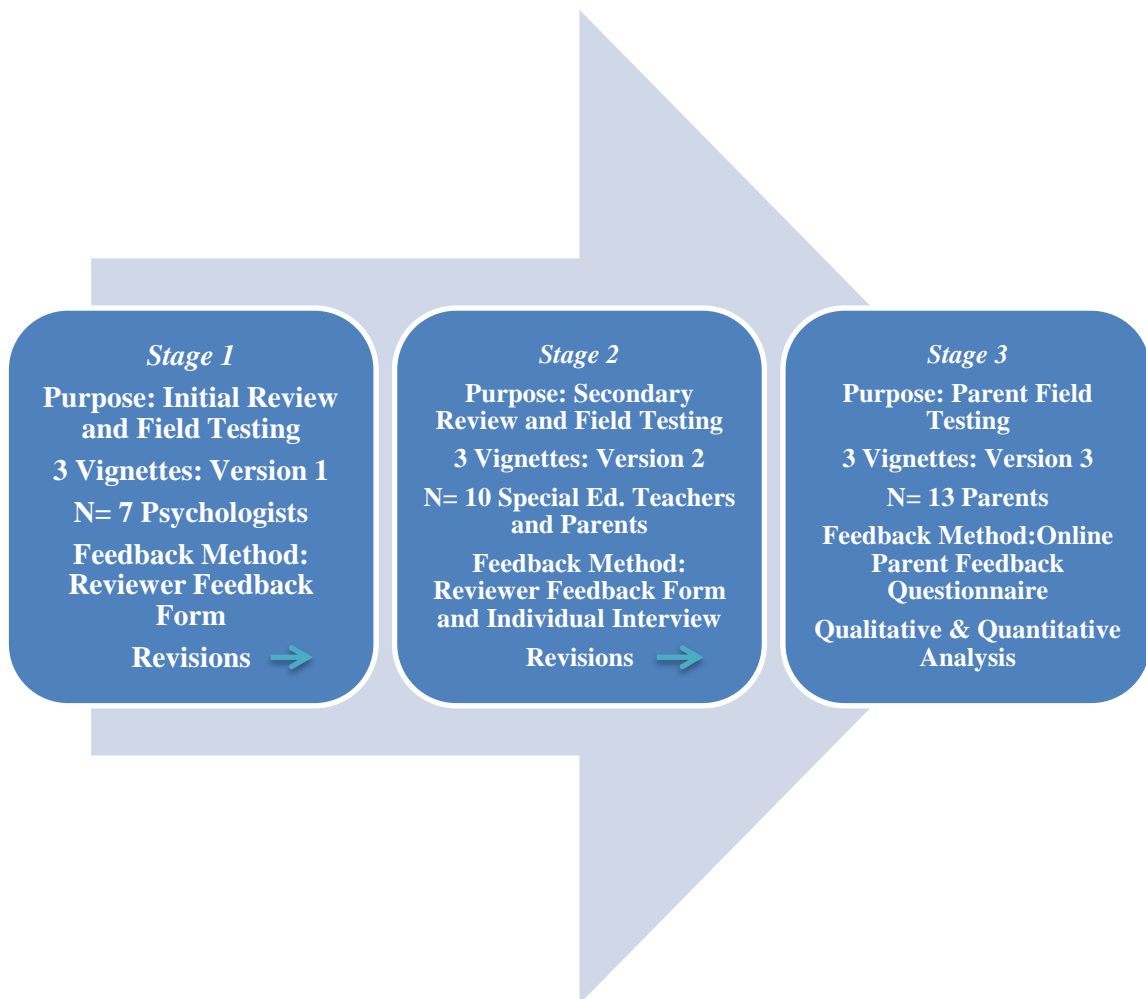
Vignette studies are a very powerful yet underused tool for investigations (Atzmuller & Steiner, 2010). Due to the special design of Vignettes they elicit participants' judgements or intended behaviour with respect to the presented hypothetical Vignette scenarios and allow for the simultaneous presentation of several contextual factors (Atzmuller & Steiner, 2010). Vignette data can also complement other forms of data collection to provide a more balanced picture of

the social world in which researchers seek to understand (Hughes, 1998). Vignette studies have primarily been used by psychologists in North America and used in quantitative studies but more recently they have also been used in a small number of qualitative studies (Hughes, 1998). In order to develop a procedure to investigate parents' preferences for the way in which recommendations are communicated in a psychological report, a multi-phase Vignette study design was employed in the present study.

Recognizing that a psychoeducational assessment and related outcomes can be a very personal, impactful and private experience for parents (Bostrom, Broberg & Hwang, 2009; Dyson 1996), a Vignette design was employed as it provides a means of introducing personal experiences while also providing a realistic context that detaches the participant from the situation (Hughes, 1998). Through the use of a Vignette design, the goal of the present study was not to match real life experiences, as advised against by Hughes (1998), but to yield information that in the long term can be used to better understand the likelihood of parental follow-through with psychoeducational recommendations. The design for the present study combined a Vignette technique with a survey (in all three Stages), similar to that used by Wiener and Kohler (1986), along with interviews in Stage 2 to gain more in depth feedback. Through the use of Vignettes, however, arise difficulties associated with the technique, such as the ongoing debate that people's responses to real life situations and those presented in the form of Vignettes differ (Hughes, 1998). As explained by Hughes (1998), a consequence of the Vignette technique is that "it neglects the interaction and feedback that is a necessary part of social life" (p 383). Thus, in the present study, detaching parents from the situation may have produced feedback that is not truly reflective of parents' emotional experiences in the psychoeducational assessment process.

Figure 1.

Study organization and data collection process



Participants & Recruitment

Stage 1: Initial Review and Development. Participants for Stage 1 consisted of a convenience sample of 7 school psychologists, who were contacted through the University of British Columbia (UBC) Supervision Seminar Group. Approximately 15 school psychologists were initially contacted and 7 completed Stage 1. Psychologists were active in the field of School Psychology and had experience with psychoeducational report writing.

Stage 2: Secondary Review and Development. Approximately twenty individuals were contacted for participation in Stage 2. The final sample consisted of 10 Special Educators who had experience reviewing students' psychoeducational reports. Four parents were also included because they are frequent consumers of psychoeducational reports and thus, their perspective and suggestions were valuable in the revision of the Vignettes. Participants were recruited through a snowball technique as well as through professional connections to the research team (i.e., Alyson Fielding and Dr. Ford). Participants provided written consent before reviewing the Vignettes and completing the Feedback Questions (paper-and-pencil format).

Stage 3: Field Test. In Stage 3, recruitment efforts took place through numerous avenues over a four month period. Seven private agencies with psychologists conducting psychoeducational assessments were contacted (four of which agreed to distribute recruitment flyers to past and/or previous clients, via e-mail and/or face-to-face contact). Recruitment efforts also took place in two private school settings in the lower mainland of British Columbia. More specifically, the research team presented to a group of approximately 40 eligible parents and recruitment fliers were sent out to principals in 49 schools. Six psychologists with whom the researcher and primary investigator had connections with were also contacted (two agreed to assist with recruitment by distributing flyers to past and current clients). Additionally, relevant agencies (i.e., Westcoast Child Development, Learning Disabilities Association of BC) were invited to take part in the recruitment process. Recruitment through the assessment center at UBC was also strongly considered but due to confidentiality concerns it was not a viable option. Recruitment flyers included screening questions to ensure that participants met criteria for inclusion in this study. Parents who had participated in Stage 2 were also invited to participate in Stage 3, in an attempt to increase the sample size. Participants were required to be an English

speaking parent of a child who had received a psychoeducational assessment in the last 5 years. The child must have been in grades K-12 at the time of the assessment. Eligibility restrictions helped to ensure that all parents had previous experience with the psychoeducational assessment process (i.e., reviewing psychoeducational reports).

Eligibility for participation resulted in the final sample of thirteen participants, two of which also participated in Stage 2. Given the nature of the recruitment process, an exact response rate could not be obtained. Despite repeated efforts and an exhaustive search to recruit eligible parents through several different avenues (e.g., private practice, relevant agencies, private school settings, professional connections) a smaller sample size resulted than originally anticipated. However, it is the researchers' belief that the smaller sample size did not compromise the use of a thematic analysis to yield potentially rich and valuable data. As Braun & Clarke explain (2006), thematic analysis carries a theoretical freedom that makes for a more flexible and useful research tool, and is therefore less subject to the rigorous criteria of quantitative approaches. They also state that what makes a good thematic analysis is being clear and explicit about what you are doing (Braun & Clarke, 2006), as evidenced in the present study through the use of Braun & Clarke's Step-by-Step Guide to Thematic Analysis (2006). It is believed that the value of participants' feedback has more to do with the insight gained from each parent and the design of the study, than with the sample size.

Of the 13 participants in Stage 3, demographic information was provided by eight participants. Five participants did not provide demographic information. The eight participants who reported background information ranged from 42 to 55 years of age and were all female. One participant had a high school education, four participants had educational backgrounds of a bachelor's degree (or equivalent), two participants had a master's degree (or equivalent), and one

had a doctoral degree (or equivalent). Seven participants had children who were referred for a psychoeducational assessment due to learning difficulties/exceptionalities (e.g., math, reading, writing, giftedness, dyslexia). Four of these children were also referred due to conditions such as Fetal Alcohol Syndrome, Attention Deficit Hyperactivity Disorder, and Autism Spectrum Disorder. One child was referred due to a prior diagnosis of Attention Deficit Hyperactivity Disorder. All thirteen parents completed the Vignette package through an online survey. Those Participants' who provided contact information were entered into a draw to win a small incentive for participating.

Procedure

Stage 1. After recruitment through the University of British Columbia (UBC) Supervision Seminar group, the school psychologists reviewed the Vignettes independently and provided written feedback to the research team on the Reviewer Feedback Form. Participants were notified that by providing feedback and returning the Vignettes to the researcher they were giving consent. Participants offered comments, criticisms, and suggestions for how the Vignettes could be improved. Feedback was reviewed by the research team and then the Vignettes were revised for use in Stage Two.

Stage 2. Following recruitment using purposive snowball sampling, Special Educators and parents were invited to review the Vignettes independently and provide written feedback on the Reviewer Feedback Form. Each participant provided written consent to participate in the study. Participants also shared their feedback with the researcher in a one-on-one interview setting. Individual interviews, instead of small group interviews, were used to provide a more dynamic and personal process for feedback and for ease of scheduling. During the interviews, each participant was asked a set of feedback questions during the 20-30 minute audio recorded

session. The Vignettes were then revised in response to the written and oral feedback and finalized in preparation for use in Stage 3.

Stage 3. Following recruitment efforts, as detailed above, eligible parents were directed to the online survey through the website link listed on the recruitment flyer. Participants were given the option to receive the survey in a paper format but they all opted to complete the survey online through Survey Monkey. Participants were informed that completion of the online survey indicated their giving of consent. Through the online survey, participants were asked to review the three Vignette formats (A, B, and C) and answer feedback questions (e.g., what they liked and did not like about each Vignette format). Although a counterbalanced design was considered, due to the limitations of the online survey software, participants were not exposed to different orders of the Vignettes. Participants were also asked what Vignette format they preferred. Using a 5-point Likert scale from 1 (Strongly Agree) to 5 (Strongly Disagree), participants indicated their agreement with three statements assessing their likelihood of following through with each Vignette, whether the presentation of the formats influenced their likelihood of following through with the recommendations, and their perceptions of whether the formats were equivalent in content. At the end of the online survey, participants were asked to provide demographic and identifying information, and indicate whether they wanted to enter a prize draw and receive a summary of the study results.

Ethical Considerations

Several ethical considerations were addressed in the current study. First, ethic approval was obtained through the Behavioural Research Ethics Board at the University of British Columbia. Second, because in Stages 1 and 2 the identities of participants was known to the researcher, numbers were assigned to all participants to help protect their identity. In Stage 3, the

identity of participants was not known to the researcher unless they chose to respond to the recruitment flyer by contacting the researcher directly or to provide identifying information to become eligible for entry in the prize draw and/or to receive a copy of the study upon completion. None of this information was tied to their individual survey. All Participants were informed that the information they provided was confidential and stored securely. Participants in Stage 3 were also informed that information from Survey Monkey is stored on a US-based server that could on occasion be reviewed if requested and that information could also be identified based on their IP address.

As previously discussed, throughout all stages of the study, informed consent was obtained. Additionally, all participants were provided with a summary of the study prior to participation and they were informed that they could withdraw from the study at any point. Contact information was provided to participants if they had any concerns about participants' treatment or rights. In Stage 2, oral consent was also obtained from each participant before the one-on-one interview was audio recorded. All audio data was password protected and could only be accessed by the research team.

Measures

Vignettes (Stages 1, 2, & 3). The Vignette formats presented below were developed for this study from a variety of report writing resources, including research studies and textbooks containing guidelines for writing the 'Recommendations section' of a psychoeducational report (e.g., Lichtenberger, Mather, Kaufman & Kaufman, 2004; Mather & Jaffe, 2002; Weiner & Kohler, 1986). These formats and their names were created specifically for this study. The Vignettes were incorporated into the online survey. Copies of the Vignettes are included in the Appendix A, B and E.

Vignette A: Standard Format. In this format, a short reason for referral paragraph was included at the top of the page. Recommendations were presented as a general list (low specificity) and did not include a lot of detail or explanation. Recommendations were stated briefly and did not direct the client towards specific resources or outline the techniques involved.

Vignette B: Categorized Format. A short reason for referral paragraph was included at the top of the page. In this format, recommendations were organized into categories (e.g., math, oral language), with intensity and duration of the services specified (e.g., Consider frequent practice with speed drills once a day for 1-2 minutes). Several recommendations contained a timeline for the completion of the goal.

Vignette C: Question and Answer Format. In this format, referral information was presented as a list of questions based on the referral question(s) and assessment results (e.g., How can we address Simon's difficulties in reading?). Recommendations addressed each question directly, with the beginning of each recommendation reminding the reader of the problem or specific finding that suggested the need for intervention (e.g., To help Simon improve his skill and confidence in reading...).

Reviewer Feedback Form (Stage 1 & 2). Because a primary purpose of the present study was to develop a Vignette format for use in future research and professional practice, feedback on the Vignettes was gathered in Stages 1 and 2 of this study. In Stage 1, feedback was gathered in writing through the Reviewer Feedback Form. Similarly, in Stage 2 participants provided written feedback through the Reviewer Feedback Form and also used it as a guide for discussion during the individual interviews (See Appendix A & B).

Interview Feedback Questions (Stage 2). Participants in Stage 2 were asked to take part in an interview with the researcher after reviewing the Vignettes and completing the Reviewer

Feedback Form. Each participant was asked six questions to provide feedback to the researchers so improvements could be made to the Field Test versions of the Vignettes (Stage 3), as well as to gain insight from the perspective of Special Educators and parents (See Appendix C).

Parent Screening Questions (Stage 3). During Stage 3, screening questions were outlined on the recruitment flyer to help determine if parents met the inclusion criteria for the study (i.e., Has your child had a psychoeducational assessment in the last 5 years? Was your child in grades K-12 at the time?). Screening questions were outlined in this manner, rather than over the phone with the researcher as initially planned, to better ensure anonymity and to simplify the process for participants (See Appendix D).

Background Information Form (Stage 3). A brief background form was completed by parents in Stage 3. Information about their sex, level of education and their child's reason for referral was gathered in order to better describe the sample participating in this study. The Background Information Form was incorporated into the online survey (See Appendix E).

Parent Feedback Questionnaire (Stage 3). Each parent was given a questionnaire consisting of open-ended questions and statements presented in a Likert style format. The questionnaire was incorporated into the online survey and allowed parents the opportunity to comment on various aspects of the Vignettes they reviewed. Information gathered from this questionnaire also helped to provide a parent perspective on the written communication of psychoeducational recommendations for use in future revisions of the Vignettes beyond this Field Test. Additionally, the questionnaire explored the way the wording of the recommendations influence, if at all, a parent's likelihood of following through with the recommendations (See Appendix E).

Data Analysis

The aim of analysis was to explore interesting aspects and themes that emerged in the data, with the ultimate goal of better understanding parents' preferences for the way in which recommendations are communicated in a psychoeducational report. Across all three stages, the method for analysing feedback was guided primarily by Braun & Clarke's (2006) phases for thematic analysis. In review of the methodology used in other relevant studies (e.g., Mallin, Schellenberg & Smith, 2012), the analysis was also guided by procedures and techniques outlined by Corbin & Strauss (2006) and Pope, Ziebland and Mays (2000). According to Braun & Clarke (2006), thematic analysis involves identifying, analysing and reporting patterns (themes) within data. Although other forms of qualitative analysis were considered, a thematic analysis approach was deemed most in line with the goals and design of the present study. For example, a thematic analysis approach allowed the researcher to compare the data collected from all three stages, rather than analysing the data in the context of what had been analysed in earlier stages, as seen in Grounded Theory. Moreover, because the present study did not aim to closely examine the real-life experiences of a small number of parents (e.g., 3-5) or to use interviews or focus groups as a primary means of gathering feedback in Stage 3, both key features of IPA, a thematic analysis was considered a more appropriate choice. A detailed account of the analysis that took place during each stage is to follow.

Stage 1. Data collected in Stage 1 was analysed according to Braun & Clarke's (2006) approach to Thematic Analysis. The first phase of the thematic analysis involved 'Familiarizing yourself with the data' by doing repeated readings of the data. Next, the researcher conducted a more thorough and "active" (p.87) reading to find points of potential interest in the data by identifying noteworthy segments of raw data and then copying them into a table in a Word

document. Related segments of raw data were then grouped together. After generating a bullet point list for how each Vignette format could be improved the Vignettes were revised in preparation for Stage 2. The aim of analysis during this stage of the study was to capture the overall essence of feedback from each reviewer.

Stage 2. Data collected from each interview was transcribed verbatim into a separate Word document and checked against the audio recording several times to ensure accuracy. The researcher did repeated readings of the transcribed data in order to become familiar with the data. Features of the data that appeared interesting and relevant to the researcher were coded manually by writing one or two key words in the margin of the page. The codes were created based on interesting and relevant information that emerged from the data. As suggested by Braun & Clarke (2006) the codes were accompanied by segments of data.

Figure 2.

Example of data segment and code

Data extract	Coded for
I felt what was really good was the specific amount of time or frequency...that kind of information is something special, and it makes you think "oh what is what I need to do".	1. Timelines are helpful

After compiling a list of different codes and corresponding data extracts, the data was collated into meaningful groups. As suggested by Braun & Clarke (2006), a mind-map was created to help conceptualize the data patterns and organize them into “theme-piles” (Braun & Clarke, 2006, p. 89). In line with Braun & Clarke’s (2006) third phase ‘Searching for Themes’, some initial codes and data extracts became part of larger themes, while others that did not fit into themes were compiled into a ‘miscellaneous’ category. As discussed by Braun & Clarke (2006), the question of how much data is required for identification of an emerging theme to be

identified as a theme, does not have a simple and clear-cut answer. Therefore, based on their proposed guidelines (2006), a theme was conceptualized as something important about the data in relation to the research question, representing “some level of *patterned* response or meaning within the data set” (p.82). More specifically, themes were determined based on (1) prevalence across the entire data set (i.e., the number of speakers who articulated the theme), (2) “keyness” (Braun & Clarke, 2006, p.82), referring to whether it captured something important in relation to the overall research questions, and (3) researcher judgement. Guided by their fourth phase of analysis ‘Reviewing Themes’ (Braun & Clarke, 2006) proposed themes and sub-themes were reviewed and refined through repeated review of the coded data extracts, as well as through collaboration between the researcher and the research supervisor. At this time, some re-coding of the data took place and the mind map was refined to reflect any changes. Some subthemes were discarded or collapsed together to form a larger theme. In Stage 2, analyses were made with a focus on parents’ and Special Educators’ preferences for the way in which recommendations are communicated in a psychoeducational report.

Stage 3. In Stage 3, both qualitative and quantitative data was collected. A description of the data analyses is described below.

Qualitative analysis. As in prior stages, the data analysis process in Stage 3 began with the researcher becoming familiar with all aspects of the data through active reading to search for emerging features of the data. Participant’s (electronic) feedback from Survey Monkey was exported into a Word document, and then emerging patterns and key ideas were identified by highlighting and making memos in the margins.

Next, referencing Braun & Clarke’s (2006) second phase of thematic analysis (‘Generating initial codes’), the researcher coded the data “into manageable chunks” (Pope,

Ziebland and Mays, 2009, p.115). As in Stage 2, the researcher extracted 'raw' segments of data that appeared interesting and could form potential themes. To increase the rigor and quality of analysis during this stage the researcher incorporated the 'memo' technique as described by Corbin & Strauss (2008). The goal of the 'memo' was to help document the researchers process of coding, as well as to reflect their interpretation of what was being said and the ideas contained in the data. As suggested by Corbin & Strauss (2008), each memo was then labeled with a code, being one or two words that best described conceptually what they believed was indicated by the data. Following Corbin & Strauss' (2008) "key advice" (p.89), the researcher coded as many segments of data as possible, kept some relevant surrounding data to retain the context and coded individual data extracts in as many different 'themes' as they fit into.

Corbin and Strauss' (2008) "analytic tools" (p.66) were incorporated into Braun & Clarke's second phase of thematic analysis to help probe the data in a more systematic way. Two specific strategies were employed. First, the asking of questions was a tool that helped the researcher think more critically about the data, probe deeper and better understand the participants perspective. Second, comparative analysis (i.e., searching for and making note of similarities and differences within the data set) enabled the researcher to compare sections of data with the rest of the data to establish analytic categories.

Guided by Braun & Clarke's (2008) third phase of thematic analysis 'Searching for themes', similar data segments were grouped together within each code to reflect potential themes. An electronic spreadsheet was used to help the researcher organize the data. Data segments that did not fit into patterns were placed into a 'miscellaneous' category and mind maps were used to help the researcher conceptualize the relationships and associations between potential themes. At

this time, themes were given working titles, intended to reveal a sense of what each theme was about.

Analogous with phase four 'Reviewing themes' (Braun & Clarke, 2006), the researcher examined the set of potential themes and determined if there was enough data to support them. The researcher also considered if the potential themes formed a coherent pattern or if the data was too diverse. A theme was conceptualized according to the same guidelines followed in Stage 2. To further validate the themes, the researcher and the research supervisor reviewed, critiqued, and modified the themes together. As explained by Pope, Ziebland, & Mays (2000), the use of more than one analyst can improve the reliability of analyses. This process was meant to avoid criticism that the themes were established based on the subjective judgement of the individual researcher.

The researcher then reviewed the collated data extracts to determine the appropriateness of these themes in relation to the data set and to code any additional data that was missed earlier. At this time, the mind map was also refined to more accurately reflect the meanings and relationships of the data set. Finally, the researcher identified the "essence" of each theme by writing concise summaries of each theme in a couple of sentences, consistent with Braun & Clarke's (2006) fifth phase "Defining and naming themes". The goal of this step of analysis was to ensure that there was not too much overlap between themes. At this time, some themes were refined further and the themes working titles were reviewed, refined and finalized by the researcher and the primary investigator.

Quantitative analysis. In Stage 3, a quantitative approach was also used to investigate if the way in which written psychoeducational recommendations are communicated influences parents' likelihood of following through with treatment recommendations. A five point Likert-type scale

was used ranging from ‘Strongly Agree’ to ‘Strongly Disagree’. In preparation for analysis, the researcher began by coding the responses (1=Strongly Agree, 2=Agree, 3=Neither, 4=Disagree, 5 Strongly Disagree). Due to the ordinal nature of the data, nonparametric procedures were then used to analyze participants’ responses. An analysis of frequencies was used to examine the influence of the presentation of written psychoeducational recommendations on parents’ likelihood of following through with them, as well as the degree to which parents found the Vignette formats to be equivalent in content. To detect if there was an overall difference in likelihood of adherence depending on which Vignette format was reviewed a Friedman Test was used. The Friedman test was chosen because of the related samples in the study (e.g., each parent indicated their perceived likelihood of following through with all three recommendation formats). Post hoc analyses were conducted using the Wilcoxon signed-rank test with a Bonferroni correction to pinpoint where the differences were.

Ensuring Scientific Rigor

Corbin & Stauss’ (2006) discussion of scientific rigor in qualitative research and their review of relevant literature were used as a guide to evaluate the validity and quality of the methodology and results of the present study. Corbin & Strauss (2006) view “credibility” (p.301) as a more appropriate term than validity or reliability, and define credible research as “trustworthy and believable in that they reflect participants’, researchers’ and readers’ experiences with a phenomenon” (p. 302). In the present study, several measures were taken to strengthen the credibility of the methodology and results; including a) multiple sources of data-collection, including interviews and written feedback, b) debriefing between the researcher and the primary investigator to problem-solve or discuss ‘next steps’ c) specification of how and why participants were selected d) direct quotations from participants to illustrate interpretations and

allow readers to evaluate how the researcher came to their conclusions, and, e) the use of multiple comparison groups (school psychologists, special educators, parents).

Corbin & Strauss (2006) also highlight the importance of quality research, described as research that is, for example, interesting, clear, logical, gives insight, allows the reader to reach their own conclusions and stimulates discussion. In the present study several of Corbin & Strauss' (2006) criteria for judging the quality of research were met. First, the purpose and goal of the present study was clearly defined. As discussed in the introductory chapter, the goal of this study was to develop and field test a series of Vignettes that will help explore parents preferences for the way in which written psychoeducational report recommendations are communicated. In addition, was the goal of carrying out a preliminary exploration of recommendation formats influence on parent's likelihood to adhere to recommendations made by a psychologist following their child's psychoeducational assessment. Another way this study helped to develop quality research was through the use of memos to document the depth of thinking that occurred during the analysis. As Corbin & Strauss (2006) explain, evidence of memos is among the most important criteria for judging the quality of research.

This study also demonstrated quality research because the results are useful and add to the knowledge base of the school psychology profession. As discussed at the outset of this study, despite long standing research demonstrating the importance of effective professional-client communication to fostering follow-through with recommendations, few studies have examined how to best communicate recommendations to parents. Additionally, although the recommendations are often the most crucial component of the psychoeducational report in enriching the child's future functioning, research has not focused on the communication of written recommendations in particular. Therefore the results of this study help to fill a gap in the

literature and provide insight of parents' preferences for how written recommendations are presented and communicated. Moreover, evidence of concepts helps to substantiate the quality of this study. As Corbin & Strauss state, findings "must be something more than a mass of uninterpreted data that leave the reader trying to figure out what to make of it" (p. 305).

As described in the methods section of the present study, participants feedback was organized into codes and then collated together to reflect broader themes. Lastly, the logical flow of this study is reflected in the multi-phase design, whereby subsequent stages expanded upon the data collected in prior stages. The use of a Vignette technique also demonstrates the use of logic. As previously discussed, since a psychoeducational assessment and related outcomes can be a very personal, impactful and private experience for parents (Bostrom, Broberg & Hwang, 2009; Dyson 1996), the use of a Vignette study provide[d] a means of introducing personal experiences while also providing a realistic context that detaches the participant from the situation (Hughes, 1998).

Chapter 4: Results

This chapter presents the feedback and broad themes that emerged from the participants' review of the Vignette formats in each stage of the study. The research questions are addressed in the context of Stage 3, as they are directly related to parents' feedback of the final Vignette formats, as the first two stages were used to develop the Vignettes. In the presentation of broad themes, data extracts were used where appropriate to help demonstrate the prevalence of the themes, as well as to illustrate the essence of the themes.

Stage 1

The purpose of Stage 1 was to gather written feedback from School Psychologists about the three Vignette formats, including what they liked about each Vignette format, suggestions for how they could be improved, general comments and suggestions, and what Vignette format they liked best. The goal of this first 'development' stage was to obtain initial ideas and patterns that emerged from the data in order to assist with the development of the Vignette formats for the final stage. A narrative of participants' feedback for each of the Vignette formats is presented below, with the inclusion of data extracts where appropriate.

Vignette A: Standard Format. In this format, a short reason for referral paragraph was included at the top of the page. Recommendations were presented as a general list (low specificity) and did not include a lot of detail or explanation. Recommendations were stated briefly and did not direct the client towards specific resources or outline the techniques involved.

Participant's feedback of what they liked about Vignette A was fairly limited. Only two participants noted that they liked that Vignette A was brief and "to the point" while two other participants noted that they appreciated the clarity of Vignette A. Otherwise, the majority of feedback suggested how Vignette A could be improved. Three participants suggested that

Vignette A should include headings for the various subject areas (e.g., reading, writing, math) to improve the organization of the recommendations. Furthermore, three participants discussed their dislike for the tone in Vignette A. For example, one participant explained that the recommendations “read as top down/directive/ ‘I know better that this is what you need to do’ ...I would like the language softened, this is rather directive/bossy”. Other participants commented that the recommendations were worded negatively or sounded like “canned” recommendations.

Four participants discussed the lack of detail in Vignette A and the need for more specific information, such as references to remedial strategies or materials, examples, detailed instructions on how to carry out the recommendation or information about progress monitoring. One participant explained the need for “suggestions that are more specific and describe how to do the strategy”, instead of “vague and general recommendations”. Similarly, another participant noted that the recommendations needed to include more information about “how” and “when”. In sum, the absence of headings, negative tone and lack of detail were identified by several participants as weaknesses of Vignette A.

Vignette B: Categorized Format. In this format, a short reason for referral paragraph was included at the top of the page. Recommendations were organized into categories (e.g., math, oral language), with intensity and duration of the services specified (e.g., Consider frequent practice with speed drills once a day for 1-2 minutes). Several recommendations contained a timeline for the completion of the goal.

Participants offered more positive feedback about Vignette B than Vignette A. For example, four participants commented on the improved organization of information through the use of headings, making it more “organized” and “less confusing”. Moreover, five of the seven participants noted that the inclusion of more detail in Vignette B was preferred. Three of these

participants discussed how Vignette B was more “specific”. For example, one participant explained “I like the way it is offering a bit more detail in terms of how each recommendation works”. Two other participants indicated that they liked the inclusion of information specifically outlining the intensity and duration of the recommendations (e.g., Consider frequent practice with speed drills once a day for 1-2 minutes).

The remaining feedback offered suggestions for how Vignette B could be improved. Three participants expressed that the recommendations were stated too authoritatively. For example, one participant commented that the recommendations were written in a way that was “far too directive” and “hierarchical”, while another stated that they were “too prescribed”. Three participants also commented that Vignette B still lacked important details, such as goals, progress monitoring information, suggestions based on the individual students’ interests, adaptations, and mention of the students’ academic strengths or the psychological processes involved. One of these participants stated that due to Vignette B’s lack of detail, it failed to answer the question of “how?”, referring to a lack of information explaining how each recommendation is to be carried out. Conversely, two other participants commented that a weakness of Vignette B was that it provided too much detail. For example, one commented that the inclusion of such specific timelines made it sound “like a cure was supposed to occur within the timelines”. Although several participants expressed positive feedback about Vignette B, such as the inclusion of headings and timelines, its’ authoritative tone and lack (and surplus) of detail were identified as ‘cons’ of Vignette B.

Vignette C: Question & Answer Format. In Vignette C, referral information was presented as a list of questions based on the referral question(s) and assessment results (e.g., How can we address Simon’s difficulties in reading?). Recommendations addressed each

question directly, with the beginning of each recommendation reminding the reader of the problem or specific finding that suggested the need for intervention (e.g., To help Simon improve his skill and confidence in reading...).

Vignette C yielded mixed feedback from participants. Four participants identified some positive qualities of Vignette C. For example, two participants indicated that the recommendations in this format appeared to be more tailored to the students' specific needs, stating that Vignette C "tries to individualize and customize" and "contextualize" the recommendations. One participant also noted that Vignette C provided better explanations in general and that framing the referral information in a series of questions allowed for "friendly but specific headings".

The remaining feedback included concerns with the format and ways to improve Vignette C. One participant commented that they found the questions distracting. Three participants discussed how a drawback of this format was that the recommendations lacked important detail (e.g., examples, separate strategies for 'home' and 'school', instructions on how to do the intervention) and were "too vague". Conversely, one participant expressed concern about the implications of Vignette C's recommendations being so specific (e.g., what will happen if the school deviated from the prescribed recommendations? Will parents be upset? What are the legal implications?). Three participants expressed concern with the language used in Vignette C. Two participants indicated that the language was too verbose and needed to be simplified. Similarly, two participants commented that the tone in Vignette C seemed "flat" or negative. One other participant indicated that the language used in Vignette C was too strong, making the recommendations sound like "a legal prescription". Overall, participants' review of Vignette C resulted in mixed feedback of the use of the Question and Answer format. Positive feedback

included the attempt to individualize and customize the recommendations, while criticisms included its' lack of detail and use of language.

Summary. Overall, participants expressed strengths and weaknesses of all of the Vignette formats they reviewed. Nevertheless, when asked to indicate a preference for one of the Vignette formats, three participants chose Vignette C. One of these participants commented that they liked Vignette C best because through the 'Question-and-Answer Format' the recommendations are more directly linked to the problems at hand. The four remaining participants indicated a preference for Vignette B's 'Categorized Format'. These participants offered various reasons for why Vignette B was ultimately their preferred choice, such as its' simplicity and clarity, and inclusion of examples and "observable and measurable tasks". One participant commented that a key strength of Vignette B was that the categories helped to "focus [the readers] attention" and that the recommendations were more useful for Individual Education Plan (IEP) planning. No participants indicated a preference for Vignette A.

Based on this feedback, the Vignettes were revised for use in Stage 2. For example, less directive language was applied to some of the recommendations outlined in Vignette A (e.g., 'he will require...' was changed to 'he may benefit from...'), as well as the addition and omission of some information to make the recommendations more specific and less wordy.

Stage 2

The goal of Stage 2 was to gather feedback from Special Educators, as well as a small sample of parents, based on their review of the three Vignette formats (i.e., what they liked about each Vignette format, suggestions for how they could be improved, general comments, what Vignette format they liked best). Stage 2 aimed to identify emerging patterns in the data in order

to further develop the Vignette formats for use in Stage 3. A discussion of the themes that emerged and relevant data is presented below.

Theme 1: Timelines are Helpful for Teachers and Parents. This broad theme relates to participants' preference for the specification of intensity and duration of recommended strategies and services, as well as inclusion of a timeline for completion of a recommended goal (e.g., 'For 15 weeks, provide Simon with 30 minutes daily of individualized tutoring). Special Educators and parents expressed their preference for timelines in the recommendations and why the inclusion of such information was beneficial to them. Two Special Educators expressed that a benefit of timelines is that they help teachers implement recommendations in the classroom. For example, one participant noted that timelines make "it easier for teachers to implement [recommendations] into their programming...[because] the more information they have the better".

Three parents indicated that specifying the duration of recommendations helps to make the recommendations appear more manageable and realistic. For example, one parent explained that the inclusion of timelines helps make it "feel like there is an end to it", while another parent indicated that including the length and time of recommendations was "*very* helpful... [because] often we don't know at what point we should stop, should we be doing these things for an hour?...adding the time in there made me sigh with relief". Yet another parent expressed the view that timelines help to make recommendations appear more manageable, stating that this type of information "is something special...and makes you think 'oh this is what I need to do!'". Through one Special Educators experience working with parents she commented that she believes timelines make the recommendations more manageable for parents "because they have very different ideas of how much time [is needed]...so this is really good for them to know".

Overall, participants' feedback indicated that the inclusion of timelines is an asset, as they help teachers implement recommendations in the classroom and make recommendations appear more manageable and realistic to parents.

Theme 2: Headings and Categories are Important. This broad theme relates to participants' preference for recommendations to be organized into categories with headings (e.g., math, oral language). Half of the participants in Stage 2 expressed a liking for the presentation of recommendations in this manner. More specifically, four Special Educators commented that the inclusion of categories and headings allows for quick and easy referencing. For example, one participant noted that dividing the recommendations into sections "makes it easier to quickly localize [the information]...a parent would be able to more quickly get to that section and know they didn't have to read the whole thing". Similarly, it was noted that "it's nicer when you have headings for the subjects [because] you can quickly go back to it to refer to". One Special Educator added that headings are particularly appealing in a high school setting since students have multiple classrooms, the various teachers can easily access the information that they need.

Three participants also discussed that having recommendations organized with headings helps to make the information appear less overwhelming. For example, one parent commented that a lack of headings makes the recommendations seem like "*so much*" and presents as "slightly overwhelming". Similarly, one Special Educator described that "parents are overwhelmed when they get these reports, it's dense, and really it's only the last two pages that people look at...the bold headings, the concise little bullets, you know for parents and teachers, it is just more helpful that way". Another Special Educator added that having headings prevents the recommendations from being "all packed together in one big jumble".

Three participants discussed the usefulness of having a separate ‘at home’ heading in the ‘Recommendations section’ to help ensure accountability outside of the classroom. For example, one mother explained that it would help parents know “specifically what you’re supposed to be looking after at home...then everyone holds up their share of the bargain”. Similarly, another participant explained that “it’s just as important that the information is for the parent so that I know what I need to be doing with my son at home, and then I also have a clear understanding what it is the teachers are implementing...so I can stay abreast of what they are doing”. In sum, participants indicated a preference for headings because they allow for quick and easy referencing, make the information appear less overwhelming, and help to ensure accountability in the home and school setting.

Theme 3: The More Detailed and Concrete the Recommendations, the Better. A prominent theme for participants was the preference for recommendations that are detailed and concrete. Six participants indicated a need for the inclusion of concrete examples in the ‘Recommendations section’, such as particular activities or strategies, resources (e.g., books), samples, practice materials, website links and programs, rather than more general or vague recommendations. One parent expressed a need for recommendations to include “hard and fast examples”. Special Educators also indicated that the more specific and concrete the recommendations, the better. One participant indicated a preference for recommendations that are accompanied by “materials to work with” while another commented that especially for novice teachers “you need to break [the recommendation] down into more specific activities with examples of activities that can be used”. Another participant explained that they preferred recommendations that include “an example of what [the recommendation] looks like” because it makes it easier for the teacher to implement the recommendation in the classroom.

A preference for detailed recommendations was also expressed by five participants. For example, one Special Educator commented that,

When the recommendations are vague and left up to interpretation, everyone interprets it differently and I think the poor child doesn't actually get any focused help because the LAC teacher might interpret it one way, the classroom teacher in another way, and then the parent in another way.

Similarly, another parent indicated that recommendations need to be “a little more specific in what should be done, how often, how much time...[recommendations] tend to be too general in nature”. Overall, participants’ feedback suggests that they prefer detailed recommendations that use real life applications to illustrate the recommendations.

Theme 4: A Preference for ‘Personalized’ Recommendations. Three parents and two Special Educators indicated a preference for recommendations that are tailored to the individual child and their unique needs. More specifically, some parents expressed preference for recommendations that restate the child’s particular area of difficulty. One parent explained that including a personal ‘introduction’ at the outset of each recommendation (e.g., Based on Simon’s difficulty reading with ease and speed...) creates a “softer approach” and makes it more “personalized”. This view was shared by another parent who commented that she “thought it was more personal when [report writers] actually indicate the child’s name...[because] it [is] more like a conversation with the parent”. Such feedback conveys the notion that these parents prefer recommendations that personify the child, over those that are more generic in nature. As one parent suggested, “bring the information in a way that is still personalized about my son or whoever is being tested...create a deeper understanding for my understanding of my son”.

Similarly, Special Educators also expressed a preference for personalized recommendations. For example, one participant commented that including “a bit more background as to the specific nature of the problem we’re trying to address... lets us know specifically what we’re looking at, and I think it kind of reminds us what we’re trying to do”. Moreover, another Special Educator expressed that restating some background information in each recommendation makes it more like a “narrative” and is helpful for parents who may asking why their child was referred for an assessment in the first place. For these participants, their feedback suggests that the communication of written recommendations can be improved by framing them in context by directly linking them to the child’s unique needs and reflecting the persona of the individual child.

Theme 5: Recommendations Must Be Realistic. Five participants discussed a need to and the importance of communicating realistic recommendations. Some participants indicated that realistic recommendations reflect those that are manageable and can be easily implemented. As one participated bluntly stated “if it is too much work no one is going to try it”. Similarly, another participant discussed the pitfalls of recommendations that cannot be easily implemented into the classroom, are not easy to find, or are really expensive.

Two participants discussed a need for recommendations that are realistic in the sense that they address ‘big picture’ needs, rather than more trivial problems. For example, through one Special Educator’s experience working with parents she explained that “all [parents] want to know is what does it mean? *Bottom line*. What can I do for my kid? That’s what they want to know, they don’t care about all the fluff”. This liking for ‘big picture’ recommendations was also conveyed by another Special Educator who explained that what was is needed are “recommendations for what [students] need in life and the future...making it realistic”. One

parent discussed another characteristic of ‘realistic’ recommendations, being those that address the ability level of the parent. She noted that recommendations need to be “applicable” and “make sense for me”. Similarly, another participant explained that recommendations must be realistic in terms of addressing the ability level of the student. Overall, for these participants the communication of written recommendations is improved when they are realistic, in terms of being manageable, implementable and compliment the ability levels of the parent and student.

Theme 6: Concise and Simple Language is Key. This broad theme reflects participants’ preference for the communication of recommendations using concise and simple language. Consistent with previous findings highlighting the importance of writing psychology reports in a readable manner (e.g., Harvey, 1997 & 2006), four participants indicated that concise and simple language aids in the communication of written psychoeducational recommendations. As one Special Educator explained, “I think that the language is the reason why these reports are confusing...even terms like ‘decoding’ ...these terms that are kind of jargon-esque should be avoided”. Another participant cautioned against verbose recommendations, stating that if recommendations are “too wordy people aren’t going to read it”. Moreover, one participant stated that recommendations should be presented in such a way that “your average person could come look at it and it would make complete sense”. This need for concise and simple language emerged as a theme for a group of participants, as a way to better communicate written psychoeducational recommendations to the reader.

Summary. Several overarching themes emerged from participants’ feedback of the three Vignettes. However, rather than providing specific suggestions or criticisms of each recommendation format, as was the case in Stage 1, participants’ feedback outlined more general characteristics that, in their opinion, aid the communication of written recommendations in

psychoeducational reports. Six main themes were discussed 1) Timelines are Helpful for Teachers and Parents 2) Headings and Categories are Important 3) The More Detailed and Concrete the Recommendations, the Better 4) A Preference for ‘Personalized’ Recommendations 5) Recommendations Must Be Realistic, and 6) Concise and Simple Language is Key. When asked to indicate a preference for one of the Vignette formats, eight participants chose Vignette B (Categorized Format), three chose Vignette C (Question and Answer Format) while only one participant preferred Vignette A (Standard Format). Two participants did not have a preference for one of the three formats over another. Anecdotally, the researcher noted that feedback from parents and teachers was generally very similar.

Stage 3

The goal of Stage 3 was to conduct a Field Test with a group of parents in order to gain insight into their preferences for the way in which written recommendations are communicated in a psychoeducational report. Parents’ perceptions of whether or not the way in which written psychoeducational recommendations are communicated influences their likelihood of adhering to treatment recommendations was also explored. In doing so, this study aimed to examine ways to better foster adherence by seeking to understand report recommendation-related factors impacting parents’ adherence to recommendations, thereby maximizing the usefulness of psychoeducational recommendations provided to parents in hopes of ensuring that a child’s needs are attended to. Thirteen parents reviewed all three Vignette formats and completed the Parent Feedback Questionnaire.

Parents Preferences for the Way in Which Recommendations are Communicated in a Psychoeducational Report.

In review of the three recommendation formats (i.e., Vignette A, B, & C), the parents in this study expressed a variety of preferences for the way in which recommendations should be communicated in a psychoeducational report. Parents described their preferences under four broad themes and six subthemes, which are each discussed below. To see how the themes and subthemes are visually organized see Figure 3.

Theme 1: Organize recommendations into sections with headings. Eleven of the 13 participants indicated that they prefer recommendations that are organized into sections with headings (e.g., math, oral language). While some parents simply indicated that they prefer recommendations organized this way, others provided reasons for why they prefer recommendations that are “grouped” together. Two mothers explained that using headings to organize the recommendations helps to “guide parents” through the topics. Several others parents indicated that it makes the recommendations easier to understand, clearer, and allows the reader to more easily look up specific information. One other parent commented that having the recommendations broken down into sections makes it “easier to focus on the directions of each subject”.

More specifically, five parents indicated a preference for an ‘At Home’ section, outlining recommendations that parents can use specifically in the home setting. Several of these parents expressed that separating ‘school’ and ‘home’ recommendations would be “helpful” for them. One parent commented that a weakness of recommendations is “not having guidelines to follow at home”, while another explained that “while grouping reading, writing and math recommendations is helpful, it is more helpful to divide home vs. school recommendations”. In

general, these parents expressed that they want to help and do not want the recommendations solely directed towards educators in the school setting. For these participants, the inclusion of an ‘At Home’ section is valuable and useful for parents, providing them with guidance for how they can take part in their child’s remediation.

Theme 2: Provide recommendations with detailed instructions. This broad theme reflects participants’ preference for recommendations that include detailed instructions. More specifically, four parents indicated that they prefer recommendations that contain explicit information about how to actually carry out the recommendations. As one parent explained, a drawback of recommendations can be “not having guidance about how to actually implement them”, while another explained that “not knowing how to do it” may prevent them from following through with the recommendations. Within this theme, participants described two types of instructions that they would like to have included in recommendations: The assignment of accountability, and specify duration and frequency.

Subtheme 2.1: Assign accountability. Four participants discussed the value of recommendations that outline who is ‘in charge’ or responsible for carrying out each recommendation. As one parent stated, “ I would like to see who is accountable for monitoring each of these suggestions and learning outcomes”. Similarly, another parent wanted to know “who is responsible for overseeing each element”. These parents discussed their desire for recommendations that assign accountability because it helps to hold parents and teachers responsible for carrying out the recommendations. As one parent explained, this type of information would help to clarify “if the recommendation was something that would actually be followed through in the classroom...and how the parent would be part of it”. For these parents,

creating a sense of accountability helps to improve the communication of recommendations in psychoeducational reports.

Subtheme 2.2: Specify duration and frequency. This sub-theme relates to participants' preference for the specification of intensity and duration of recommended strategies and services, as well as inclusion of a timeline for completion of a recommended goal (e.g., 'For 15 weeks, provide Simon with 30 minutes daily of individualized tutoring'). Five of the participants discussed the need for including such information. As one parent explained, a barrier that may prevent a parent from following through with recommendations is "unclear information about how often and how long to do tasks and a lack of understanding of what a specific recommendation actually involves". Furthermore, one parent stated that "recommendations have to be more specific, otherwise the parent is not sure how to achieve them and [has] no sense of the time and frequency of the session that the individual may be able to tolerate or that the client will require to see progress". In general, for these parents, specifying duration and frequency of recommended strategies and services-enhances how recommendations are communicated.

Theme 3: Provide goals and explain how to monitor progress. A theme for some participants was the preference for recommendations that provide parents with goals to work towards and explain how to monitor progress towards such goals. Seven parents highlighted the significance of including this type of information and explained why it was important. For example, one parent explained that doing so was "proactive...and creates achievements which can be measured". Others commented that goals help to "constitute growth" and assist parents in gauging what would be considered progress for their child. Most of these parents expressed a need for short term (e.g., weekly) goals, rather than long term goals.

Four parents also discussed the need for recommendations that not only outline goals but also explain how they can monitor their child's progress these goals. One parent underscored why this type of information is so important, commenting that "the reason why parents and teachers give up is because we cannot see success". These parents indicated that they wanted recommendations to include progress monitoring strategies, such as 'check-ins' between the school and the parent or ways of having the child demonstrate their knowledge back to the parent. Participants also discussed the importance of knowing what type of progress they should be looking for. As one parent explained, if a child has a problem in writing "are we looking for content improvement? or proper use of spacing or words, or punctuation?". For these parents, having recommendations that guide them in terms of goal setting and progress monitoring, aids the communication of written psychoeducational recommendations.

Theme 4: Make recommendations specific. A prominent theme for participants was a preference for specific, rather than general recommendations. The desire for specificity was expressed by five participants. Following one participant's review of Vignette A (Standard Format), they commented that "the recommendations get lost on me in this format. They are too broad and not specific enough". Similarly, another parent expressed dislike for recommendations that are "too vague". Within this theme, participants characterized specific recommendations as those that clearly define and address the problem, include real-life examples and use simple language.

Subtheme 4.1: Clearly define the problem. Six participants discussed the need for recommendations to clearly define and address the area(s) of difficulty. One parent highlighted the value of explaining where further development is needed, by, for example, breaking the problem area of 'math' down into specific skills to be targeted such as division or estimation.

Another parent advised report writers to make sure that the recommendations include an answer to the referral question. In their critique of Vignette C they explained that the question “What is the nature of Simon’s writing problems? is not actually answered by the recommendations...one must deduce that Simon’s writing problem is his output and motivation”. Moreover, a weakness of Vignette A was that it “doesn’t say what the problem is”. Overall, these parents indicated the need for relevant recommendations that clearly define the specific area(s) of difficulty.

Subtheme 4.2: Include real-life examples. Four participants discussed the need for specific recommendations that include real-life examples, such as activities, strategies or resources. As one participant explained, “the statement of ‘Simon needing one-on-one tutoring’ is great but a couple of suggestions of where to get the specialized tutoring would be an asset to a parent”. Similarly, another participant requested more “concrete examples, such as what the tutor could cover or how to set up home reading routines”. Such feedback highlights the value and utility of concrete examples for parents. One participant explained that a challenge for parents when faced with psychoeducational recommendations is “not understanding what they really mean in a ‘real-world’ application. These participants conveyed the notion that for parents, the more specific and concrete the recommendations, the better.

Subtheme 4.3: Use simple language. Three participants discussed the need for specific recommendations that are communicated using simple language. As one parent described, “professional language that is standard within the teaching community may be okay for the teachers’ recommendations, but care should be used to make sure parents’ recommendations are in lay person terms”. Comments from these parents, such as “consider plain language over technical descriptions” and “use plain language to describe things”, also highlights the need for report writers to avoid using complex language, which can make recommendations vague and

difficult for parents to understand. Such feedback suggests that the use of simple language improves the communication and quality of psychoeducational recommendations to parents. Furthermore, report writers need to consider the multiple consumers of psychoeducational recommendations and accordingly adjust how recommendations are communicated.

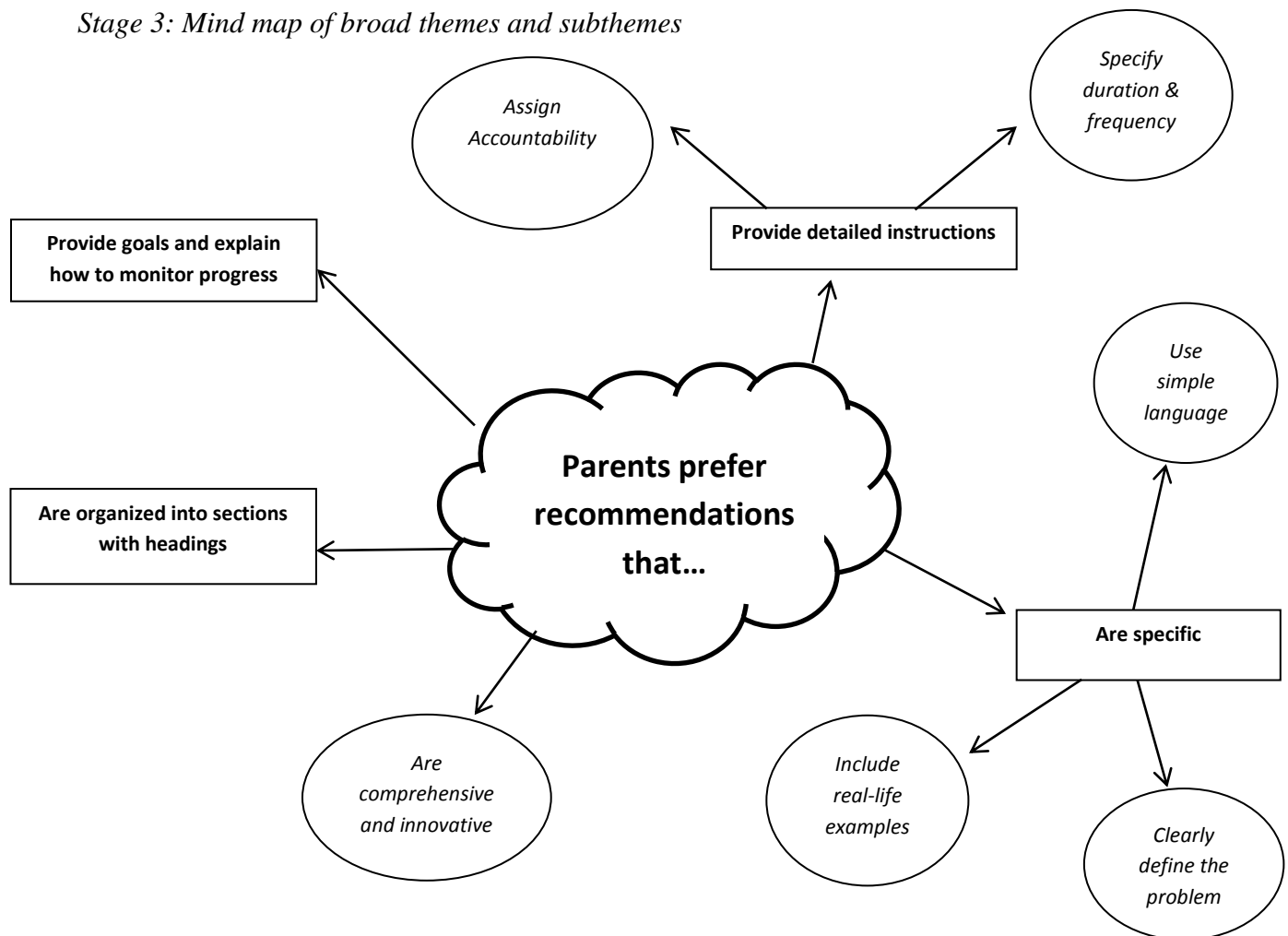
Theme 5: Other. The information presented below did not fit into or comprise any broad themes. However, because it piqued the interest of the researcher and provides valuable feedback from parents on the topic, it was included as a subtheme.

Comprehensive & innovative recommendations. Although ‘Simon’ was referred only for academic difficulties, two participants commented that they prefer more comprehensive recommendations. They described comprehensive recommendations as those that not only address academic challenges, but also cognitive and social-emotional factors. As one participant stated “a social-emotional dimension to the recommendations would help parents”. Similarly, another parents’ critique of the Vignettes was that the “recommendations do not address Simon’s overall cognitive, academic, or social-emotional profile”. For these parents, it is important that recommendations recognize their child as a ‘whole’ and begin to address their child’s “individuality”. As one parent explained, including information about “the child’s actual behaviour or predisposition within the recommendations makes the recommendations far more relevant”. For these parents, comprehensive recommendations that consider their child’s academic *and* cognitive and social-emotional profile are preferred. Two parents also discussed their preference for innovative recommendations. One parent explained that a weakness of Vignette A was that it “doesn’t appear to be much more than what is already being done”. The other parent explained that “most parents have already implemented the usual techniques to teach reading and they are not working”. Such feedback suggests that parents want to see

recommendations that suggest novel ideas and strategies. Rather than common or generic recommendations, they want innovative suggestions that are ‘out of the box’ and will provide creative guidelines for ways to help their child.

Figure 3.

Stage 3: Mind map of broad themes and subthemes



The Influence of the Way in Which Written Recommendations are Communicated on Parents’ Likelihood of Adherence. Following participants’ review of the three recommendation formats, they were asked to answer five questions on a five point Likert-type scale, ranging from ‘Strongly Agree’ to ‘Strongly Disagree’ (1=Strongly Agree, 2=Agree, 3=Neither, 4=Disagree, 5 Strongly Disagree). Participants’ were asked to rate their likelihood of

following through with the recommendations presented in Vignette A (Standard Format), Vignette B (Categorized Format) and Vignette C (Question and Answer Format). Participants were also asked if the presentation (e.g., format, specificity) of written psychoeducational recommendations had an influence on their likelihood of following through with them, and if they thought the Vignettes (A, B & C) were equivalent in content. A description of participants' likelihood of following through with the recommendations in each Vignette is described below. This information is also displayed graphically in Table 1 (p. 55), which includes important information about the sample size in each response category (i.e., 'N'). To follow, participants' responses are expressed as a percentage of the sample, which totalled only 13 participants. Therefore, it is important to consider the percentages discussed below in the context of the sample size. Failure to do so may result in misleading results since small samples can be very sensitive to subtle changes and may exaggerate the importance of small fluctuations.

Vignette A. In response to the statement 'I am likely to follow through with the recommendations presented in Vignette A', participants' feedback indicated the following: Twenty percent of participants indicated that they would be likely to follow-through with the recommendations presented in Vignette A ('Agree'). Conversely, 50 percent of participants indicated that they would *not* be likely to follow through with the recommendations presented in Vignette A ('Disagree'). Another 20 percent of participants' also indicated that they would *not* be likely to follow through with the recommendations presented in Vignette A ('Strongly Disagree'). Ten percent of participants responded 'neither', indicating no preference (See Table 1).

Vignette B. In response to the statement 'I am likely to follow through with the recommendations presented in Vignette B', participants' feedback indicated the following:

Thirty percent of participants' indicated that they would be very likely to follow-through with the recommendations presented in Vignette B ('Strongly Agree'). Moreover, another 50 percent of participants indicated that they would be likely to follow-through with the recommendations presented in Vignette B ('Agree'). Ten percent of participants indicated that they would *not* be likely to follow-through with the recommendations presented in Vignette B ('Strongly Disagree'). Ten percent of participants responded 'neither', indicating no preference (See Table 1 below).

Vignette C. In response to the statement 'I am likely to follow through with the recommendations presented in Vignette C', participants' feedback indicated the following: Ten percent of participants' indicated that they would be *very* likely to follow-through with the recommendations presented in Vignette C ('Strongly Agree'). Moreover, another 20 percent of participants indicated that they would be likely to follow-through with the recommendations presented in Vignette C ('Agree'). Ten percent of participants indicated that they would *not* be likely to follow-through with the recommendations presented in Vignette C ('Disagree'), while another ten percent of participants also indicated that they would not be likely to follow through with the recommendations presented in Vignette C ('Strongly Disagree'). Fifty percent of participants responded 'neither', indicating no preference (See Table 1 below).

Table 1.

Participants' likelihood of following through with the recommendations in each Vignette, as a percentage of the sample.

Ratings	Vignette					
	A		B		C	
	I am likely to follow through with the recommendations presented in Vignette A		I am likely to follow through with the recommendations presented in Vignette B		I am likely to follow through with the recommendations presented in Vignette B	
	%	N	%	N	%	N
Strongly Agree	--	--	30	3	10	1
Agree	20	2	50	5	20	2
Neither	10	1	10	1	50	5
Disagree	50	5	--	--	10	1
Strongly Disagree	20	2	10	1	10	1

Forty four percent of participants indicated that the presentation (e.g., format, specificity) of written psychoeducational recommendations would strongly influence their likelihood of following through with them ('Strongly Agree'). Another 44 percent of participants also indicated that the presentation (e.g., format, specificity) of written psychoeducational recommendations would influence their likelihood of following through with them ('Agree'). Only 11 percent of participants indicated that the presentation would *not* influence their likelihood of adherence ('Strongly Disagree').

Twenty percent of participants indicated that they 'Strongly Agreed' that the Vignettes were equivalent in content. Another 20 percent of participants indicated that they 'Agreed' that the Vignettes were equivalent in content. Conversely, ten percent of participants' indicated that the Vignettes were not equivalent in content ('Disagree'). Another forty percent of participants

indicated that the Vignettes were *not* equivalent in content ('Strongly Disagree'). Ten percent of participants responded 'Neither', indicating no preference.

To detect if there was an overall difference in likelihood of adherence depending on which Vignette was reviewed, a Friedman Test was used. Results indicated a statistically significant difference in likelihood of adherence depending on which Vignette was reviewed ($X^2(2) = 9.056, p = .011$). Post hoc analyses with Wilcoxon signed-rank tests were conducted with a Bonferroni correction applied, resulting in a significant level set at $p < .016$. The median (IQR) for perceived likelihood of adherence for Vignette A, Vignette B and Vignette C were 4.00, 2.00 and 3.00, respectively. The higher the median value, the less participants were likely to perceive that they would adhere to recommendations in that Vignette. For example, by looking at the median value for each Vignette, you can see that participants were the least likely to adhere to the recommendations in Vignette A (4.00). Results from the Wilcoxon signed-rank tests indicated that there were no significant differences in perceived likelihood of adherence between Vignette B and Vignette C ($Z = -1.358, p = .174$), see Table 2. However, there was a statistically significant difference in perceived likelihood of adherence between Vignette A and Vignette C ($Z = -2.530, p = .011$), and between Vignette A and Vignette B ($Z = -2.395, p = .016$), see Table 2. In other words, there was no significant difference in participants' perceived likelihood of adherence, when comparing Vignette B and Vignette C. However, when comparing Vignette A and Vignette C, participants were more likely to adhere to the recommendations in Vignette C, and when comparing Vignette A and Vignette B, participants were more likely to adhere to the recommendations in Vignette B.

Table 2.

Wilcoxon signed-rank test statistics

	Vignette Comparison		
	Vignette A-B	Vignette B-C	Vignette A-C
Z	-2.395	-1.358	2.530
Asymp. Sig. 2 (2-tailed)	0.16	.174	.011

Note. Bonferonni correction $p < .016$

Summary

In this chapter, the findings of the two research questions were discussed. Regarding parents preferences for how written recommendations should be communicated in a psychoeducational report, four broad themes and seven subthemes were identified. The second research question explored parents' perceptions of whether or not the way in which written psychoeducational recommendations are communicated would influence their likelihood of following through with psychoeducational recommendations. A key takeaway message from these findings is that parents are not passive consumers of written psychoeducational recommendations. Instead, they appear to have unique preferences for the way recommendations are communicated in psychoeducational reports. Furthermore, by reflecting parents' preferences in written recommendations, they may be communicated more effectively to parents, and their likelihood of following through with recommendations may also be increased. A discussion of this study's findings in relation to existing literature, limitations of the present study, implications for practice, as well as recommendations for future research will be addressed in the following chapter.

Chapter 5: Discussion

The purpose of the current study was to develop and field test a series of Vignettes that will help explore parents' preferences for the way in which written recommendations are communicated. Additionally, the Vignettes' influence on parents' likelihood to adhere to recommendations following their child's psychoeducational assessment was explored. Thirteen parents completed an online questionnaire and their feedback was analyzed using a thematic analysis approach. Through the parents review of the Vignettes, four broad themes and six sub-themes emerged, illustrating their preferences for how written recommendations are communicated. Additionally, feedback indicated that the way in which recommendations are communicated in a psychoeducational report can influence a parents' perceived likelihood of adhering to the recommendations. The research findings are discussed in relation to previous literature on the topic in this chapter. The limitations and strengths are also explored, as well as implications for psychologists and recommendations for future research.

Discussion of Findings in Relation to Previous Literature

The primary research question intended to shed light on parents' preferences for the way in which written recommendations are communicated, and by extension, work towards increasing the likelihood that parents will adhere to their child's psychoeducational recommendations. Existing literature on parents' preferences on this topic is limited. This studies' secondary research question aimed to explore if the way in which written recommendations are communicated in a psychoeducational report influences parent's perceived likelihood of adhering to recommendations. Although previous research has examined numerous potential contributors to treatment adherence, there has been a strong focus on identifying demographic variables rather than those that offer more utility and perspective. Therefore an important finding of this study was insight into how to better communicate written

psychoeducational recommendations, in a way that is well received and appreciated by parents. This information is particularly useful given that differences in written communication style were also found to have an influence on parents' perceived likelihood of adherence. Almost all of the themes and subthemes that emerged from the data echo existing literature on psychological report writing. However, they are unique in that they reflect the perspective of the parent, rather than the beliefs and experiences of the psychologist. Moreover, the themes and subthemes speak to the 'Recommendations section' specifically, rather than general guidelines that apply to the entirety of the psychological report. The themes and subthemes that emerged in the present study (see Ch. 4) are identified in italics in the discussion below.

Parents' Preferences. Previous research has highlighted the benefit of organizing information in psychoeducational reports by functional domain (e.g., Mastoras et al., 2011), as it has found to help readers comprehend the information (e.g., Wiener, 1985; Wiener & Kohler, 1986). Mastoras et al. (2011) commented that failure to do so "places the burden of integration on the reading and in many cases, may leave the reader unable to comprehend information in a meaningful way" (p. 135). The findings of this study are consistent, in that the majority of parents indicated a preference for *Organizing Recommendations into Sections with Headings*. Some of these parents indicated that presenting recommendations in this way makes them clearer and easier to understand, while others commented that having the recommendations "grouped" together helps to "guide parents" through the topics. Although presenting recommendations consecutively in a general list may be common practice for some practitioners, these parents preferred having written recommendations organized into distinct sections.

The present study is also consistent with research by Mather & Jaffe (2002), who suggest that recommendations be organized by the person responsible for the implementation, and by

Lichtenberger et al., (2004), who discuss addressing recommendations for the client directly to them, and adjusting the wording for recommendations that are to be implemented by the student's teacher or parents. Some participants in this study reported the value of recommendations that communicate who is 'in charge'. These parents expressed that stating who is responsible for the implementation helps *Assign Accountability* to hold parents and teachers responsible for following through with recommendations. More specifically, several participants also discussed the need for a clear division between 'At-School' and 'At-Home' *Recommendations* to create a sense of accountability for parents and to help them play a more active role in their child's remediation. Participants' preference for separate 'school' and 'home' sections also reflect existing literature on organizing information by functional domain, as previously discussed.

The literature has also emphasized the importance of measurable recommendations. For example, 'Measurable' is a key concept in the S.M.A.R.T. Principles for Recommendations (Montgomery et al., 2008). Measurable implies the ability to quantify an activity. Parents in the current study indicated their preference for recommendations that *Specify Duration and Frequency* of strategies and services. For example, one participant commented that not knowing how often and for how long to do a task can prevent a parent from following through with recommendations. Measurable also suggests the ability to measure change. Parents in this study highlighted the usefulness of recommendations that *Provide Goals and Explain How To Monitor Progress*. One parent indicated, for example, the value of "achievements which can be measured", while another commented that "the reason why parents and teachers give up is because we cannot see success". Therefore, consistent with existing literature, these parents

indicated a preference for measurable recommendations that include information on how often and for how long to do a recommendation, and also how to gauge their child's progress.

Participants discussed the ineffectiveness of recommendations that are “too vague” or “too broad”, and the benefit of recommendations that are communicated in a clear and unambiguous fashion. This preference for *Specific Recommendations* emerged as a theme for several parents in this study. This notion of specificity is consistent with previous research by Montgomery et al. (2008), who identify ‘Specific’ as a key principle in their S.M.A.R.T Principles for Recommendations (2008), as well as Lichtenberger et al.’s (2004) discussion on the benefits of specific recommendations, such as the ability to carry them out “precisely without question about the procedure” (p. 159). Unlike Lichtenberger et al. (2004), who discuss different levels of recommendation specificity (i.e., general, more specific, very specific), participant feedback in the present study generally suggested that the more specific the recommendations, the better for parents.

The importance of recommendations that are explicitly linked to the presenting problem(s) or referral question has also been discussed in the literature (e.g., Mastoras et al., 2011). The findings of this study are consistent with this work, in that some of the parents critiqued recommendations that did not *Clearly Define the Problem*. Other parents indicated a preference for recommendations that clearly break the general problem down into more specific areas of difficulty. One parent commented that parents should not have to “deduce” their child's problems from the recommendations. Such feedback is consistent with existing report writing guidelines by Ownby & Wallbrown (1986) who urge practitioners to provide well-reasoned connections from the results to the recommendations (as cited in Mastoras et al., 2011), and by Mastoras et al. (2011) who discuss the effectiveness of presenting recommendations by first

restating the conclusions from the assessment followed by a brief summary of the intervention strategy.

Previous literature on psychological report writing has also outlined the importance of concrete recommendations. Consistent with the previous research, several participants underscored the importance of including recommendations that *Include Real-Life Examples*. As one parent explained, “the statement of ‘Simon needing one-on-one tutoring’ is great but a couple of suggestions of where to get the specialized tutoring would be an asset to a parent”. Such feedback also supports Mastoras et al.’s (2011) C.L.E.A.R. approach to report writing, which emphasizes the practice of providing concrete recommendations. Mastoras et al. (2011) describe concrete recommendations as those that provide specific examples of how recommendations can be implemented, or resources such as worksheets or samples. Such feedback from parents indicates the need for recommendations that *Include Real-Life Examples*. Furthermore, it suggests that the communication of written recommendations to parents may be facilitated by the inclusion of concrete recommendations that offer more “real-world application”.

It has been argued that reports written at a reading level above that of most readers are typically perceived as ineffective (Mastoras et al., 2011). As explained by Harvey (2007), psychologists must write reports that are clear and easily understood...Otherwise, they are in severe danger of being misunderstood and having important recommendations ignored” (p. 274). Existing literature has focussed on the readability of psychology reports in their entirety, rather than the ‘Recommendations section’ specifically. Nevertheless, research findings have found that lowering the readability level of psychoeducational reports can facilitate parental understanding while maintaining adequate coverage and validity of the assessment information (Carriere, 2010,

p.86). Some parents in this study discussed the need for recommendations that *Use Simple Language*. As one parent described, “professional language that is standard within the teaching community may be okay for the teachers’ recommendations, but care should be used to make sure parents’ recommendations are in lay person terms”. Substantiating previous research highlighting the need to “write a psychological report at a comprehensible level” (p. 273), parents indicated a preference for written recommendations that are communicated using simple language.

Some of the parents who participated in this study also reported a preference for *Comprehensive Recommendations* that not only address academic challenges, but also the cognitive and social-emotional dimensions of the child. This reflects previous literature by Mastoras et al., (2011), which discuss the importance of writing from a “child-centered perspective” (p. 134) that adopts an individualized approach and emphasizes the child’s qualities. As one parent explained, including information about “the child’s actual behaviour or predisposition within the recommendations makes the recommendations far more relevant”. This point is underscored by Mastoras et al. (2011), who urge clinicians to include information in psychoeducational reports that relate to and consider the individual client.

Influence of Writing Format on Parents’ Likelihood of Adherence. Existing literature has addressed the importance of professional-patient communication in fostering adherence and positive health outcomes (e.g., DiMatteo, 2004). More specifically, communication has been identified as an essential factor in adherence and is needed for conveying treatment information and recommendations (DiMatteo, 2004). Parents in the present study indicated that the way in which written recommendations are communicated in a psychoeducational report significantly influenced their likelihood of following through with them. These results are not surprising given

that the way in which information is communicated in a psychoeducational report has been found to be critically important to fostering adherence for teachers (e.g., Borghese, 1994).

No specific predictions were made a priori regarding which Vignette might have the most influence on parents' likelihood of adherence, if any. However, the data was examined through frequency and statistical analyses to explore which Vignette parents were most likely to adhere to and to determine whether any Vignette significantly differed from each other. For a description of the three recommendations formats please refer to page 23.

For ease of comparison in this discussion, four of the five response categories (Strongly Agree, Agree, Disagree, Strongly Disagree) were collapsed into two nominal categories (agree, disagree). By looking at participants' likelihood of following through with each Vignette as a percentage of the sample (see Figure 2), as well as the findings from the statistical analyses, there are some interesting comparisons worth noting. It appears that the parents in this study were *more* likely to adhere to the recommendations in Vignette B (since they indicated a significantly greater likelihood of adhering to Vignette B over A). This finding is substantiated by the fact that the largest percentage of parents were likely to follow through with the recommendations in Vignette B (N=8). Parents' were *less* likely to adhere to the recommendations in Vignette A (since they indicated a significantly greater likelihood of adhering to the recommendations presented in both Vignette B & C over A). This is further supported by the fact that the largest percentage of parents (N=7) indicated that they were *not* likely to follow through with the recommendations in Vignette A. Vignette C appeared to illicit the most neutral responses from participants, with half indicating that they were indifferent in their likelihood of adherence towards the recommendations presented in Vignette C.

Existing literature on treatment adherence, as well as parents' qualitative feedback from the current study, helps to shed light on why adherence rates were higher for Vignette B and lower for Vignette A. Perhaps parents were more likely to follow-through with the recommendations presented in Vignette B, rather than Vignette A or C, because Vignette B better reflected parents' preferences for how written recommendations are to be communicated in a psychoeducational report. In Vignette B, the recommendations were organized into sections with headings, and they also contained more detailed instructions such as information about duration, frequency and progress monitoring; all preferences expressed by parents. In doing so, the recommendations in Vignette B were generally more specific than those in Vignette A or C. As discussed earlier in this chapter, parents' feedback indicated a strong preference for specific recommendations. Therefore, it is plausible that parents' were more likely to adhere to recommendations in Vignette B because it was more in line with their preferences, needs and expectations. On the other hand, it is possible that because Vignette A and C were not organized into sections and contained less detail, they were less likely to elicit parents' likelihood of adherence.

Rosenstock's (1974) Health Belief Model identifies parents' perceptions as a critical variable in treatment adherence. Applying this model to the context of the present study, offers a possible explanation for the results that were found: The more the recommendations reflected parents' preferences, the more likely parents perceived they would adhere to the recommendations. Alternately, applying the Barriers-to-Treatment Model (Kazdin, Holland, & Crowley, 1997; Kazdin & Wassell, 1999), which sees parents' perceptions of barriers as a strong predictor of nonadherence, offers another explanation: The less the recommendations reflected parents' preferences, the less parents perceived that they would adhere to the recommendations.

For example, Vignette A's format (no headings) or failure to assign accountability, may have created perceived barriers for parents. In other words, since Vignette A did not reflect parents' preferences to the same degree as Vignette B, the recommendations in Vignette A may have come across to parents as more daunting and less feasible. As Human & Deglasi (1993) explain, parents' feeling of whether it will be possible to follow through with recommendations has been identified as an important factor in understanding compliance. Both of these models help to explain why parents' perceived likelihood of adherence was not the same for each Vignette.

Implications for Psychologists

The professional literature provides guidelines on how school psychologists should write and format psychoeducational reports. These resources provide guidance on how to compose the 'Background' or the 'Test Results and Interpretation' sections of reports with some information on how to write the 'Recommendations' section specifically. However, minimal research has investigated how to effectively communicate written psychoeducational recommendations to parents. Moreover, few, if any, research studies have attempted to get feedback on this topic from parents directly. With this in mind, how valuable and useful are existing report-writing guidelines if they do not reflect the preferences, needs and expectations of the consumer? Therefore, the results of the present study offer important insight into parents' preferences that psychologists can incorporate into their report-writing practice. In doing so, psychologists may increase the utility of their psychoeducational recommendations. Recognizing that the way in which written recommendations are communicated may influence parents' likelihood of adhering to them, the results of this study offer important suggestions into the format and content for writing recommendations. The themes and subthemes that emerged in this study also help to support the professional literature on writing recommendations.

Limitations and Strengths of the Present Study

Through the present study our understanding of parents' preferences on how to write recommendations, as well as its relationship with their likelihood of adherence has been examined; however, it does have some limitations. Firstly, a limitation for this study was the small sample size. Although Stages 1 & 2 met the expected number of participants originally outlined in the study proposal, the total number of participants in Stage 3 was less than initially targeted in spite of numerous attempts to recruit a larger sample. However the researchers argue that a smaller sample size does not compromise the use of a thematic analysis to yield potentially rich and valuable data. As discussed in chapter three, it is believed that the value of participants' feedback has more to do with the insight gained from each parent and the design of the study, than with the sample size.

A second limitation relates to the adherence measure used in this study. Participants were asked to indicate their likelihood of adhering to the recommendations in each Vignette format through an online questionnaire that they completed independently. This method of measuring parents' likelihood of adherence reflects the essence of a Vignette study, which aims to allow the opportunity to address issues from a less-threatening perspective (Harvey, 1998). However, the use of a self-report may have impacted the validity of the questionnaire, as some participants may have chosen to present themselves in a more positive light by endorsing greater rates of adherence than they would actually exhibit. However, participants' option to remain anonymous may have helped to minimize social desirability bias in this study.

The homogeneity of gender, age and education level of participants is another limitation of this study. Of the thirteen participants only 8 provided demographic information. All 8 participants who responded were females between 42 to 45 years old. One participant had a doctoral degree (or equivalent), four had a bachelor's degree (or equivalent), two participants

had a master's degree (or equivalent) and one had a high school education. Therefore, the feedback that emerged may be bound to this type of individual (e.g., middle aged mothers with post-secondary education). Nevertheless, given a lack of existing literature exploring parents' perspectives on psychoeducational reports, their feedback is valuable and may spur further research on the topic.

Another limitation related to the mode of recruitment in this study. Participants responded to a recruitment poster requesting their participation. In other words, they initiated their involvement in the study. Therefore, in light of existing research showing that volunteers tend to exhibit unique qualities (e.g., Heiman, 2002), the participants in this study may be subject to volunteer bias and exhibit apparent differences from those individuals who did not wish to volunteer. Additionally, because this study did not include a counterbalanced design (each participant was exposed to all of the treatments: Vignette A, B and C), the order in which the vignettes and questions were presented may have adversely affected participants results. For example, a participant's reaction to a previous vignette may have provided context for the information that followed and influenced their subsequent responses. Confounding may be another limitation of the present study, due to the fact that there was only one version of vignette A, B and C and each participant critiqued exactly the same set of vignettes (e.g., with-in subject design). By employing a mixed-design, whereby different groups of participants were randomly selected and received different vignette sets for judgment (Atzmuller& Steiner, 2010), confounding effects may have been minimized.

Despite these limitations, however, a primary strength of the present study was its contribution to literature on written psychoeducational recommendations from a parent perspective. This is particularly important given the critical role a parent has in implementing recommendations following their child's psychoeducational assessment. There has been very little research on adherence to psychologists' recommendations in general (MacNoughton & Rodrigue, 2001), and even less exploring parents' preferences of written psychoeducational recommendations. The findings of this study not only help to fill a void in the literature but may also help to improve the usefulness of psychoeducational recommendations for parents and most importantly, help enrich children's future functioning.

Another strength of the current study was the use of one-on-one interviews in Stage 2. Rather than meeting with participants in small focus groups, for example, participants were given the opportunity to meet with the researcher individually. Since the psychoeducational assessment process can be a private experience for parents, the one-on-one interviews provided a more dynamic, personal and comfortable process for feedback. Additionally, the content of the Vignettes used in this study was a combination of researcher created data (e.g., the case of 'Simon') and material selected from report writing resources (e.g., Lichtenberger et al., 2004; Mather & Jaffe, 2002; Wiener & Kohler, 1986). The goal of reviewing report writing resources was to identify elements typically found in the 'Recommendations section' of psychoeducational reports. In doing so, participants' feedback was made more relevant, meaningful and useful for practising psychologists.

Recommendations for Future Research

It would be valuable for the current study to be replicated with a larger and more diverse sample to further support the significant relationships that were found and to determine whether any other significant relationships exist between the variables of interest and parents' likelihood

of adherence. Furthermore, research examining paternal preferences regarding the communication of written recommendations would be beneficial.

In addition, future research should explore parents' actual adherence following children's assessments, rather than their perceived likelihood of adherence. A longitudinal design could be employed. For example, three groups of parents, each with a different recommendation format to follow, could be monitored in the months following their child's psychoeducational assessment to investigate which recommendation format resulted in the highest rates of adherence. Each parent could also indicate what they liked and did not like about the recommendation format they were given. Extending the current study in this way may provide more useful 'real life' insight into parents' preferences and the relationship between the way in which written recommendations are communicated in a psychoeducational report and parents' adherence. The need for this type of research is underscored by the known differences between self-reported behaviour and actual behaviour (Hughes, 1998).

Although the combination of a Vignette technique with a traditional survey is a promising yet infrequently used research method (Atzmüller & Steiner, 2010), it proved useful in gathering information in this study. The feedback from Special Educators in Stage 2 is valuable and must not be overlooked. Extending the current study design with a larger group of educators could yield important insight on how to best communicate written recommendations, from a teachers' perspective. Additionally, further investigation of variables that hold more theoretical perspective could be explored, rather than emphasizing "variables of convenience" (Nock, 2005, p. 153) or demographic variables, such as socioeconomic status, age, or gender. Such information is important since it is often the teachers' responsibility to follow through with the recommendations outlined in a psychoeducational report.

Conclusions

The current study has served as a pilot study to enhance our understanding of how to improve the communication of written recommendations to parents, in a way that is valued, appreciated and in line with their perspectives and needs. Moreover, the present study also explored how to increase parents' adherence to their child's recommendations, within the specific context of psychoeducational assessment. Recognizing that the way psychologists communicate written recommendations to parents may indeed influence their likelihood of adherence, highlights the need for more research on this topic and also informs psychologists of their responsibility to appropriately and thoughtfully communicate recommendations to parents. As stated by Harvey (1997), "The primary purpose in writing a psychological report is to communicate, and unintelligible writing undermines communication" (p.273). The themes and subthemes that emerged from parents feedback suggest that both format (e.g., having headings and an 'at home' section) and content (providing specific instructions and outlining accountability) can impact how effectively written recommendations are communicated to parents. Seeing that report writing is one of the defining features of the profession of school psychology (Sattler, 2008) and takes up a sizeable portion of school psychologists time (Mastoras et al., 2011), the results of this study can help increase the utility of psychoeducational recommendations and in turn, work towards enhancing children's future functioning.

References

- Amaral, D. (2003). *Parents of adolescents: The relationship between parent involvement and parent efficacy*. Master's Thesis, University of British Columbia, Vancouver, B.C.
- Atzmuller, C. & Steiner, P. M. (2010). Experimental Vignette studies in survey research. *Methodology*, 6(3), 128-138.
- Borghese, N. (1994). Psychoeducational recommendations: Perceptions of school psychologists and classroom teachers. *Canadian Journal of School Psychology*, 10, 70-87.
- Bostrom, P.K., Brober, M. & Hwang, P. (2009). Parents' descriptions and experiences of young children recently diagnosed with intellectual disability. *Child: Care, Health and Development*, 36, 93-100.
- Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
- Carriere, J. A. & Hass, M. (2010). *Teachers perceived effectiveness of psychoeducational report writing models*. Doctoral Dissertation, Chapman University, Orange, CA.
- Carriere, J. A. & Hass, M. (2014). *Writing useful, accessible and legally defensible psychoeducational reports*. NY: John Wiley & Sons.
- Christienson, S. L., Rounds, T., & Gorney, D. (1992). Family factors and student achievement: An avenue to increase students' success. *School Psychology Quarterly*, 7, 178-206.
- Conti, A. P. (1975). Variables related to contacting/not contacting counseling services recommended by school psychologists. *Journal of School Psychology*, 13, 41-50.
- Corbin, J. M. & Strauss, A. (2008). *Basics of qualitative research: techniques and procedures for developing grounded theory*, Sage Publications. DOI: <http://dx.doi.org.ezproxy.library.ubc.ca/10.4135/9781452230153>
- DiMatteo, M. R. (2004). The role of effective communication with children and their families in fostering adherence to pediatric regimens. *Patient Education and Counseling*, 55, 339-

344. DOI:10.1016/j.pec.2003.04.003

Dryer, A.S., O’Laughlin, L., Moore, J. & Milam, Z. (2010). Parents adherence to clinical recommendations in an ADHD Evaluation clinic. *Journal of Clinical Psychology*. 66, 1101-1120.

Dyson, L.L. (1996). The experiences of families of children with learning disabilities: Parental stress, family functioning, and sibling self-concept. *Journal of Learning Disabilities*, 29(3), 280-286.

Geffken, G. R., Keeley, M. L., Kellison, I., Storch, E. A., & Rodrigue, J. R. (2006). Parental adherence to child psychologists’ recommendations from psychological testing. *Professional Psychology: Research and Practice*, 37, 499-505. DOI: 10.1037/0735-7028.37.5.499

Harvey, V. S. (1997). Improving readability of psychological reports. *Professional Psychology: Research and Practice*, 28, 271-274.

Harvey, V. S., (2006). Variables affecting the clarity of psychological reports. *Journal of Clinical Psychology*, 62, 5-18.

Hastings, R. P., & Symes, M. D. (1992). Early intensive behavioral intervention for children with autism: parental therapeutic self-efficacy. *Research in Developmental Disabilities*. 23, 332-341.

Heiman, G. W., (2002). *Research Methods in Psychology*. 3rd Edition. Boston & New York. Houghton Mifflin Company.

Henderson, A. (1987). *The evidence continues to grow*. Columbia, MD: National Committee for Citizens of Education.

Hughes, R. (1998). Considering the Vignette technique and its application to a study of drug injecting and HIV risk and safer behaviour. *Sociology of Health & Illness*, 20, 381-

400.

- Human, M. T., & Teglasi, H. (1993). Parents' satisfaction and compliance with recommendations following psychoeducational assessment of children. *Journal of School Psychology, 31*, 449-467.
- Kazdin, A. E., Holland, L. & Crowley, M., (1997). Family experience of barriers to treatment and premature termination from child therapy. *Journal of Consulting and Clinical Psychology, 65*, 453-463.
- Kazdin, A. E., & Wassall, G. (1999). Barriers to treatment participation and therapeutic change among children referred for conduct disorder. *Journal of Consulting and Clinical Psychology, 28*, 160-172.
- Lichtenberger, E. O., Mather, N., Kaufman, N. L., & Kaufman, A. S., (2004). *Essentials of assessment report writing*. Hoboken, NY: John Wiley & Sons.
- MacNaughton, K. L., & Rodrigue, J. R. (2001). Predicting adherence to recommendations by parents of clinic-referred children. *Journal of Consulting and Clinical Psychology, 69*, 262-270.
- Mallin B., Schellenberg, M. E., & Smith C. (2012). A modified content analysis of existing school psychology reports. *Canadian Journal of School Psychology, 27*, 243-257. DOI: 10.1177/0829573512449997
- Montgomery, J. M., Dyke, D. I., & Schwean, V. L. (2008). Autism Spectrum Disorders: WISCIV applications for clinical assessment and intervention. In A. Prifitera, D. H. Saklofske, & L. G. Weiss (Eds.), *WISC-IV Clinical assessment and intervention (2nd Ed)*. San Diego, CA: Academic.
- Mastoras, S. M., Climie, E. A., McCrimmon, A. W., & Schwean, V.L. (2011). A C.L.E.A.R. approach to report writing: A framework for improving the efficacy of psychoeducational

- reports. *Canadian Journal of School Psychology*, 26, 127-147. DOI: 10.1177/0829573511409722
- Mather, N., & Jaffe, L. E. (2002). *Woodcock-Johnson III: Reports, recommendations and strategies*. NY: John Wiley & Sons.
- Meichenbaum, D., & Turk, D.C. (1987). *Facilitating treatment adherence: A practitioner's guide-book*. New York: Plenum.
- Merkel, C. (2010). *Mothers' experiences: Participating in the feedback conference of their child's psychoeducational assessment*. Doctoral Dissertation, University of British Columbia, Vancouver, BC.
- Nock, M. K., & Ferriter, C. (2005). Parent management of attendance and adherence in child and adolescent therapy: A conceptual and empirical review. *Clinical Child and Family Psychology Review*, 8, 149-166. DOI: 10.1007/s10567-005-4753-0
- Pain, H. (1999). Coping with a child with disabilities from the parents' perspective: the function of information. *Child: Care, Health and Development*, 25, 299-312.
- Pope, C., Ziebland, S. & Mays, N. (2000). Qualitative research in health care: Analysing qualitative data. *British Medical Journal*, 320(7227), 114-116. DOI: <http://dx.doi.org/10.1136/bmj.320.7227.114>
- Rosenstock, I. M. (1974). Historical origins of the health belief model. *Health Education Monographs*, 2(4), 328-335.
- Weiner, J. & Kohler, S. (1985). Teachers' comprehension of psychological reports. *Psychology in the Schools*, 22, 60-64.
- Wiener, J. & Kohler, S. (1986). Parent's comprehension of psychological reports. *Psychology in the Schools*, 23, 265-270.
- Wiener, J. & Costaris, L. (2012). Teaching psychological report writing: Content and process. *Canadian Journal of School Psychology*, 27, 119-135.

Williams, F., & Coleman, M. (1982). A follow-up study of psychoeducational recommendations.

Journal of Learning Disabilities, 15, 596-598.

Williams, B. L., & Hartlage, L.C. (1988). Diagnostician-parent communication. *School*

Psychology International, 9, 229-233.

Appendix A

Vignettes & Reviewer Feedback Form (Stage 1)

Vignettes and Feedback Questions

There are three Vignettes with questions after each. Note that these are not full reports. We have only brief referral information and the recommendations are provided for your review and feedback. There are also some additional questions at the end of the Vignettes. Please review the information and answer the questions. You may also like to write notes as you review to give us additional feedback. When you are finished place the questionnaire in the postage paid envelope and mail them back to us. Thank- you for your time.

Reviewer Feedback Form

Please review each Vignette below. Feel free to take notes as you go along and then complete the questions for each Vignette to follow.

Please indicate your role below: (circle)

School Psychologist

Special Education Teacher/Faculty

Parent

Vignette A: Standard Format

Notes:

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback.
- In the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.

- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations.
- Provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.
- Provide Simon with individualized one-on-one tutoring targeting his basic math facts.
- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.
- Work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette A (Standard Format) Questions:

What aspects of Vignette A did you like or believe worked well?

How can the recommendations in Vignette A be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette A, please explain.

Vignette B: Categorized Format

Notes:

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

Reading

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback. Practice sessions should be short (15-20 minutes), and should be offered in multiple settings.
- In the regular classroom monitor Simon's independent reading three times a week to ensure that he is reading the text accurately.
- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations. It is recommended that Simon read at home on a daily basis.

Math

- Provide frequent practice with speed drills (once a day for 1-2 minutes) in order to ensure that basic math facts are constantly rehearsed and become over learned.
- For 15 weeks, provide Simon with 30 minutes daily of individualized one-on-one tutoring targeting his basic math facts.

Writing

- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth once per month.
- Work with Simon to set monthly goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette B (Categorized Format) Questions:

What aspects of Vignette B did you like or believe worked well?

How can the recommendations in Vignette B be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette B, please explain.

Vignette C: Question & Answer Format

Notes:

How can we address Simon's difficulties in reading?

- Based on Simon's difficulty reading with ease and speed, for Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback.
- Given Simon's difficulty decoding written text, in the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.
- Because Simon struggles when required to practice reading at school, reading at home and outside of the school environment is strongly encouraged as a means to facilitate Simon's progression to grade level expectations.

What strategies can be used to target Simon's basic math facts?

- To address Simon's weak foundation of basic math facts, provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.

How does Simon learn best in math?

- Given that Simon is more engaged and focused in an individualized setting, provide Simon with individualized one-on-one tutoring targeting his basic math facts.

What is the nature of Simon's writing problems?

- Based upon Simon's extremely compromised writing rate, use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.
- Because Simon exhibits low motivation during writing, work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette C (Question and Answer Format) Questions:

What aspects of Vignette C did you like or believe worked well?

How can the recommendations in Vignette C be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette C, please explain.

Do you have a preference for one of the Vignette Formats provided? Yes / No

If Yes, which one? (Please circle one) Vignette A Vignette B Vignette C

If Yes, please describe:

Thank You!

Appendix B

Vignettes & Review Feedback Form (Stage 2)

Improving the Written Communication of Psychoeducational Recommendations: A Vignette Study (Stage Two)

Vignettes and Feedback Questions

There are three Vignettes with questions after each. Note that these are not full reports. We have only brief referral information and the recommendations are provided for your review and feedback. There are also some additional questions at the end of the Vignettes. Please review the information and answer the questions. You may also like to write notes as you review to give us additional feedback. When you are finished return them to the packet to the researcher. We will begin the focus group when everyone has finished reviewing the written packet. Thank- you for your time.

Reviewer Feedback Form

Please review each Vignette below. Feel free to take notes as you go along and then complete the questions for each Vignette to follow.

Please indicate your role below: (circle)

Notes: School Psychologist Special Education Teacher/Faculty Parent

Vignette A: Standard Format

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

How can we address Simon's difficulties in reading?

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback.
- In the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.

- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations.
- Provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.
- Provide Simon with individualized one-on-one tutoring targeting his basic math facts.
- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.
- Work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette A (Standard Format) Questions:

What aspects of Vignette A did you like or believe worked well?

How can the recommendations in Vignette A be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette A, please explain.

Vignette B: Categorized Format

Notes:

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

Reading

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback. Practice sessions should be short (15-20 minutes), and should be offered in multiple settings.
- In the regular classroom monitor Simon's independent reading three times a week to ensure that he is reading the text accurately.
- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations. It is recommended that Simon read at home on a daily basis.

Math

- Provide frequent practice with speed drills (once a day for 1-2 minutes) in order to ensure that basic math facts are constantly rehearsed and become over learned.
- For 15 weeks, provide Simon with 30 minutes daily of individualized one-on-one tutoring targeting his basic math facts.

Writing

- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth once per month.
- Work with Simon to set monthly goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette B (Categorized Format) Questions:

What aspects of Vignette B did you like or believe worked well?

How can the recommendations in Vignette B be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette B, please explain.

Vignette C: Question & Answer Format

Notes:

How can we address Simon's difficulties in reading?

- Based on Simon's difficulty reading with ease and speed, for Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback.
- Given Simon's difficulty decoding written text, in the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.
- Because Simon struggles when required to practice reading at school, reading at home and outside of the school environment is strongly encouraged as a means to facilitate Simon's progression to grade level expectations.

What strategies can be used to target Simon's basic math facts?

- To address Simon's weak foundation of basic math facts, provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.

How does Simon learn best in math?

- Given that Simon is more engaged and focused in an individualized setting, provide Simon with individualized one-on-one tutoring targeting his basic math facts.

What is the nature of Simon's writing problems?

- Based upon Simon's extremely compromised writing rate, use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.

- Because Simon exhibits low motivation during writing, work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

Vignette C (Question and Answer Format) Questions:

What aspects of Vignette C did you like or believe worked well?

How can the recommendations in Vignette C be improved (e.g. clarity, content, organization)?

If you have other suggestions to improve Vignette C, please explain.

Do you have a preference for one of the Vignette Formats provided? Yes / No

If Yes, which one? (Please circle one)

Vignette A

Vignette B

Vignette C

If Yes, please describe:

Thank You!

Appendix C

Interview Feedback Questions (Stage 2)

Name:

Date:

Individual Interview Feedback Questions

1. What aspects of the recommendation formats did you like or do you believe worked well?

2. What aspects of the recommendation formats did you *not* like or do you believe feel do *not* work well?

3. What changes can be made to make the recommendation formats more 'user friendly'?

- Vignette A?

- Vignette B?

- Vignette C?

4. Are the recommendations clear and easy to understand?

5. What additional comments do you have about the recommendation formats?

Appendix D
Recruitment Flyer (Stage 3)



a place of mind
THE UNIVERSITY OF BRITISH COLUMBIA

PARENTS

Has your child had a psychoeducational assessment in the last 5 years?

Was your child in grades K-12 at the time of the assessment?

**If so, you are invited to take part in a study on
parent's preferences of report recommendations**

Researchers from the University of British Columbia are doing a study on parents' preferences for how written recommendations are communicated in a psychoeducational report. We would like to get parents' perspectives on the recommendation formats they prefer and if the recommendation formats influence parents likelihood of following through with recommendations.

If you would like to take part in this study, you will be asked to review some sample recommendation formats and give us your feedback.

***If you take part in the study, you can be entered into a draw to
win a \$100 gift card.***

To take part, go to this link to the study:

<https://www.surveymonkey.com/s/WT3X3KY>

For additional information or any questions, or ***to request a paper-pencil
version of the questions,***

please contact Aly Fielding at:
xxx-xxx-xxxx or xxxxxxxxxx@xxxx.com

Appendix E

Vignettes & Parent Feedback Form (Stage 3)

(adapted on-line version)

Vignettes and Parent Feedback Questionnaire

There are three Vignettes with questions after each. Note that these are not full reports. We have only brief referral information and the recommendations are provided for your review and feedback. There are also some additional questions at the end of the Vignettes. Please review the information and answer the questions. When you are finished you will be asked to submit your responses. Thank- you for your time.

Vignette A: Standard Format

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback
- In the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.
- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations.
- Provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.
- Provide Simon with individualized one-on-one tutoring targeting his basic math facts.
- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.
- Work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

What do you like about Vignette A (Standard Format)?

What improvements could be made to Vignette A (e.g., clarity, organization, presentation)?

Vignette B: Categorized Format

REASON FOR REFERRAL

Simon was referred for a psychoeducational assessment by his Learning Assistance Teacher, Ms. Jones, based on persistent academic difficulties in reading, writing and basic math facts. The purpose of the current assessment is to gain a better understanding of Simon's overall cognitive, academic, and social emotional profile to develop strategies that may enhance his performance in identified areas of weakness.

RECOMMENDATIONS

Reading

- For Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback. Practice sessions should be short (15-20 minutes), and should be offered in multiple settings.
- In the regular classroom monitor Simon's independent reading three times a week to ensure that he is reading the text accurately.
- Reading at home and outside of the school environment is also strongly encouraged as a means to facilitate Simon's progression to grade level expectations. It is recommended that Simon read at home on a daily basis.

Math

- Provide frequent practice with speed drills (once a day for 1-2 minutes) in order to ensure that basic math facts are constantly rehearsed and become over learned.
- For 15 weeks, provide Simon with 30 minutes daily of individualized one-on-one tutoring targeting his basic math facts.

Writing

- Use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth once per month.
- Work with Simon to set monthly goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

What do you like about Vignette B (Categorized Format)?

What improvements could be made to Vignette B (e.g., clarity, organization, presentation)?

Vignette C: Question & Answer Format

How can we address Simon's difficulties in reading?

- Based on Simon's difficulty reading with ease and speed, for Simon to achieve success in reading fluency he will require repeated opportunities to practice oral reading while receiving corrective feedback
- Given Simon's difficulty decoding written text, in the regular classroom monitor Simon's independent reading to ensure that he is reading the text accurately.
- Because Simon struggles when required to practice reading at school, reading at home and outside of the school environment is strongly encouraged as a means to facilitate Simon's progression to grade level expectations.

What strategies can be used to target Simon's basic math facts?

- To address Simon's weak foundation of basic math facts, provide frequent practice with speed drills in order to ensure that basic math facts are constantly rehearsed and become over learned.

How does Simon learn best in math?

- Given that Simon is more engaged and focused in an individualized setting, provide Simon with individualized one-on-one tutoring targeting his basic math facts.

What is the nature of Simon's writing problems?

- Based upon Simon's extremely compromised writing rate, use Simon's story starter passages to develop a writing portfolio to showcase his work. Use the writings in the portfolio to measure and monitor his growth.
- Because Simon exhibits low motivation during writing, work with Simon to set goals regarding his writing performance. Make goals specific enough that Simon can recognize when he has achieved a goal to keep him motivated to experience future success.

What do you like about Vignette C (Question & Answer Format)?

What improvements could be made to Vignette C (e.g., clarity, organization, presentation)?

What format do you like best? (Please circle one)

A. *Standard Format* B. *Categorized Format* C. *Question & Answer Format*

Please explain your choice:

Other than the recommendation formats presented, do you have a suggestion for a different format you like better? If yes, please describe:

Please circle the number that best fits your response <i>1 = Strongly Agree 2 = Agree 3 = Neither 4 = Disagree 5 = Strongly Disagree</i>					
I am likely to follow through with the recommendations presented in Vignette A	1	2	3	4	5
I am likely to follow through with the recommendations presented in Vignette B	1	2	3	4	5
I am likely to follow through with the recommendations presented in Vignette C	1	2	3	4	5
The presentation (e.g. format, specificity) of written psychoeducational recommendations has an influence on my likelihood of following through with them	1	2	3	4	5
The Vignettes provided (A, B & C) are equivalent in content	1	2	3	4	5

What barriers would prevent you from following through with the recommendations presented in Vignettes?

Additional comments:

Thank you for your feedback

Next Steps

Draw for a Gift

Would you like to be entered in a draw for a \$100 Gift Card? One participant will be selected from those who participate and express interest. If you would like to be entered in our prize draw, please provide your contact information below (provide only one, your preferred way to be contacted).

Your Name (Please Print): _____

Email Address (please write the address clearly):

OR

Phone: _____

Summary of Results

Would you like to receive a summary of our study results. If you would like receive a please provide your contact information below (provide only one, your preferred way to be contacted).

Your Name (Please Print): _____

Email Address (please write the address clearly):

OR

Mailing Address (include postal code): _____
