1. Descriptive Information

**C3 Efforts to Increase Inclusion and Engagement of Young Children with Disabilities in Early Care and Education**

**Description**

This session will invite attendees to discuss the factors that impact the inclusion of young children with disabilities in early development and care programs (including family child care, center-based care, Early/Head Start, public pre-K, etc.). As a foundation for the session, we will share recent joint statements from the U.S. Departments of Health and Human Services and Education on early childhood inclusion, expulsion, and family engagement. Additionally, we will present two recent studies on the experiences of child care providers, IDEA Part C early intervention providers, Head Start staff, and families of children with disabilities in including young children with disabilities in ECE. As these studies address the needs of professionals to best support this specialized population including training recommendations, innovative professional development, and strategies to family engagement, attendees will be encouraged to share successes, challenges, and solutions to address inclusion.

**Facilitator**

- Jenna Weglarz-Ward, UNLV

**Presenters**

- Tracie Dickson, OSEP
- Jenna Weglarz-Ward, UNLV & Rosa Milagros Santos, University of Illinois
- Kimberly Hile & Rosa Milagros Santos, University of Illinois

**Discussant**

**Scribe**

- Claire Lowe, Child Trends

2. Brief Summary of Presentations

- **Goal of creating inclusive society and coordinating researchers, policy makers, community resources**

**Early Childhood Federal Policy Statements**

Tracie Dickson, Office of Special Education Programs, U.S. Department of Education

- **Talked a lot about why inclusion is so difficult. Within the past 5-6 years, the districts started renovating the playgrounds but the playgrounds were not accessible. When you start thinking about how inclusion should be a way of life (how we should have curb cut outs) however, we’re still talking about inclusion.**

- **The Inter Agency Policy Board was formed to start thinking about how we could help states leverage resources that they get through both HHS and ED agencies. There was a lot of conversation about how to demonstrate collaboration and how to encourage states to collaborate. One of the things this board did was to issue policy statements. We tried to think about how to come up with a series of policy statements that address different needs but still fall under the umbrella of inclusion.**

- **Purpose of policy Statements**
  - Raise awareness about high quality inclusion.
  - Provide recommendations based on cutting edge research.
  - Include information and recommendations about workforce competencies.
  - How states can work together.

- **Inclusion should be meaningful and it’s everyone’s right to be meaningfully included. This applied to children with and without disabilities.**

- **Joint policy statements were all written in a way to support inclusion while addressing other issues as well. The statement specifically about inclusion received lots of good feedback. After the success of the inclusion statement, the other statements in the list came out in different orders. The collaboration and coordination of MEICHV and Part C Programs came out in December. This statement was two years in the making. There are so many issues around home visiting and Part C collaboration. All policy statements included receiving feedback from the public.**

- **Other initiatives**
  - Birth to Five: Watch Me Thrive! is a developmental screening initiative

- **Early Childhood Technical Assistance Center**
Project Collaborative Care: Experiences of Child Care and Early Intervention Providers in Serving Infants and Toddlers with Disabilities
Jenna Weglarz-Ward, UNLV & Rosa Milagros Santos, University of Illinois

- There is very little research on children with disabilities in early care settings.
- This was a collaborative project
- Purpose: Overall, the goal was to understand the experience of infants and toddlers with disabilities and how their families are supported in child care settings. Specifically looked at the experience of early childhood professionals and what they need to get to where we want them to be.
- Almost every childcare provider (90%) has cared for a child with a disability. So this is a very relevant topic. The type of disability ranges (a lot of developmental delay, ADHS, motor disability, heart defect, complex medical needs).
- Most providers report having a general training on disabilities. However, no many early intervention providers had not any training on collaborating with child care providers.
- What EI looks like in child care
  o Focus groups broke this down into several categories
    ▪ Roles and responsibilities. Whose role is it to do what and when? Childcare providers were unsure whether or not they we supposed to interact with EI providers. There were a lot of concerns about liability and who was in charge of that child for the hour. Family members were said to be the key to inclusion and collaboration. Parents might not know the value of sharing information and collaboration about their child.
    ▪ Location of services. What does it mean to have and EI provider come in to provide services? Mostly children were pulled out of the classroom to work with their therapist or EI provider. This was often because it was less distracting. The issue with this is that there is no carryover to other settings.
    ▪ Communication. A lot of communication was informal and that prevented carryover.
- Budget was an issue. Providers want to be paid for collaboration and trainings. It’s a difficult to leave their center to go to trainings. This is very impactful. Being able to hire extra staff was also a challenge. In most states, providers are not part of the IFSP.
- Child care providers don’t necessarily feel respected. This makes it difficult to collaborate with some people.
- Ongoing work
  o EI providers and providers are generally on the same page in that they all wanted to be there for children and families and that they all need more training.
  o Received specific feedback on the types of training providers wanted. They want more time to build relationships, they want sustained coaching, online and in person training, etc.

Would You Like to Hear a Story? Exploring Photo Elicitation as a Means to Engaging Families of Young Children with Disabilities in Head Start
Kimberly Hile & Rosa Milagros Santos, University of Illinois

- Has experience from many different perspectives in understanding what it’s like to talk about your child and working with families. Families who are experiencing multiple risk factors are reporting a sense of powerlessness when they also care for a child with disabilities. Used the Head Start because of the resources and their focus on working closely with the families. Head Start has disability support workers however, that role is more to make sure the child is getting services, has an IEP, etc.
- Photo Elicitation
  o This is a qualitative research strategy that supports interviews. Families take photographs showing what it’s like to care for a young child with disabilities. This transfers the power from the researcher to the family to so they can say, “this is my life, this is what I want you to know about me”.
- Research Questions
  o Want to look at the family and how they perceive professionals get information from them. Also looking at what information professionals are trying to get and how those may converge.
Data collection
- The Family and Teacher Provider Relationship Quality. This survey is tailored to different providers and services. It gives a descriptive picture of where everyone is coming from.
- Photo Elicitation.
  - What does this tell me about your family?
  - How could this help your HS service worker learn more about you?
- Focus groups

Implications
- Limitations in that they’re not looking at pairs. It would be interesting to look at pairs of service workers and children.
- Limitations of length

3. Brief Summary of Discussion
- Photos don’t have to include a person - could take a picture of objects that represent the situation. The goal is to use the photos as a tool in daily practice. These photos can be use as a teaching method - for teaching strategies
- It would be interesting to have the children to reflect on the photos as well.
- Would the act of taking the photos change the child’s behavior at all?
- Photos as a way to express experiences is good for families with low literacy skills who might not take a survey
- This is similar to an authentic portfolio and assess where the family and chronicle what’s been important to the family over time. It could give older children the power to drive their own trajectories. DV. Has a nonprofit for getting low-income children cameras and encouraging them to take pictures. This is a photojournalism perspective and is very powerful to the children or families.
- The home visiting and Part C is more of a recommendation of how these two can collaborate. It provides specific recommendations around how/where they can collaborate. What would you need from the federal government for how they can collaborate better?
  - There’s an issue with Part C and childcare in the District because of lack of professional development, not knowing how to deal with specific disabilities, etc. As a Part C coordinator, those were some of the issues I saw bubble up. They didn’t know how to handle it or have the resources to handle this particular child with disabilities. What can the federal government say to providers to alleviate some of those barriers?
    - Encouragement or guidance that would support interagency professional development. Once you get to the point of bringing them together, there’s a lot of excitement.
- If the childcare providers are part of the IFSP they would be more engaged
- There’s a myth that inclusion and collaboration take a lot of money. They take a lot of effort but they can be incorporated into other things. We’re trying to find those models and collaborations.
- Use language that cut across different fields
- Talk about the benefits for typically developing kids. I think there’s an immense benefit for children participating in these programs.
- If we start with inclusion for infants and toddlers, this will be how they grow up.

4. Summary of Key issues raised (facilitators are encouraged to spend the last 3-5 minutes of workshops summarizing the key issues raised during the session; bullets below are prompts for capturing the kinds of issues we’re looking for)

- Emerging findings that may be of particular interest to policy-makers and ACF?
- Methodological issues including innovative methodologies that may help maximize resources available for research and evaluation?
- Follow-up activities suggested to address questions and gaps (e.g., secondary analyses of data, consensus meetings of experts, research synthesis or brief, webinar, etc.)?
- Recommendations about future ACF child care research directions and priorities?