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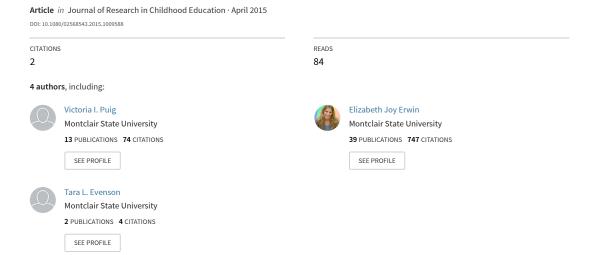
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"It's a Two-Way Street": Examining How Trust, Diversity, and Contradiction Influence a Sense of Community

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As interest in establishing and maintaining high-quality inclusive early childhood environments continues to grow, the population of children and families being served by these programs is becoming increasingly diverse. In response to these demographic and social trends, this study was conducted to explore how diversity is perceived within an early childhood inclusive environment. This participatory action research study was conceptualized and conducted over a 3-year period. Our collaborative research team, which reflected diversity across culture, race, gender, age, and professional discipline, used qualitative semistructured interviews to examine the question, "What does it mean to be fully inclusive across all aspects of diversity?" The research agenda and study implementation were shaped at every stage of the process through reaching consensus among the research team. Findings revealed the critical nature of trust and factors that contributed to and detracted from feelings of membership and community. Study participants identified opportunities and obstacles related to inclusive practices within their setting and expressed understandings and contradictions about the concept of diversity. Recommendations for practice and research that considered multiple aspects of diversity in early childhood are shared.

Keywords: early childhood education, children with disabilities, culturally diverse students, inclusive education, qualitative research

Attention to establishing and maintaining high-quality, inclusive early childhood environments continues to grow in the United States. The Council for Exceptional Children's Division of Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC) prepared a joint position statement (2009) on inclusive early childhood education that outlines recommendations for designing environments with the requisite access, participation, and supports to serve young children with and without disabilities. Simultaneously, the population of children and families being served by early childhood programs is becoming increasingly diverse

in many ways. Varied demographics are found across families receiving early childhood education services, such as culture, language, and ethnicity (Hardin, Mereoiu, Hung, & Roach-Scott, 2009; Puig, 2010; Wang & Aldridge, 2007); intergenerational constructs (Riche, 2000); single-parent and same-sex parent households (Nieto & Bode, 2012); and foster family constellations (Puig, 2013). These multiplicities are also reflected across all families.

In response to these demographic and social trends, the concept of "inclusive education" has evolved to integrate these diversities. Its enhanced meaning moves beyond the practice of placing children with disabilities in educational settings alongside their typically developing peers, to encompass a more comprehensive "philosophical stance toward teaching diverse groups of children who represent a wide range of ability" (Winter, 2007, p. 24).

It is with this conceptualization and appreciation of inclusive education that we decided to enact a participatory action research model for this investigation. Participatory action research (PAR) has the values of inclusion and diversity at its core. It reaches out to the individuals within the settings and situations being examined to include them in identifying topics of interest, planning the methods of investigation, collecting and analyzing the data, and then applying the insights gained to enhance their own communities. As results inform future practice and sustained change (Kemmis, 2006; McIntyre, 2000), new ideas for investigation are inspired and generated. PAR is, therefore, a circular and recursive process. For a more detailed explanation of the PAR process, please refer to Erwin, Puig, Evenson, and Beresford (2012). It was our intention to investigate the varied and multiple perspectives of members of an early childhood inclusive school to gain a clearer understanding of what influences a sense of community, and to answer the question, "What does it mean to be fully inclusive across all aspects of diversity?" We recognized that ideas and experiences of diversity and inclusion extend beyond classroom doors to all aspects of the school community. As we carried out this investigation, we were reminded that the ideals of diversity, inclusion, and community were either enacted or absent throughout all of the school's practices, policies, and interactions among staff, children, and families. We acknowledge that there are different kinds of communities within the larger school community, including classroom communities, discipline-specific groups, and separate age-related strands (e.g., infant classrooms vs. toddler classrooms); while examining these communities individually was beyond the scope of this investigation, we identify this as a valuable next step.

METHOD

Participants and Setting

This study was conceived and conducted at a university-affiliated inclusive children's center outside of a major metropolitan city. The center served families of diverse social, linguistic, and cultural backgrounds and their children with and without disabilities from age 3 months to 5 years. In support of its inclusive model, the program employed early childhood teachers, special education teachers, speech/language therapists, physical therapists, occupational therapists, a psychologist, a storyteller, a music therapist, and early intervention consultants.

A total of 12 infant, toddler, and preschool classrooms served approximately 160 families from the university and community, primarily from middle- and upper-middle-class socioeconomic

backgrounds. A staff of 60 early childhood teachers, special education teachers, and a variety of related service providers worked closely together to assess, plan, and implement high-quality instruction and individualized support and modifications for all children. All staff members and families at the center were sent a letter that described the purpose and process of the proposed investigation and invited their participation. The responses we received from center family and staff members interested in participating in the study far exceeded the capacity of this study's resources. A smaller group of participants was selected from the pool of family and staff members that had expressed interest. To create a diverse and balanced group of study participants, we chose families that represented the school's diversity in terms of characteristics, including culture, race, family structure, and the age and dis/ability of children attending the center. Every effort was made to ensure that the group of participants selected reflected the school's population. For example, one fourth of the children of families participating in the study experienced disabilities. This is in direct proportion to the number of children with disabilities served by the center.

Similarly, staff members chosen to participate represented the school's diversity in terms of their personal characteristics as well as their professional disciplines and the ages of children they worked with. During this selection process, the identities of families and staff members were kept anonymous to the researchers.

From the responses received, five staff and 15 family members were selected to create a diverse and balanced pool of study participants that would represent the center's proportion of 160 families to 60 staff members. The study participants reflected the program's diverse family and staff characteristics and parents of each age group of children served by the program and those of children with individualized family service plans (IFSPs) and individualized education plans (IEPs) were included. Staff working with each of these populations of children were also selected.

Family members who participated in this study were women who identified themselves as White ($n = 10$), Hispanic ($n = 1$), or Chinese American ($n = 1$). Three family members did not self-identify their culture, ethnicity, or race. Their children ranged in age from 1 to 4 years, and one fourth of the children experienced disabilities. All the family study participants had earned college degrees, and 10 had advanced degrees. The primary caretaker worked outside the home in the majority of households. The staff member participants were teachers or related service providers who worked respectively with infants, toddlers, or preschoolers; one worked in an administrative capacity. Of the five staff study participants, four identified themselves as White and one as Hispanic. All of them graduated from college, and three held master's degrees.

The PAR research team included center staff and family community members. An administrator at the center worked in collaboration with the principal investigator to identify staff and family members who represented various characteristics, such as position held at the center, gender, race, culture, interest in research, and issues of diversity. These prospective research team members were approached by the administrator and invited to join the study team. Just as conducting research can be a fluid and evolving process, so was the changing nature of the research team. Over the 3-year study, our research team included parents, teachers, support staff, related service providers, a center administrator, university faculty, and graduate students. The team reflected diversity across culture, race, gender, age, and professional disciplines.

We applied the expanded definition of inclusive education described above in our selection of the study's participants and research team. It is with this comprehensive philosophical stance that we accessed the perspectives, experiences, and expertise of the center's diverse community that frame this study.

Data Collection

Before actual data collection began, our research team met regularly over several weeks to learn about the research process and to make collaborative decisions regarding the research questions, methods, and mechanics. It was through this process that the question, "What does it mean to be fully inclusive across all aspects of diversity?" was identified and honed.

Although written questionnaires and focus groups were considered as data collection procedures, the research team agreed that the best way to learn about participants' experiences and viewpoints was through personal interviews. The team suggested that semistructured interviews intentionally designed to be inviting and conversational in tone would access participants' true voices in a more natural, informal, and inclusive way.

Frequent training sessions were held to assist the PAR research team in developing and practicing qualitative interviewing skills. These training sessions covered topics such as establishing an initial rapport, pacing of the interview, and posing follow-up probes through well-established qualitative research recommendations and guidelines (Bogdan & Biklen, 2007; Lichtman, 2010). In these sessions, PAR research team members practiced interviewing skills, often using digital recorders, and then fellow team members critiqued one another.

The interview protocol (included in the Appendix) was designed to be flexible, personalized, and responsive. It addressed a variety of issues, including relationships, conflict resolution, and feelings of community (or lack thereof). Questions included, In what ways is the center like (or unlike) a community? Do you feel your values, culture, and beliefs are respected? Do you feel your voice is always heard? Follow-up prompts invited participants to expand on and clarify their responses and created opportunities to delve more deeply into emerging topics.

Individual interviews were arranged with each of the participants. They were planned to accommodate participants' schedules and lasted approximately one hour. Each of the 20 personal interviews (15 with family members and five with staff members) was conducted by a member of the PAR research team in a private, quiet space at the center. All interviews were audiotaped and transcribed.

Data Analysis

During the data analysis stage of the process, the PAR team worked to systematically identify patterns and themes that emerged from the data. Using the qualitative coding outlined by Bogdan and Biklen (2007), such as relationships, context, and participants' ways of thinking, and the research question as a frame, preliminary themes grounded in the data were identified (Marshall & Rossman, 1999). Once an initial set of themes was recognized, another level of analysis was conducted in which themes were combined, consolidated, or eliminated. Discussions were held about how to make sense of all of these findings and how they related to one another.

Through ongoing research team discussions, themes that emerged from the data were identified and synthesized. Once themes were finalized, the transcripts were then reread several times by multiple team members to establish inter-rater reliability. To share participants' experiences in their own voices, representative and meaningful quotes were mined from the transcripts (Stake, 2005; Wolcott, 1994).

Member checks were also conducted to ensure accuracy and integrity. For example, preliminary research findings were shared with the original PAR research team and also presented

to the entire staff at a formal meeting. In addition, an executive summary of the research process and findings was sent to all the participating families and staff, inviting their feedback. In the Future Directions section, we share how these responses are being incorporated into the center's practices and policies.

RESULTS

Just as the process of conceptualizing and conducting this investigation was built on the strengths of inclusiveness and partnership, so does our reporting and application of its results. We present the results of our investigation by sharing the voices and perspectives of family, staff, administrators, graduate students, and researcher study participants.

Trust

The theme of trust forms the foundation from which all other themes are grounded. Although there was a dynamic interaction among all the components, trust appeared to play a significant role in shaping how guiding values and beliefs, as well as program policies and practices, are understood. Because it was identified as such a critical factor in influencing community, we were particularly interested in understanding how trust was developed and maintained.

The evolution of trust.   Participants concurred that trust can develop over time and through a series of experiences that affect one's perception of another's worthiness of trust. Families and staff shared how their first interactions with one another often set the stage for trust. In the following comments, families discuss how coming together with staff to share information and insights about their children helped to establish trust:

> [I] sat down with [the teacher] before I got here—knowing what I asked for [my son] was going to be followed and knowing that she took my concerns seriously. And that sort of started off the trust relationship in a really nice way.

> The intake interview that we had . . . before Ella attended the school was wonderful. . . . She wanted to know about Ella's talents and her interests . . . even as a 1-year-old. . . . They acknowledge the fact that these kids are individuals and have something unique about them.

Establishing an open and healthy rapport right from the beginning seemed to go a long way in creating trust.

Another finding to emerge was how trust deepened over time between families and staff members. One parent noted, "I've carried through with the same teachers for a number of years, so I had two children in the toddler room for three years consecutively. So there's a great deal of rapport and trust within that classroom."

A teacher discussed how trust among staff members grew out of supporting one another through struggles:

> I feel comfortable coming right out and saying it [when I'm struggling]. And other people are comfortable saying, "You know, I'm really struggling with this" or "I'm not good with this." And there's

> always somebody else who [thinks] this may be my weakness but this is my strength. . . . We'll counter out and we'll balance each other off, and that builds the trust.

Over time, trust seemed to evolve for many families when they felt that their children were well cared for and that the school had their best interests at heart. Trust seemed to be established for both staff and family members when their concerns were taken seriously. One parent noted, "I recognize that they have my child's best interests at heart. . . . We may disagree with how to do that, but that's okay too."

Actions that strengthen or make it hard to trust.   Participants shared that the ongoing ways that children were cared for, especially staff responses to emergencies, contributed to a trusting relationship. One parent discussed how her feelings of trust grew on the day her child was injured at school, "and everything went very, very well that day. At no time did I feel that we've made the wrong decision. And I thought that they handled everything very, very well."

Other actions contributing to trust that emerged from the data involved reciprocity and honesty, especially when things didn't work out as planned. "It's a two-way street," commented one teacher. "If you feel like you're not being trusted, then it's difficult to trust the person on the other side." Another teacher added: "Having a trusting relationship means that kind of honesty where you're not only saying the things that are working, but sometimes you say the things that are not working."

The infants, toddlers, and preschoolers served at the center had increased susceptibility and dependence on the adults around them because of their very young age. Many are not yet able to communicate their needs, feelings, and experiences to their parents and caregivers. Staff and family expressed an understanding that sometimes necessity was the impetus of trust. This parent and staff member (respectively) recognized that families need to intimately trust professionals who spend time with their very young children:

> For me, just knowing that I can put my child in someone else's care and feel confidence in knowing she is going to be cared for and trusting their decisions, their judgment. I guess it's just a leap of faith.

> You're going to give me your baby who can't sit up, who can't tell you what's going on, you trust that I'm going to give this baby all the love and attention that you would as a parent.

In addition, when a disability was present, it sometimes further increased a child's vulnerability. Families expressed that staff members' understanding and responsiveness to their child's vulnerability was another factor that influenced trust. One parent shared how her child's disability was a significant factor in trusting professionals: "Trust is a huge issue for us because I have a child who can't express his needs. . . . If he is sad he can't tell you why . . . if he breaks down and is upset about something, he usually can't articulate why."

The data suggested that trust was viewed as an essential ingredient of feeling part of the community. Trust was viewed as dynamic, not static; it could be strengthened, but also, at times, diminished.

Guiding Values and Beliefs

Another theme to emerge reflected the values and beliefs that were perceived within the environment. Through the study participants' voices below, it becomes clearer how their experiences and perspectives shaped personal ideas about being members of the center's community.

How the meaning of membership and community was understood.   Families and staff study participants described many factors that contributed to how they perceived and experienced community. One family member acknowledged how daily routines like morning greetings contributed to feelings of warmth and welcome: "You walk in and everyone's like 'Good morning.' The kids come running up to the teachers and the teachers are so loving. They ask about how our weekend was."

The deliberate and well-planned physical layout and organization of the school was also recognized as a key contributor to community building. When the center was initially created, careful and deliberate planning took place to ensure the space could be used in a way that would allow smaller, more personal communities within the larger school environment to develop. A family strand was established in each of the four wings to support the child and family transitions from infant, toddler, and preschool classrooms. In other words, it was designed so children and their families moved through the different age-appropriate classrooms while remaining within the same family strand or wing of the building. Another important feature is that siblings were assigned to classrooms in the same strand as well. This facilitated the logistics of dropping off and picking up for families and made it possible for siblings to visit each other during the school day. In addition, the family strand fostered sustaining relationships between staff members and children and families as well as between families, who stayed together during all of their years at the center.

One parent referred to the family strand design specifically:

> And perhaps one of the ways in which it very strongly feels like a community is the fact that my children have progressed within one wing of the building. . . . So, as a family we have physically, literally moved along the same hallway. . . . It feels like a community with the teachers because physically we're all very close. . . . I know that that was a strategic decision, too—the way the building was structured was to move the families along to develop that type of relationship.

Staff and family members agreed that when it comes to community building, size matters. One teacher noted, "I think because the size of it and the numbers of people that there are—it's hard to get everybody together . . . it's harder to be this big community." Another teacher agreed:

> So I think that in our classroom community, everyone knows what backgrounds people are, what nationalities they are, what family values and culture are like . . . things that are important to them . . . that gets lost in the bigger picture of the school.

A family member echoed the challenge of the center's large size, voicing a different opinion regarding the morning greeting:

> I think that the fact that it's a large school makes it a bit more difficult. I talk with some of my coworkers who had their children in smaller places . . . but when they come in, somebody always says hello to them . . . not only "Hello" but "Hello, Constance" or "Hello, Ms. Salvator" or whatever it is, depending on who it is. But here, you're rarely said hello to when you walk in. You're rarely acknowledged, which I understand because you've got 200 people coming in and out.

As contradictions surfaced, it was clear that there were multiple and diverse perspectives even within the same routines and rituals. In response to the disparate experiences, conversations were initiated and professional development was conducted with staff. These initiatives reaffirmed the

important role that greetings and other personal interactions play in setting the tone for the center and all the relationships experiences within its walls.

Another pattern to emerge regarded important decision making. Being an integral part of the decision-making process contributed to feelings of being a valued member of the community.

> I've had the pleasant experience of making suggestions or coming up with an idea and passing it along and actually seeing it happen, which I don't think you always see in other places. I felt as if my suggestion was valued, and valued enough for someone to actually act on it. And that's very validating. That makes you feel as if you're an interactive part of the community.

There were intentional practices at the center that contributed to how membership within this early childhood community was experienced. In other words, study participants were keenly aware of what practices seemed to be highly effective in shaping a sense of community membership. For example, the idea of staying "connected" that emerged because of this reflects a personalized and unique bond. It appeared that families appreciated knowing the smaller details as well as noteworthy events regarding their child that occurred throughout the day. As one parent noted, "It's just the little things that make me smile and feel okay, even though I missed it." This is just part of the growing evidence that demonstrates how participants experienced feelings of community within this diverse early childhood environment. The following section expands on the commitment to and challenges in creating and maintaining a diverse community.

Promises, opportunities, and obstacles of inclusive practice.   One value that was clearly illustrated was the center's pledge to serve children with diverse abilities. There were many positive outcomes that resulted from a clear and consistent commitment to inclusive practice. For example, one pattern to emerge was the noticeable presence of a wide variety and accessibility of resources available to all children. Having related staff members providing services and support directly in the classroom environment benefited not only the child receiving services, but all the children as well.

One parent commented that having resource staff in the classroom is a deliberate yet natural part of the routine.

> I know that Kristin happens to be an OT here and she is cooking and baking and how nice that she is doing this. . . . And Kristin said, "This is how I do some of my work here with the kids. It allows me to do some of those fine motor skills where they're tearing and they're pouring and they're measuring and they're stirring. . . . It allows me to do my job in a way that is very natural for the kids."

Another family member also expressed appreciation for the resources made available to all of the children. "So I see and like how the speech pathologist and her student . . . and the OT [occupational therapist] are helping children who don't necessarily have special needs but could certainly benefit."

An additional pattern to emerge from the data was how the center's inclusive climate set the context to create a vibrant and compassionate peer culture. Two staff members described how having children with disabilities as part of the class community created opportunities for all of the children to grow and develop:

> It's one thing to have a teacher or even a student worker encourage a 4-year-old to participate, but it's something else to have a peer that encourages a child who might be a little more reticent or less inclined to engage in a social setting. And it's far more successful than it would be if it were an

adult who were trying to facilitate [the interaction]. We had a little boy with the diagnosis of cerebral palsy completely involved, could not sit on his own, could not walk on his own, difficulty even sitting in a chair and no speech. But the children . . . it was amazing how they knew what he needed and would just offer it to him. One day in particular we were all getting ready and everybody's busy and I happened to put his snack down in front of him and I turned to do something and a child just picked up his spoon and started to feed him, without being told.

A parent of a child with a disability described how being in an inclusive setting provides valuable benefits for children with and without disabilities:

So I really like that everything is matter of fact. The fact that my son doesn't talk as well as other kids—the other kids don't even really pay attention. It may be a little harder for them to understand him sometimes but [he's] just their friend. And that's the beauty of inclusion too. That it's dual-fold. The child in need has a model which he desperately needed but in turn the other children become tolerant and accepting of differences and don't see them as different. That's just the way so-and-so is.

Although there were many positive outcomes regarding inclusive practice, some misconceptions and contrasting patterns emerged. For example, one participant felt that the intake process for children with IEPs did not appear to reflect the values of inclusive practice: "We have an interview process for families and children with special needs. So if we have an interview process and you can be not accepted, then are we really inclusive? Do we really include all children then?" This comment reveals a misunderstanding of the screening process that was used to begin to learn about the needs and capacities of children in order to start creating a plan for appropriate support services.

A contradiction surfaced concerning staff members assuming full responsibility for all the children all the time. Some staff were relying on or waiting for related service or support personnel to respond to or support a child with disabilities:

I think they [teachers, teaching assistants, student workers] want to be a part of the inclusion experience, and they have said we've learned so much from this. . . . But I still do feel sometimes if maybe one of the early-intervention team members are not there, it's like a little bit of a panic rises. That's what I mean about, "I've got to get the coverage to help me."

All in all, there were many opportunities as well as obstacles that shaped the nature of inclusive practices at the center. The data that emerged around diversity seemed to play a significant role in the way community was perceived and experienced by study participants, whether it pertained to the classroom environment or within the larger school climate.

How diversity is understood within the context of community. We were interested in learning how diversity and community were understood beyond a disability context at the center. The concept of diversity, its definition and role, what it means and looks like, and how it was understood (or perhaps misunderstood) were threaded throughout the interview data. Study participants discussed the importance of inclusive education and their interest in wanting an environment that reflected diversity.

Several families discussed why they pursued an inclusive setting. This parent explained wanting a community for her children that values diversity: "I come from a very homogenous place, everyone was the same and my husband comes from the city where it was very diverse. . . . I don't want my daughter to be in this homogenous bubble." Another parent explained, "I feel that as far

as our lifestyle, it is really accepted and welcomed, and obviously I think we are the minority. I don't think there are really that many other same-sex couples in the building."

Families and staff recognized that their own forms of diversity presented opportunities for learning and sharing through open conversations with the center community. One parent noted, "So I thought they used our diversity or our non-traditional family to really teach the children." Study participants reflected on the ways they felt their community reflected diversity and ways that it did not:

> I think it's just a diverse community. There are people from all different walks of life, all different races, ethnicities, kids who have special needs. . . . I think it's just an eclectic bunch and it's a depiction of what the real world is. We really like that. It was certainly nice when I saw another boy in the class who was a minority child. And it was like somebody else who looks like our son. You know, there were a lot of blonde people in this room.

> I don't think that financially we represent diversity. . . . I've had families and they just can't afford the tuition. You know, now with the cost shares, they're paying for that and then the tuition on top of that. We don't have any sort of scholarships set up.

There seemed to be a consensus about the importance of a diverse environment. At the same time, there were concerns about whether the center represented diversity adequately across all aspects, such as economic or racial/cultural diversity.

One of the most surprising patterns to emerge from the interview data was the notion of exposure to diversity. The word *exposure* consistently appeared in family interview data. It referred to parents' interest in providing their child(ren) contact with other children and families that they considered to be different in some way from themselves.

> One of the things I really like about my son being here is that it's not majority white. Well, it is majority white, but there are enough other ethnicities in the class that he is *exposed* [emphasis added] to.

> That's what I like about this school too. The fact that it's not homogenous. All students are from different backgrounds. And the teachers, they come from all different backgrounds. I guess I want my children to be *exposed* [emphasis added] to what I was exposed to.

> One of the things that I really like about this place . . . is that it is diverse. And I like that she's *exposed* [emphasis added] in her classroom to different types of people, of different race and ethnicity and beliefs and maybe some girls [who] wear the head scarves.

Inherent in this notion of exposure may be a form of separation. At its core, exposure is first an expression of division, an "othering" of some children and families. Perhaps it signified a hesitation or contradiction to seeking out a meaningful experience with diverse individuals.

> I think he's *exposed* [emphasis added] to other . . . you know, different types of families and religions and cultures. You know, I think he is getting a good eyeful.

> The inclusion model is very important to me. So is diversity with regard to race, ethnicity, sexual orientation, disabilities. I like the *exposure* [emphasis added] my daughter has had at a young age, so if she sees someone different, she's unfazed by it.

The patterns in these data suggested that families were highly interested in their children's contact with others whom they perceive as being "diverse." In the following section, we explored in more

depth whether the idea of exposure that parents discuss indicates a preference for a surface-level, distant, or passive experience, as opposed to a more inclusive one.

In short, the theme of guiding values and beliefs reflected many key ideas about what was valued and how these ideas shaped the center's collective identity. Specifically, the patterns that emerged dealt with the meaning of membership and community, promises, opportunities, and obstacles to inclusive practice, as well as how diversity was understood within the context of community.

DISCUSSION

Our guiding research question—What does it mean to be fully inclusive across all aspects of diversity?—led us to discover complex and dynamic components that deepened our understanding of community. The research process took us beyond the scope of examining diversity from multiple angles to consider what it meant to be a diverse community dedicated to the philosophy of inclusion.

One of our key findings was the importance of trust. In examining the evolution of trust and the actions that strengthen or diminish it we learned that while trust is quite resilient, it is not static. It must be both nurtured and reciprocated ("it's a two-way street"). Parents and staff alike discussed how trust may be initiated out of necessity; children's vulnerability was a factor that heightened both the need for trust and its development. This is in line with findings from Tschannen-Moran and Hoy's (2000) multidisciplinary review of the theoretical and empirical literature on trust that identified a willingness to risk vulnerability as one of the requisite facets of trust.

But while necessity may set the stage for trust, other factors must be present and sustained. In the words of parents and teachers, we hear each of the other elements of trust identified by Tschannen-Moran and Hoy (2000): benevolence ("She wanted to know about Ella's talents and her interests"), reliability ("I've carried through with the same teachers for a number of years"), openness ("I feel comfortable coming right out and saying it"), honesty ("where you're not only saying the things that are working"), and competence ("I thought they handled everything very, very well").

Trust is a fundamental component of all relationships and communities. It has been identified as particularly vital in school settings, where its presence among teachers, parents, and school leaders facilitates the routine aspects of their work together and is a key resource for reform (Bryk & Schneider, 2003).

The guiding values and beliefs themes identified expressed who we are and what we stand for as a community. Our findings revealed that membership played a critical role in understanding various aspects of diversity within a rich community context. Being part of a community typically involves feeling like a valued member. As we have seen, merely being part of a group does not necessarily or automatically result in membership or a sense of belonging.

Our data brought to light the paradox or contrast of membership. Specifically, if there were those who feel as if they are part of an inner circle within the larger community, there must be those who perceived that they are on the outside of the circle and may not feel like members. This was evidenced by the contrast in views expressed by those who voiced their perceptions that they felt welcomed and acknowledged each day and those who did not share the same experience.

The expressed desire for exposure to various cultures and other kinds of individual differences does not necessarily exclude the building of more meaningful, sustainable relationships. And yet we wondered how this idea of mere exposure may have contributed to or hindered a sense of membership within and across diverse constituent groups at the center. In other words, most people would naturally fall into multiple groups at the center according to discipline, disability, economic status, sexual identity, culture/race, early-intervention strand, and so on. A true appreciation of individuals' unique diversity would recognize "the fusion of various cultures to form new, distinct, and ever-changing identities . . . and how people identify regardless of which ethnic, cultural or racial group they may belong to" (Nieto & Bode, 2012, p. 160). This is in contrast to the idea of "exposure" that narrows understandings and classifications of "others" and may reveal a level of prejudice. Furthermore, it may mirror, to some extent, the difference between the practice of "mainstreaming" as practiced in special education in recent history and the full membership supported in truly inclusive education models endorsed currently.

To move beyond mere "exposure" to true "inclusion" requires supporting true membership of all students and their families. As Schnorr (1997) noted, if a child is not perceived by classmates as a member of the classroom culture, it is very difficult to maintain the status of a valued member. Our data raises a question about the implications when membership is viewed not only from students' perspectives but also from their families' perspectives. These ideas take on magnified importance when we consider that it is in the early childhood years that children are constructing their identities and interpreting their observations of the world around them. The messages they receive about race, language, gender and identity, and other diversities can lead to preprejudices, which when reinforced by prevailing societal biases, may grow into actual sustaining prejudices.

Fostering community membership and belonging must be an active, intentional, and systematic effort across classroom, strand, and whole school. The issue of membership has not received nearly enough attention, although there is a small body of research on membership and students with disabilities (Schnorr, 1997; Wolfberg et al., 1999) as well as in inclusive environments (Erwin & Guintini, 2000; Salisbury, Gallucci, Palombaro, & Peck, 1995; Williams & Downing, 1998). Findings from this study strengthen the center's ongoing commitment to building community, diversity, and membership that extends beyond the limitations of mere "exposure" or affiliation with a group.

Our decision to approach this study from a qualitative research model not only offered us insight into issues of inclusion and diversity, but also allowed us to invest in these ideals through our collaborative research process. Meaningful input from stakeholders at the center promoted participation and investment in strengthening a sense of community. The insights gathered through the study helped us to see the importance of ongoing avenues for families to share their thoughts and feelings about how the center was operating.

Future Directions

In considering the next steps for practice and research, we continue in the spirit of inclusive educational practices. Reciprocal and collaborative paradigms reinforce the notion that families and professionals must come together to implement responsive pedagogy. The results and the process of conducting the study offered us insights into how families, staff, and administrators at the center experience community and membership. After examining our findings and carefully considering the feedback we received from the center's families and staff after sharing the results

and experiences of the study with them, we have outlined goals for implementing and monitoring the ideas that emerged. Each of these endeavors embodies and integrates the study's themes of trust, guiding values and beliefs, and program policies and practices.

Efforts that are underway include making some revisions to our intake process. We learned that at least one of our staff members was unclear about the intent and process of the screening we conducted with children before accepting them into the special education program. For this reason, we are making sure that our teaching and related service staff is more familiar with the criteria we are using and our rationale for creating an experience that allows us to see the child in action so that we can begin to make a plan for integrated services that will best suit their capabilities, needs, and interests.

Additionally, in response to feedback we received from families, we have reconsidered some of the questions we pose during the intake process. For example, because some families expressed reservations about questions relating to their cultures and traditions, we are considering ways to gather this information in more natural, ongoing ways.

To capitalize on the interests and commitments that families expressed in helping to shape the center's policies, we have established a Parent Action Committee and additional family-led committees and initiatives. We are also carrying over this model of shared leadership with our staff professionals by assembling a team of representatives from each discipline. The team meets weekly to discuss relevant issues and guide decision making and policy creation at the center.

This study's findings and the additional input we received from staff and families when sharing the results of our investigation made it very clear to us just how important communication and collaboration between families and professionals is to the members of our center's community. Several classrooms have developed blogs that provide an ongoing forum for staff and families to share photos, stories, and news. We have also been exploring ideas for get-togethers and events that join various combinations of members of our school community (for example by age or interests) in social ways. These new efforts complement our commitment to ongoing reciprocal and responsive communication between staff and families.

As these initiatives evolve, we continue to create forums that allow us to share ideas and help us shape high-quality educational practices. Several of the anecdotes shared by staff and families revealed that if we observe and listen carefully, the children can often lead the way. We will be exploring how we can expand the reciprocity between research and practice in ways that will enable us to learn with and from families, professionals, and children about their experiences of community. The insights we gain will be applied to building stronger membership and partnerships that move from providing exposure to creating meaningful relationships among diverse children, staff, and families.

We set out with the question, "What does it mean to be fully inclusive across all aspects of diversity?" Sustaining conversations and continuing to invite the members of the children's center community to share their ideas and experiences will help us to answer this question in an ongoing way. Future research and practice will remain integrated at the center.

This study provided a unique contribution to the ongoing conversation about "how" to promote quality inclusive education that considers all aspects of diversity in early childhood. We hope the findings presented here may be adapted and expanded to inform practice and policies at varied programs serving children and families. We encourage researchers, practitioners, families, and other community members to also consider using collaborative research methods to join research

and practice in reciprocal, productive, and sustaining ways. Inviting stakeholders to identify a research agenda and share diverse perspectives can promote truly inclusive communities.

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APPENDIX: FAMILIES AND STAFF SEMISTRUCTURED PERSONAL INTERVIEW PROTOCOL

- What has your experience been like at the Children's Center?
- In what ways is the Children's Center like a community?
- In what ways is the Children's Center not like a community?
- Do you feel like your presence is welcomed and valued? What makes you feel this way?
- For families only: Do you feel like your child's presence is welcomed and valued? Can you describe what it is that makes you feel this way?
- For families only: Do you feel like your family's presence is welcomed and valued? What makes you feel this way?
- For families only: What does your child talk about related to school? How would you describe your child's interest in school?
- Would you say that all aspects of diversity are adequately embraced at the Children's Center? Please describe.
- Do you feel like your strengths are valued and called upon? Why or why not?
- Are there places where you see that what is said and what is done doesn't match? Can you describe?
- How would you describe your relationships with families? And with staff? What are the things that facilitate or prohibit these relationships?
- Do you feel like your values, culture, and beliefs are respected? Are they well-integrated at the Children's Center? Can you tell me about this?
- Do you feel like your voice is always heard? Can you describe this more?
- What suggestions or advice do you have for improving the Children's Center? What dreams do you have for the Children's Center in the future?