

Foundations of Inclusion Video Discussion Questions

1. How would you feel if you had been “in the shoes” of Jay’s parents and your son had been excluded from attending school? Have you or any of your family members ever been excluded because of a condition or characteristic beyond your control (e.g., gender, race)? How did that feel?

2. As you watched the video, what new information did you learn about inclusion?

3. Explain the desired results of early childhood inclusion?

4. What do you see as major changes over the last 20-30 years in the way the laws and policies support access and participation of young children with disabilities in inclusive settings?

5. What does the research tell us about inclusion?



Policy Advisory

The Law on Inclusive Education

INCLUSION

is the principle that supports the education of children with disabilities alongside their non-disabled peers rather than separately. Ever since *Brown v. Board of Education* held that separate was not equal, inclusion has been part of this requirement to provide equal educational opportunities. Both the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act (Sec. 504) require schools and agencies to provide equal educational opportunities for children with disabilities. . Another primary source for the inclusion requirement is the Individuals with Disabilities Education Act or IDEA. IDEA not only supports equal educational opportunities, it specifically requires schools to support inclusion of children with disabilities through the least restrictive and natural environment mandates. For preschool and school age children (ages 3-21), IDEA requires that children with disabilities be educated in the “least restrictive environment” (§1412(a)(5) and §1413(a)(1)). For infants and toddlers (ages 0-3) with disabilities, IDEA promotes the use of “natural environments” for early intervention services (§1432(4)(G)).

American with Disabilities Act (ADA)

- Children with disabilities are entitled to equal access to all early childhood (Head Start and preschool programs) and child care facilities (center-based and family child care).
- Programs cannot create eligibility standards that discriminate against or screen out children with disabilities.
- Programs must make reasonable accommodations on an individual basis to allow everyone to participate in the services and opportunities offered.

Why does federal law support inclusion in schools and services?

While inclusion is justified as part of equal educational opportunities, in enacting IDEA (and in each subsequent revision of the law) Congress has also recognized the benefits of inclusion. Section §1400(5) of IDEA states:

“Almost 30 years of research and experience has demonstrated that the

education of children with disabilities can be made more effective by . . . ensuring their access to the general education curriculum in the regular classroom, to the maximum extent possible.”

In addition to the academic benefits of inclusion, courts have long recognized that there are non-educational benefits to inclusion that are important to the quality of life of children with disabilities—such as the opportunity to make friends and increase acceptance among their peers (*Daniel R.R. v. State Bd. of Educ.*, 1989; *Sacramento City Sch. Dist. v.*

Rachel H., 1994). Federal law thus recognizes and supports inclusion because of the developmental, educational, and social benefits that inclusion provides to children with disabilities.

How does federal law define inclusion and what does it involve?

Inclusion is not specifically defined in the law, but is supported through the equal opportunity, least restrictive and natural environment mandates. Together these requirements support inclusion in three areas: placement of the child with children who do not have disabilities, access to the standard educational or developmental curriculum, and participation in typical non-academic activities.

The Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC) have developed a joint position statement on early childhood inclusion. For more information on that definition and specifics on access, participation and supports for inclusion, visit <http://community.fpg.unc.edu>

Policy differences for different age groups— early intervention (ages 0-3) vs. special education (ages 3-21)

These general principles of intervention underlying inclusion apply to children of all ages (0-21 years): a placement in regular classrooms and settings, access to the general development or educational curriculum, and participation in typical activities. The specific requirements for services in a natural environment (ages 0-3) and education in the least restrictive environment (ages 3-21) differ in two important ways.

First, for children 0-3 years of age, natural environments include homes and other community locations where children without disabilities participate (§1432(4)(G)). Even though the home is an arguably separate environment, it is considered an inclusive environment for an infant or toddler

because most children without disabilities at this age are cared for in the home. In other words, the home is inclusive for infants and toddlers because it is a typical setting for infants and toddlers who don't have disabilities. For children age 3-21, the home is not considered an inclusive environment.

Second, for children 3-21 years of age, the least restrictive environment includes a continuum of placements (§ 1412(a)(5)) from fully inclusive (the general education classroom) to fully separate (special school) with a lot of different options in between, such as the use of a part-time resource room. Natural environments do not have a spectrum of inclusion—they either are natural environments or they are not. The home is considered just as much of a natural environment as a child care setting that children without disabilities attend. When trying to decide between natural environments (i.e., the home or inclusive child care setting), either of which would qualify as “full inclusion” for an infant or toddler, the natural environment that is likely to provide the most benefit to the child should be selected (§1435(16)(B)).

How to choose an inclusive placement

Choosing an inclusive placement is the responsibility of a team working on the Individualized Education Program (IEP) for children ages 3-21; or the Individualized Family Service Plan (IFSP) for children ages 0-3. But how does the team select a placement and design a program to ensure they meet IDEA's requirements for inclusion in the least restrictive environment for preschool and school-age children, or services in a natural environment for infants and toddlers?

Step 1— Begin by considering full inclusion

The first step in selecting an inclusive placement and program is to start by considering full inclusion. Full inclusion is a term used by professionals to refer to the most inclusive environment possible: placement in a general education classroom and/or natural environment/ early childhood setting, access to the typical curriculum and/or developmental opportunities, and participation in typical activities.

While not all children with disabilities may be able to succeed with this level of inclusion, every step away from this ideal is going to be less inclusive and thus must be specifically justified in the child's IEP or IFSP (§1414(d)(1)(A)(i) and §1436(d)(5)).

Step 2– Consider supplementary aids and services

Before moving toward a less inclusive placement, IDEA requires an IEP team to consider use of supplementary aids and services (§1412(a)(5)). Supplementary aids and services are defined by IDEA as “aids, services, and other supports that are provided in regular education classes or other education-related settings to enable children with disabilities to be educated with nondisabled children to the maximum extent appropriate” (§1401(33)).

IFSP teams are not explicitly required to consider supplementary aids and services (the term is not used in early intervention 0-3 years of age). However the requirements in the ADA and Sec. 504 to maximize placement in natural environments and to provide reasonable accommodations create a similar mandate. Put simply, if the child could succeed in a more inclusive environment through the use of assistive technology, additional classroom supports, or other means, these aids and services should be provided and the child should be placed in the more inclusive program.

Step 3– Reduce inclusion only to ensure benefit

If, even after considering possible supplementary aids and services, the child cannot succeed in a more inclusive setting because of his or her disability, it is appropriate to start considering a less inclusive program. The key is to reduce inclusion only to the extent necessary to ensure the child will benefit from the placement and program.

Selecting the least restrictive environment means that you move along the continuum toward a more segregated setting one step at a time or modify the curriculum only to the extent necessary. Even if a child cannot be included in the general education classroom all the time, he or she might be able to participate part of the time and also be included in nonacademic activities and extracurricular activities. Remember these areas of inclusion: placement, access to educational opportunities, and activities—reducing inclusion in one area does not mean inclusion should be reduced in others.

To comply with the natural environment requirement, selecting a service setting that is not a natural environment should be specific to the particular service and the need it addresses. Even if the IFSP team finds that some services cannot be successfully provided in a natural environment, it does not mean that all services must be provided in non-natural environments.

Step 4– Record the decision in the IEP or IFSP

Virtually all aspects of the process for selecting the final choice of an inclusive program must be recorded on the IEP or IFSP (§1414(d)(1)(A) and §1436(d)). The written plan must record how the child's disability affects his or her inclusion in the curriculum or learning activities. Any exclusion from an inclusive environment or natural environment must be justified based on the child's disability, including exclusion related to nonacademic and extra-curricular activities. Aids, services, program modifications, and other supports that will be provided to increase inclusion must be specifically identified.

References

Americans with Disabilities Act of 1990 (ADA), Pub. L. No. 101-336. For complete source of information, go to <http://www.ada.gov>

Daniel R.R. v. State Board of Educ., 874F.2d 1036 (5th Cir. 1989). For complete source of information, go to <http://cases.justia.com>

Individuals with Disabilities Education Act of 2004 (IDEA), Pub. L. No. 108-446. For complete source of information, go to <http://idea.ed.gov/>

Early Intervention Program for Infants and Toddlers with Disabilities. 76 Fed. Reg. 60140 (2011). For complete source of information, go to <http://www.gpo.gov/fdsys/pkg/FR-2011-09-28/pdf/2011-22783.pdf>

Rehabilitation Act of 1973, Pub. L. No. 93-112. For complete source of information, go to <http://www.ed.gov/about/offices/list/ocr/docs/edlite-FAPE504.html>

Sacramento City School Dist. v. Rachel H., 14 F.3d 1398 (9th Cir. 1994). For complete source of information, go to <http://cases.justia.com>

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Updated by Pam Winton March 2013.



Research Synthesis Points on Early Childhood Inclusion

THIS DOCUMENT IS A SUMMARY OF KEY CONCLUSIONS OR “SYNTHESIS POINTS” drawn from a review of the literature or research syntheses on early childhood inclusion. For each synthesis point, we provide supporting references. We encourage you to reproduce this document for distribution and use it in a variety of contexts, including professional development, policy development, planning, advocacy, and grant writing.

It should be noted that synthesis points 1-7 derive primarily from the following key sources, selected because these authors summarized what was known about inclusion:

Guralnick, M. J. (Ed.). (2001). *Early childhood inclusion: Focus on change*. Baltimore: Brookes.

Odom, S. L. (Ed.). (2002). *Widening the circle: Including children with disabilities in preschool programs*. New York: Teachers College Press.

Odom, S. L., et al. (2004). Preschool inclusion in the United States: A review of research from an ecological systems perspective. *Journal of Research in Special Educational Needs*, 4(1), 17-49.

Based on our own review of the literature, we added synthesis points 8 and 9 to reflect emerging knowledge about quality inclusive programs and professional development related to inclusion.

1. Inclusion takes many different forms.

Lieber, J., Hanson, M. J., Beckman, P. J., Odom, S. L., Sandall, S. R., Schwartz, I. S., et al. (2000). Key influences on the initiation and implementation of inclusive preschool programs. *Exceptional Children*, 67(1), 83-98.

*Odom, S. L., & Diamond, K. E. (1998). Inclusion of young children with special needs in early childhood education: The research base. *Early Childhood Research Quarterly*, 13(1), 3-25.

Odom, S. L., Horn, E. M., Marquart, J., Hanson, M. J., Wolfberg, P., Beckman, P. J., et al. (1999). On the forms of inclusion: Organizational context and individualized service models. *Journal of Early Intervention*, 22, 185-199.

2. Progress has been achieved in efforts to ensure access to inclusive programs, particularly for pre-kindergarten children (3-5 year-olds). However, in the U.S., universal access to inclusive programs for all children with disabilities is far from a reality.

- McDonnell, A. P., Brownell, K. L., & Wolery, M. (1997). Teaching experience and specialist support: A survey of preschool teachers employed in programs accredited by NAEYC. *Topics in Early Childhood Special Education, 17*(3), 263-285.
- U. S. Department of Education. (2005). *Executive Summary — Twenty-fifth annual report to congress on the implementation of the Individuals with Disabilities Education Act*. Retrieved June 22, 2007 from <http://www.ed.gov/about/reports/annual/osep/2003/25th-exec-sum.pdf>
- Wolery, M., Holcombe-Ligon, A., Brookfield, J., Huffman, K., Schroeder, C., Martin, C. G., et al. (1993). The extent and nature of preschool mainstreaming: A survey of general early educators. *The Journal of Special Education, 27*(2), 222-234.

3. Children in inclusive programs generally do at least as well as children in specialized programs. Inclusion can benefit children with and without disabilities, particularly with respect to their social development.

- *Buyse, V., & Bailey, D. B. (1993). Behavioral and developmental outcomes in young children with disabilities in integrated and segregated settings: A review of comparative studies. *The Journal of Special Education, 26*(4), 434-461.
- Buyse, V., Goldman, B. D., & Skinner, M. (2002). Setting effects on friendship formation among young children with and without disabilities. *Exceptional Children, 68*(4), 503-517.
- Cole, K. N., Mills, P. E., Dale, P. S., & Jenkins, J. R. (1991). Effects of preschool integration for children with disabilities. *Exceptional Children, 58*(1), 36-45.
- Diamond, K. E., & Carpenter, E. S. (2000). Participation in inclusive preschool programs and sensitivity to the needs of others. *Journal of Early Intervention, 23*(2), 81-91.
- Guralnick, M. J., Conner, R. T., Hammond, M. A., Gottman, J. M., & Kinnish, K. (1996). Immediate effects of mainstreamed settings on the social interactions and social integration of preschool children. *American Journal on Mental Retardation, 100*, 359-377.
- Guralnick, M. J., & Groom, J. M. (1988). Peer interactions in mainstreamed and specialized classrooms: A comparative analysis. *Exceptional Children, 54*, 415-425.
- Harris, S. L., Handleman, J. S., Kristoff, B., Bass, L., & Gordon, R. (1990). Changes in language development among autistic and peer children in segregated and integrated preschool settings. *Journal of Autism and Developmental Disorders, 20*(1), 23-31.
- Holahan, A., & Costenbader, V. (2000). A comparison of developmental gains for preschool children with disabilities in inclusive and self-contained classrooms. *Topics in Early Childhood Special Education, 20*(4), 224-235.
- Hundert, J., Mahoney, B., Mundy, F., & Vernon, M. L. (1998). A descriptive analysis of developmental and social gains of children with severe disabilities in segregated and inclusive preschools in Southern Ontario. *Early Childhood Research Quarterly, 13*(1), 49-65.
- Jenkins, J. R., Odom, S. L., & Speltz, M. L. (1989). Effects of social integration on preschool children with handicaps. *Exceptional Children, 55*(5), 420-428.
- *Lamorey, S., & Bricker, D. D. (1993). Integrated programs: Effects on young children and their parents. In C. Peck, S. L. Odom, & D. D. Bricker (Eds.), *Integrating young children with disabilities into community programs: Ecological perspectives on research and implementation* (pp. 249-270). Baltimore: Brookes.

- Mills, P. E., Cole, K. N., Jenkins, J. R., & Dale, P. S. (1998). Effects of differing levels of inclusion on preschoolers with disabilities. *Exceptional Children*, 65(1), 79-90.
- *Odom, S. L., & Diamond, K. E. (1998). Inclusion of young children with special needs in early childhood education: The research base. *Early Childhood Research Quarterly*, 13(1), 3-25.
- Rafferty, Y., Piscitelli, V., & Boettcher, C. (2003). The impact of inclusion on language development and social competence among preschoolers with disabilities. *Exceptional Children*, 69(4), 467-479.

4. A variety of factors such as policies, resources, and beliefs influence the acceptance and implementation of inclusion.

- Buell, M. J., Gamel-McCormick, M., & Hallam, R. A. (1999). Inclusion in a childcare context: Experiences and attitudes of family childcare providers. *Topics in Early Childhood Special Education*, 19(4), 217-224.
- Buyse, V., & Bailey, D. B. (1994). The relationship between child characteristics and placement in specialized versus inclusive early childhood programs. *Topics in Early Childhood Special Education*, 14(4), 419-436.
- Buyse, V., Wesley, P. W., & Keyes, L. (1998). Implementing early childhood inclusion: Barrier and support factors. *Early Childhood Research Quarterly*, 13(1), 169-184.
- Buyse, V., Wesley, P. W., Keyes, L., & Bailey, D. B. (1996). Assessing the comfort zone of child care teachers in serving young children with disabilities. *Journal of Early Intervention*, 20, 189-203.
- Cross, A. F., Traub, E. K., Hutter-Pishgahi, L., & Shelton, G. (2004). Elements of successful inclusion for children with significant disabilities. *Topics in Early Childhood Special Education*, 24(3), 169-183.
- Devore, S., & Hanley-Maxwell, C. (2000). "I wanted to see if we could make it work": Perspectives on inclusive childcare. *Exceptional Children*, 66(2), 241-255.
- Dinnebeil, L. A., McInerney, W., Fox, C., & Juchartz-Pendry, K. (1998). An analysis of the perceptions and characteristics of childcare personnel regarding inclusion of young children with special needs in community-based programs. *Topics in Early Childhood Special Education*, 18(2), 118-128.
- Lieber, J., Hanson, M. J., Beckman, P. J., Odom, S. L., Sandall, S. R., Schwartz, I. S., et al. (2000). Key influences on the initiation and implementation of inclusive preschool programs. *Exceptional Children*, 67(1), 83-98.
- Mulvihill, B. A., Shearer, D., & Van Horn, M. L. (2002). Training, experience and child care providers' perceptions of inclusion. *Early Childhood Research Quarterly*, 17(2), 197-215.
- *Odom, S. L., & Diamond, K. E. (1998). Inclusion of young children with special needs in early childhood education: The research base. *Early Childhood Research Quarterly*, 13(1), 3-25.
- Purcell, M. L., Horn, E., & Palmer, S. (2007). A qualitative study of the initiation and continuation of preschool inclusion programs. *Exceptional Children*, 74(1), 85-99.
- *Scruggs, T. E., & Mastropieri, M. A. (1996). Teacher perceptions of mainstreaming/inclusion, 1958-1995: A research synthesis. *Exceptional Children*, 63(1), 59-74.
- Stoiber, K. C., Gettinger, M., & Goetz, D. (1998). Exploring factors influencing parents' and early childhood practitioners' beliefs about inclusion. *Early Childhood Research Quarterly*, 13(1), 107-124.
- *Stoneman, Z. (1993). The effects of attitude on preschool integration. In C. Peck, S. L. Odom, & D. D. Bricker (Eds.), *Integrating young children with disabilities into community programs: Ecological perspectives on research and implementation* (pp. 223-248). Baltimore, MD: Paul H. Brookes.

- Wesley, P. W., Buysse, V., & Keyes, L. (2000). Comfort zone revisited: Child characteristics and professional comfort with consultation. *Journal of Early Intervention, 23*(2), 106-115.
- Wesley, P. W., Buysse, V., & Skinner, D. (2001). Early interventionists' perspectives on professional comfort as consultants. *Journal of Early Intervention, 24*(2), 112-128.

5. Specialized instruction is an important component of inclusion and a factor affecting child outcomes.

- Antia, S. D., Kreimeyer, K. H., & Eldredge, N. (1993). Promoting social interaction between young children with hearing impairments and their peers. *Exceptional Children, 60*, 262-275.
- Cross, A. F., Traub, E. K., Hutter-Pishgahi, L., & Shelton, G. (2004). Elements for successful inclusion for children with significant disabilities. *Topics in Early Childhood Special Education, 24*(3), 169-183.
- D'Allura, T. (2002). Enhancing the social interaction skills of preschoolers with visual impairments. *Journal of Visual Impairment and Blindness, 96*, 576-584.
- DeKlyen, M., & Odom, S. L. (1989). Activity structure and social interactions with peers in developmentally integrated play groups. *Journal of Early Intervention, 13*, 342-352.
- Lefebvre, D., & Strain, P. S. (1989). Effects of a group contingency on the frequency of social interactions among autistic and nonhandicapped preschool children: Making LRE efficacious. *Journal of Early Intervention, 13*, 329-341.
- McEvoy, M. A., Nordquist, V. M., Twardosz, S., Heckaman, K., Wehby, J. H., & Denny, R. K. (1988). Promoting autistic children's peer interaction in an integrated early childhood setting using affection activities. *Journal of Applied Behavior Analysis, 21*, 193-200.
- Schwartz, I. S., Carta, J. J., & Grant, S. (1996). Examining use of recommended language intervention practices in early childhood special education classrooms. *Topics in Early Childhood Special Education, 16*(2), 251-272.
- Stahmer, A. C., & Ingersoll, B. (2004). Inclusive programming for toddlers with autistic spectrum disorders: Outcomes from the Children's Toddler School. *Journal of Positive Behavior Interventions, 6*(2), 67-82.

6. Collaboration among parents, teachers, and specialists is a cornerstone of high quality inclusion.

- Hunt, P., Soto, G., Maier, J., Liboiron, N., & Bae, S. (2004). Collaborative teaming to support preschoolers with severe disabilities who are placed in general education early childhood programs. *Topics in Early Childhood Special Education, 24*(3), 123-142.

7. Families of children with disabilities generally view inclusion favorably, although some families express concern about the quality of early childhood programs and services.

- Bailey, D. B., & Winton, P. J. (1987). Stability and change in parents' expectations about mainstreaming. *Topics in Early Childhood Special Education, 7*(1), 73-88.
- Bailey, D. B., & Winton, P. J. (1989). Friendship and acquaintance among families in a mainstreamed day care center. *Education and Training of the Mentally Retarded, 24*, 107-113.
- Bennett, T., Deluca, D., & Bruns, D. (1997). Putting inclusion into practice: Perspectives of teachers and parents. *Exceptional Children, 64*(1), 115-131.

- Green, A. L., & Stoneman, Z. (1989). Attitudes of mothers and fathers of nonhandicapped children. *Journal of Early Intervention, 13*, 292-304.
- * Lamorey, S., & Bricker, D. D. (1993). Integrated programs: Effects on young children and their parents. In C. Peck, S. L. Odom, & D. D. Bricker (Eds.), *Integrating young children with disabilities into community programs: Ecological perspectives on research and implementation* (pp. 249-270). Baltimore, MD: Paul H. Brookes.
- Miller, L. J., Strain, P. S., Boyd, K., Hunsicker, S., McKinley, J., & Wu, A. (1992). Parental attitudes toward integration. *Topics in Early Childhood Special Education, 12*, 230-246.
- Peck, C., Carlson, P., & Helmstetter, E. (1992). Parent and teacher perceptions of outcomes for typically developing children enrolled in integrated early childhood programs: A statewide survey. *Journal of Early Intervention, 16*, 53-63.
- Rafferty, Y., Boettcher, C., & Griffin, K. W. (2001). Benefits and risks of reverse inclusion for preschoolers with and without disabilities: Parents' perspectives. *Journal of Early Intervention, 24*(4), 266-286.
- Rafferty, Y., & Griffin, K. W. (2005). Benefits and risks of reverse inclusion for preschoolers with and without disabilities: Perspectives of parents and providers. *Journal of Early Intervention, 27*(3), 173-192.
- Reichart, D. C., Lynch, E. C., Anderson, B. C., Svobodny, L. A., DiCola, J. M., & Mercury, M. G. (1989). Parental perspectives on integrated preschool opportunities for children with handicaps and children without handicaps. *Journal of Early Intervention, 13*, 6-13.

8. Limited research suggests that the quality of early childhood programs that enroll young children with disabilities is as good as, or slightly better, than the quality of programs that do not enroll these children; however, most studies have focused on general program quality as opposed to the quality of inclusion for individual children with disabilities and their families.

- Bruder, M. B., & Brand, M. (1995). A comparison of two types of early intervention environments serving toddler-age children with disabilities. *Infant-Toddler Intervention: The Transdisciplinary Journal, 5*(3), 207-218.
- Buysse, V., Skinner, D., & Grant, S. (2001). Toward a definition of quality inclusive child care: Perspectives of parents and practitioners. *Journal of Early Intervention, 24*(2), 146-161.
- Buysse, V., Wesley, P. W., Bryant, D., & Gardner, D. (1999). Quality of early childhood programs in inclusive and noninclusive settings. *Exceptional Children, 65*(3), 301-314.
- Knoche, L., Peterson, C. A., Edwards, C. P., & Jeon, H. (2006). Child care for children with and without disabilities: The provider, observer, and parent perspectives. *Early Childhood Research Quarterly, 21*, 93-109.
- La Paro, K. M., Sexton, D., & Snyder, P. (1998). Program quality characteristics in segregated and inclusive early childhood settings. *Early Childhood Research Quarterly, 13*, 151-168.

9. Some evidence suggests that early childhood professionals may not be adequately prepared to serve young children with disabilities enrolled in inclusive programs.

- Buysse, V., Wesley, P. W., Keyes, L., & Bailey, D. B. (1996). Assessing the comfort zone of child care teachers in serving young children with disabilities. *Journal of Early Intervention, 20*(3), 189-204.

- Chang, F., Early, D., & Winton, P. (2005). Early childhood teacher preparation in special education at 2- and 4-year institutions of higher education. *Journal of Early Intervention, 27*, 110-124.
- Dinnebeil, L.A., McInerney, W., Fox, C., & Juchartz-Pendry, K. (1998). An analysis of the perceptions and characteristics of childcare personnel regarding inclusion of young children with special needs in community-based programs. *Topics in Early Childhood Special Education, 18*(2), 118-128.
- Early, D., & Winton, P. (2001). Preparing the workforce: Early childhood teacher preparation at 2- and 4-year institutes of higher education. *Early Childhood Research Quarterly, 16*, 285-306.

Definitions

Inclusion

According to the DEC/NAEYC (2009) joint position statement on early childhood inclusion, “Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities, and society. The desired results of inclusive experiences for children with and without disabilities and their families include a sense of belonging and membership, positive social relationships and friendships, and development and learning to reach their full potential. The defining features of inclusion that can be used to identify high quality early childhood programs and services are access, participation, and supports” (p. 2).

DEC/NAEYC. (2009). *Early childhood inclusion: A joint position statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC)*. Chapel Hill: The University of North Carolina, FPG Child Development Institute. Available at http://community.fpg.unc.edu/resources/articles/Early_Childhood_Inclusion

Primary source

A primary source is a publication reporting results of an original research study that typically appears in a peer-reviewed journal.

Research review or synthesis

A research review or synthesis presents the key conclusions that can be drawn from a review of the literature.

Specialized instruction

Specialized instruction consists of any intervention or instructional approach that is designed to scaffold learning or development for an individual child. Specialized instruction includes embedded interventions (those that occur within the context of daily routines and activities and build on a child's interests and activities) and strategies that are more intensive and individualized (prompting, modeling, physical assistance, giving a directive and waiting for a response).

Specialized program

A specialized program is one that is designed for and serves primarily children with disabilities. In specialized programs, the majority of children enrolled are those with an identified disability who are eligible for special education or early intervention services.

The National Professional Development Center on Inclusion (NPDCI) works with states to help them achieve a system of high quality, cross-sector professional development to support inclusion of young children with disabilities in early childhood settings. NPDCI offers states an integrated, facilitated sequence of planning and technical assistance to develop, implement and monitor a plan for professional development and inclusion, along with tools and products to support state efforts. NPDCI is devoted to collective learning and system improvements in professional development for early childhood inclusion.

NPDCI is a project of the FPG Child Development Institute at the University of North Carolina at Chapel Hill and is funded by the Office of Special Education Programs at the US Department of Education.

Visit <http://community.fpg.unc.edu/npdci> for more information.

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Early Childhood Inclusion

A Joint Position Statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC)

Today an ever-increasing number of infants and young children with and without disabilities play, develop, and learn together in a variety of places – homes, early childhood programs, neighborhoods, and other community-based settings. The notion that young children with disabilities¹ and their families are full members of the community reflects societal values about promoting opportunities for development and learning, and a sense of belonging for every child. It also reflects a reaction against previous educational practices of separating and isolating children with disabilities. Over time, in combination with certain regulations and protections under the law, these values and societal views regarding children birth to 8 with disabilities and their families have come to be known as early childhood inclusion.² The most far-reaching effect of federal legislation on inclusion enacted over the past three decades has been to fundamentally change the way in which early childhood services ideally can be organized and delivered.³ However, because inclusion takes many different forms and implementation is influenced by a

wide variety of factors, questions persist about the precise meaning of inclusion and its implications for policy, practice, and potential outcomes for children and families.

The lack of a shared national definition has contributed to misunderstandings about inclusion. DEC and NAEYC recognize that having a common understanding of what inclusion means is fundamentally important for determining what types of practices and supports are necessary to achieve high quality inclusion. This DEC/NAEYC joint position statement offers a definition of early childhood inclusion. The definition was designed not as a litmus test for determining whether a program can be considered inclusive, but rather, as a blueprint for identifying the key components of high quality inclusive programs. In addition, this document offers recommendations for how the position statement should be used by families, practitioners, administrators, policy makers, and others to improve early childhood services.



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Definition of Early Childhood Inclusion

Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities, and society. The desired results of inclusive experiences for children with and without disabilities and their families include a sense of belonging and membership, positive social relationships and friendships, and development and learning to reach their full potential. The defining features of inclusion that can be used to identify high quality early childhood programs and services are access, participation, and supports.

What is meant by Access, Participation, and Supports?

Access. Providing access to a wide range of learning opportunities, activities, settings, and environments is a defining feature of high quality early childhood inclusion. Inclusion can take many different forms and can occur in various organizational and community contexts, such as homes, Head Start, child care, faith-based programs, recreational programs, preschool, public and private pre-kindergarten through early elementary education, and blended early childhood education/early childhood special education programs. In many cases, simple modifications can facilitate access for individual children. Universal design is a concept that can be used to support access to environments in many different types of settings through the removal of physical and structural barriers. Universal Design for Learning (UDL) reflects practices that provide multiple and varied formats for instruction and learning. UDL principles and practices help to ensure that *every* young child has access to learning environments, to typical home or educational routines and activities, and to the general education curriculum. Technology can enable children with a range of functional abilities to participate in activities and experiences in inclusive settings.

Participation. Even if environments and programs are designed to facilitate access, some children will need additional individualized accommodations and supports to participate fully in play and learning activities with peers and adults. Adults promote belonging, participation, and engagement of children with and without disabilities in inclusive settings in a variety of intentional ways. Tiered models in early childhood hold promise for helping adults organize assessments and interventions by level of intensity. Depending on the individual needs and priorities of young children and families, implementing inclusion involves a range of approaches—from embedded, routines-based teaching to more explicit interventions—to scaffold learning and participation for all children. Social-emotional development and behaviors that facilitate participation are critical goals of high quality early childhood inclusion, along with learning and development in all other domains.

Supports. In addition to provisions addressing access and participation, an infrastructure of systems-level supports must be in place to undergird the efforts of individuals and organizations providing inclusive services to children and families. For example, family members, practitioners, specialists, and administrators should have access to ongoing professional development and support to acquire the knowledge, skills, and dispositions required to implement effective inclusive practices. Because collaboration among key stakeholders (e.g., families, practitioners, specialists, and administrators) is a cornerstone for implementing high quality early childhood inclusion, resources and program policies are needed to promote multiple opportunities for communication and collaboration among these groups. Specialized services and therapies must be implemented in a coordinated fashion and integrated with general early care and education services. Blended early childhood education/early childhood special education programs offer one example of how this might be achieved.⁴ Funding policies should promote the

pooling of resources and the use of incentives to increase access to high quality inclusive opportunities. Quality frameworks (e.g., program quality standards, early learning standards and guidelines, and professional competencies and standards) should reflect and guide inclusive practices to ensure that all early childhood practitioners and programs are prepared to address the needs and priorities of infants and young children with disabilities and their families.

Recommendations for Using this Position Statement to Improve Early Childhood Services

Reaching consensus on the meaning of early childhood inclusion is a necessary first step in articulating the field's collective wisdom and values on this critically important issue. In addition, an agreed-upon definition of inclusion should be used to create high expectations for infants and young children with disabilities and to shape educational policies and practices that support high quality inclusion in a wide range of early childhood programs and settings. Recommendations for using this position statement to accomplish these goals include:

1. ***Create high expectations for every child to reach his or her full potential.*** A definition of early childhood inclusion should help create high expectations for every child, regardless of ability, to reach his or her full potential. Shared expectations can, in turn, lead to the selection of appropriate goals and support the efforts of families, practitioners, individuals, and organizations to advocate for high quality inclusion.
2. ***Develop a program philosophy on inclusion.*** An agreed-upon definition of inclusion should be used by a wide variety of early childhood programs to develop their own philosophy on inclusion. Programs need a philosophy on inclusion as a part of their broader program mission statement to ensure that

practitioners and staff operate under a similar set of assumptions, values, and beliefs about the most effective ways to support infants and young children with disabilities and their families. A program philosophy on inclusion should be used to shape practices aimed at ensuring that infants and young children with disabilities and their families are full members of the early childhood community and that children have multiple opportunities to learn, develop, and form positive relationships.

3. ***Establish a system of services and supports.*** Shared understandings about the meaning of inclusion should be the starting point for creating a system of services and supports for children with disabilities and their families. Such a system must reflect a continuum of services and supports that respond to the needs and characteristics of children with varying types of disabilities and levels of severity, including children who are at risk for disabilities. However, the designers of these systems should not lose sight of inclusion as a driving principle and the foundation for the range of services and supports they provide to young children and families. Throughout the service and support system, the goal should be to ensure access, participation, and the infrastructure of supports needed to achieve the desired results related to inclusion. Ideally, the principle of natural proportions should guide the design of inclusive early childhood programs. The principle of natural proportions means the inclusion of children with disabilities in proportion to their presence in the general population. A system of supports and services should include incentives for inclusion, such as child care subsidies, and adjustments to staff-child ratios to ensure that program staff can adequately address the needs of every child.

4. *Revise program and professional standards.* A definition of inclusion could be used as the basis for revising program and professional standards to incorporate high quality inclusive practices. Because existing early childhood program standards primarily reflect the needs of the general population of young children, improving the overall quality of an early childhood classroom is necessary, but might not be sufficient, to address the individual needs of every child. A shared definition of inclusion could be used as the foundation for identifying dimensions of high quality inclusive programs and the professional standards and competencies of practitioners who work in these settings.

5. *Achieve an integrated professional development system.* An agreed-upon definition of inclusion should be used by states to promote an integrated system of high quality professional development to support the inclusion of young children with and without disabilities and their families. The development of such a system would require strategic planning and commitment on the part of families and other key stakeholders across various early childhood sectors (e.g., higher education, child care, Head Start, public pre-kindergarten, pre-school, early intervention, health care, mental health). Shared assumptions about the meaning of inclusion are critical for determining

who would benefit from professional development, what practitioners need to know and be able to do, and how learning opportunities are organized and facilitated as part of an integrated professional development system.

6. *Influence federal and state accountability systems.* Consensus on the meaning of inclusion could influence federal and state accountability standards related to increasing the number of children with disabilities enrolled in inclusive programs. Currently, states are required to report annually to the U.S. Department of Education the number of children with disabilities who are participating in inclusive early childhood programs. But the emphasis on the prevalence of children who receive inclusive services ignores the quality and the anticipated outcomes of the services that children experience. Furthermore, the emphasis on prevalence data raises questions about which types of programs and experiences can be considered inclusive in terms of the intensity of inclusion and the proportion of children with and without disabilities within these settings and activities. A shared definition of inclusion could be used to revise accountability systems to address both the need to increase the number of children with disabilities who receive inclusive services and the goal of improving the quality and outcomes associated with inclusion.

Endnotes

- 1 Phrases such as “children with special needs” and “children with exceptionalities” are sometimes used in place of “children with disabilities.”
- 2 The term “inclusion” can be used in a broader context relative to opportunities and access for children from culturally and linguistically diverse groups, a critically important topic in early childhood requiring further discussion and inquiry. It is now widely acknowledged, for example, that culture has a profound influence on early development and learning, and that early care and education practices must reflect this influence. Although this position statement is more narrowly focused on inclusion as it relates to disability, it is understood that children with disabilities and their families vary widely with respect to their racial/ethnic, cultural, economic, and linguistic backgrounds.
- 3 In accordance with the Individuals with Disabilities Education Act (IDEA), children ages 3-21 are entitled to a free, appropriate public education (FAPE) in the least restrictive environment (LRE). LRE requires that, to the extent possible, children with disabilities should have access to the general education curriculum, along with learning activities and settings that are available to their peers without disabilities. Corresponding federal legislation applied to infants and toddlers (children birth to 3) and their families specifies that early intervention services and supports must be provided in “natural environments,” generally interpreted to mean a broad range of contexts and activities that generally occur for typically developing infants and toddlers in homes and communities. Although this document focuses on the broader meaning and implications of early childhood inclusion for children birth to eight, it is recognized that the basic ideas and values reflected in the term “inclusion” are congruent with those reflected in the term “natural environments.” Furthermore, it is acknowledged that fundamental concepts related to both inclusion and natural environments extend well beyond the early childhood period to include older elementary school students and beyond.
- 4 Blended programs integrate key components (e.g., funding, eligibility criteria, curricula) of two or more different types of early childhood programs (e.g., the federally funded program for preschoolers with disabilities [Part B-619] in combination with Head Start, public pre-k, and/or child care) with the goal of serving a broader group of children and families within a single program.

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http://community.fpg.unc.edu/resources/articles/Early_Childhood_Inclusion

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Foundations of Inclusion Policy Advisory: Rights for Children, Parents, and Teachers Related to Inclusion

Children's rights under the American with Disabilities Act (ADA), 1990, include the following:
(Source: Child Care Law Center, 2001, <http://www.childcarelaw.org/>)

- Children with disabilities are entitled to equal access to all early childhood (Head Start and preschool programs) and child care facilities (center-based and family child care).
- Programs cannot create eligibility standards that discriminate against or screen out children with disabilities.
- Programs must make reasonable accommodations on an individual basis to allow everyone to participate in the services and opportunities offered

Parents' rights under Individuals with Disabilities Education Improvement Act (IDEA) include the following: (Source: National Dissemination Center for Children with Disabilities, 2010, <http://nichcy.org/>)

- Parents have meaningful opportunities to participate in all decisions made about their children's education and services.
- Parents are guaranteed certain procedural safeguards that protect their rights and provide a mechanism to use to resolve any disputes about services or programs. These safeguards include:
 - ✓ Complete explanation of all the procedural safeguards available under IDEA and the procedures in the state for presenting complaints
 - ✓ Confidentiality and the right of parents to inspect and review the educational records of their child
 - ✓ The right of parents to participate in meetings related to the identification, evaluation, and placement of their child
 - ✓ The right of parents to obtain an independent educational evaluation (IEE) of their child
 - ✓ The right of parents to receive "prior written notice" on matters relating to the identification, evaluation, or placement of their child
 - ✓ The right of parents to give or deny their consent before the school may take certain action with respect to their child
 - ✓ The right of parents to disagree with decisions made by the school system on those issues
 - ✓ The right of parents and schools to use IDEA's mechanisms for resolving disputes, including the right to appeal determinations

Early Childhood teachers' rights, responsibilities, and expectations for support include the following: (For audio information see CONNECT Module 1, Activity Guide 1.10a, Rud Turnbull audio, <http://community.fpg.unc.edu/sites/community.fpg.unc.edu/files/resources/activity-guides/CONNECT-Activity-Guide-1-10a.pdf>)

- Teachers have the right to participate in Individualized Education Plan (IEP) meetings.
- Teachers are encouraged to confer with parents and colleagues (and have an obligation to report progress to parents as often as she would report the progress of her typically developing students).
- Teachers can suggest a re-evaluation to determine if different services and education are needed.
- If different services and education are recommended through a re-evaluation, teachers can ask for the IEP to be amended accordingly.
- Teachers should expect to receive support from administrators and colleagues.
- Teachers should expect to have professional development related to inclusion

For more information on legal rights see the following

- **Child Care Law Center**
<http://www.childcarelaw.org>
- **National Dissemination Center for Children with Disabilities (NICHCY)**
<http://nichcy.org/>
- **Center for Community Inclusion and Disability Studies (CCIDS)**
<http://ccids.umaine.edu/files/2013/05/laws-tip-040813.pdf>

Suggested citation

Center to Mobilize Early Childhood Knowledge (CONNECT). (2013). *Foundations of inclusion policy advisory: Rights for children, parents and teachers related to inclusion*. Chapel Hill: The University of North Carolina, Frank Porter Graham Child Development Institute, Author.

GROWING IDEAS

Admissions Policies and Practices that Build Inclusive Child Care Communities (for Providers)

Quality inclusive child care settings include children with disabilities and health, behavioral or mental health concerns. Admissions policies that clearly state eligibility criteria, practices, program and parent and/or guardian responsibilities, can help families evaluate if the program will be a good match for their child.

Providers may want to obtain legal advice to be sure their policy and procedures align with relevant federal and state laws and regulations.

Why is an admissions policy important for quality inclusive child care programs? The policy:

- describes and clarifies a program's philosophy, values, beliefs and practices;
- aligns with recommendations from quality improvement and accreditation standards for professional practices;
- shares plans and procedures to provide care for diverse learners; and
- shows compliance with state and federal laws protecting the rights of children to be included.

What might an admissions policy reflecting an inclusive philosophy contain?

- Essential **eligibility criteria**, such as ages served and ability to participate in group care, for example. The Americans with Disabilities Act (ADA) guarantees that children with disabilities who meet the eligibility criteria cannot be excluded simply because of a disability.
- Statement of commitment to the principles of the ADA. "We provide reasonable **accommodations** when needed."
- A description of program activities, discipline/guidance, transition/dismissal, confidentiality, medication administration, emergency management and parent involvement policies.
- Communication strategies to partner with families to support a child's inclusion and participation.
- Nondiscrimination and confidentiality statements.

Please note: terms in bold are defined in the glossary on page 3 of this tipsheet.



What does the ADA say about admissions policies?

- Child care programs must not have eligibility criteria that screen out children with physical or mental disabilities.
- Providers may not ask parents looking for child care, "Does your child have a disability?" An allowable question: "Can your child meet the eligibility criteria of the program with or without **reasonable modification**?"
- Providers may not refuse to serve children with disabilities because they believe their insurance costs will be increased.

Modifying policies and practices:

If the parent identifies that their child has a disability and asks that reasonable modifications and accommodations be made, providers can meet with the family to do the following:

- Request relevant medical documentation identifying the disability, limitations and resulting need for reasonable modification.
- Identify ways the program's policies, procedures and practices may be modified to accommodate the child (example: a provider may alter a set snack schedule to provide a child with diabetes snacks on an individualized schedule).
- Evaluate modification requests on a *case-by-case, individualized basis* because every child is different. Two children with the same diagnosis may have very different behaviors and/or needs.

Accommodations can be simple, such as arranging furniture to allow wheelchair access or providing a calm, quiet space.

When a program cannot accommodate a child, providers should document...

- a good faith effort was made to enroll the child or maintain the child's participation;
- an individualized assessment of the child considered the particular activities of the program and actual abilities and disabilities of the child;
- that necessary care would cause a **direct threat** or **fundamental alteration** to the nature of the child care program; or providing **auxiliary aids** or services for effective communication would constitute an undue burden for the provider.

The admissions process is a give-and-take experience. Parents and/or guardians know their child best. Providers know their program and the benefits and challenges of group care. When child care providers take the time to develop and follow an admissions policy, it sets the stage for making informed, nondiscriminatory decisions about what is best for each child.

Disclaimer: This information is for broad educational purposes only. It is not and does not take the place of legal advice for any specific situation nor is it offered as such.

Where to learn more:

See "[Admissions Policies and Practices that Build Inclusive Child Care Communities — Learning Links](http://ccids.umaine.edu/resources/ec-growingideas/admissionsII/)" online at <http://ccids.umaine.edu/resources/ec-growingideas/admissionsII/>

Please note: terms in bold are defined in the glossary on page 3 of this tipsheet.



Glossary

accommodations - an effort to structure or arrange the environment so that an individual with a disability can experience the social or physical space in a meaningful way. *Example: arrange tables to allow space for a child in a wheel chair.*

auxiliary aids - providing a qualified interpreter, FM system or other effective method(s) of communication to assist individuals with hearing impairments.

direct threat - a significant risk to the health or safety of others that cannot be eliminated by a modification of policies, practices, or procedures or by the provision of auxiliary aids or services.

eligibility criteria - those requirements imposed by a child care program to determine admission to the program of all children. *Example: ages served.*

fundamental alteration - a change in the basic nature of the services offered by a program. A program does not need to change the nature or mix of goods that it typically offers to the public to allow accessibility by an individual with a disability. For example, a bookstore must be physically accessible to individuals with disabilities, but is not required to stock large print or Braille books.

reasonable modification - a modification in policies, practices, or procedures necessary to afford such goods, services, facilities, privileges, advantages, or accommodations to individuals with disabilities, unless the entity can demonstrate that making such modifications would fundamentally alter the nature of such goods, services, facilities, privileges, advantages, or accommodations. *An example of a reasonable modification could be a program's modification of their toileting policy to accommodate the needs of a child with a disability. This would not fundamentally alter the nature of the program.*

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Research Synthesis Points on Quality Inclusive Practices



In April, 2009, two national organizations working on behalf of young children—the Division for Early Childhood of the Council for Exceptional Children (DEC) and the National Association for the Education of Young Children (NAEYC)—completed two years of historic and collaborative work with the release of a joint position statement on inclusion¹. This document provides brief descriptions and supporting references for the evidence-based and promising practices that support early childhood inclusion. These practices are organized into three major sections corresponding to the defining features of high quality early childhood inclusion as described in the joint position statement:

Access—removing physical barriers, providing a wide range of activities and environments, and making necessary adaptations to create optimal development and learning for individual children;

Participation—using a range of instructional and intervention approaches to promote engagement in play and learning activities, and a sense of belonging for every child; and

Supports—creating an infrastructure of systems-level supports for implementing high-quality inclusion.

Citations for each practice include best available research in the form of research reviews or syntheses or, when a summary of the research does not exist, the most recent and relevant individual studies evaluating specific practices. It should be noted that this document does not include an exhaustive list of existing research studies on every practice, nor do all promising practices have a supporting body of rigorous research evidence. This document may be used in a variety of contexts, including professional development, policy development, planning, advocacy, and grant writing.

¹ DEC/NAEYC. (2009). *Early childhood inclusion: A joint position statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC)*. Chapel Hill: The University of North Carolina, FPG Child Development Institute.

Practices that Support Access

Universal Design (UD)/Universal Design for Learning (UDL)

UD and UDL support access to early care and education environments through the removal of physical and structural barriers (UD) and the provision of multiple and varied formats for instruction and learning (UDL).²

National Center on Universal Design for Learning. UDL Guidelines - Version 2.0: Research Evidence. <http://www.udlcenter.org/research/researchevidence>

Assistive Technology (AT)

AT interventions involve a range of strategies to promote a child's access to learning opportunities, from making simple changes to the environment and materials to helping a child use special equipment. Combining AT with effective teaching promotes the child's participation in learning and relating to others.³

Campbell, P. H., Milbourne, S., Dugan, L. M., & Wilcox, M. J. (2006). A review of evidence on practices for teaching young children to use assistive technology devices. *Topics in Early Childhood Special Education*, 26(1), 3-13.

Trivette, C. M., Dunst, C. J., Hamby, D. W., & O'Herin, C. E. (2010). Effects of different types of adaptations on the behavior of young children with disabilities. *Tots n Tech Research Institute. Research Brief* 4(1). http://tnt.asu.edu/files/Adaptations_Brief_final.pdf

Practices that Support Participation

Embedded Instruction and Other Naturalistic Interventions

Embedded instruction and intervention strategies address specific developmental or learning goals within the context of everyday activities, routines, and transitions at home, at school, or in the community.⁴

Snyder, P., Rakap, S., Hemmeter, M. L., McLaughlin, T., Sandall, S., & McLean, M. (2011). *Naturalistic instructional approaches in early learning*. Manuscript submitted for publication.

Trivette, C. M., Dunst, C. J., Hamby, D. W., & O'Herin, C. E. (2010). Effects of different types of adaptations on the behavior of young children with disabilities. *Tots n Tech Research Institute. Research Brief* 4(1). http://tnt.asu.edu/files/Adaptations_Brief_final.pdf

² No research syntheses or published peer-reviewed studies are available for appraising the evidence related to universal design or universal design for learning prior to kindergarten. The citation included is a school-aged example.

³ Winton, P. J., Buysse, V., Rous, B., Epstein, D., & Pierce, P. (2010). *CONNECT Module 5: Assistive technology interventions*. Chapel Hill: The University of North Carolina, FPG Child Development Institute, CONNECT: The Center to Mobilize Early Childhood Knowledge.

⁴ Winton, P. J., Buysse, V., Turnbull, A., Rous, B., & Hollingsworth, H. (2010). *CONNECT Module 1: Embedded interventions*. Chapel Hill: The University of North Carolina, FPG Child Development Institute, CONNECT: The Center to Mobilize Early Childhood Knowledge.

Scaffolding Strategies

Scaffolding strategies are structured, targeted approaches that can be used with children who require more intensive supports across a wide variety of teaching and learning contexts, and in combination with other approaches. Scaffolding strategies include modeling, response prompting, variations of prompting and modeling, peer supports, and corrective feedback.^{5, 6}

- Chiara, L., Schuster, J. W., Bell, J. K., & Wolery, M. (1995). Small-group massed-trial and individually distributed-trial instruction with preschoolers. *Journal of Early Intervention, 19*, 203-217.
- Craig-Unkefer, L. A., & Kaiser, A. P. (2002). Improving the social communication skills of at-risk preschool children in a play context. *Topics in Early Childhood Special Education, 22*, 3-13.
- Gibson, A. N., & Schuster, J. W. (1992). The use of simultaneous prompting for teaching expressive word recognition to preschool children. *Topics in Early Childhood Special Education, 12*, 247-267.
- Girolametto, L., Weitzman, E., & Greenberg, J. (2004). The effects of verbal supports on small-group peer interactions. *Language, Speech, and Hearing Services in Schools, 35*, 254-268.
- Hawkings, S. R., & Schuster, J. W. (2007). Using a mand-model procedure to teach preschool children initial speech sounds. *Journal of Developmental and Physical Disabilities, 19*(1), 65-80.
- Kaiser, A. P., Hemmeter, M. L., & Ostrosky, M. M. (1996). The effects of teaching parents to use responsive interaction strategies. *Topics in Early Childhood Special Education, 16*, 375-406.
- Kaiser, A. P., Hester, P. P., & McDuffie, A. S. (2001). Supporting communication in young children with developmental disabilities. *Mental Retardation and Developmental Disability Research Reviews, 7*, 143-150.
- Kouri, T. A. (2005). Lexical training through modeling and elicitation procedures with late talkers who have specific language impairment and developmental delays. *Journal of Speech, Language, and Hearing Research, 48*, 157-171.
- Ostrosky, M., & Kaiser, A. P. (1995). The effects of a peer-mediated intervention on the social communicative interactions between children with and without special needs. *Journal of Behavioral Education, 5*(2), 151-171.
- Ross, D. E., & Greer, R. D. (2003). Generalized imitation and the mand: Inducing first instances of speech in young children with autism. *Research in Developmental Disabilities, 24*, 58-74.
- Walker, G. (2008). Constant and progressive time delay procedures for teaching children with autism: A literature review. *Journal of Autism and Developmental Disorders, 38*, 261-275.

⁵ Recent and relevant individual studies evaluating specific practices are listed because research reviews, syntheses, or summaries are not currently available.

⁶ Buysse, V. (2011). Access, participation, and supports: The defining features of high-quality inclusion. *Zero to Three, 31*(4), 24-31.

Tiered Models of Instruction/Intervention

Tiered models of instruction offer a framework that can be used in early childhood to help practitioners connect children's formative assessment results with specific teaching and intervention strategies.^{7, 8, 9, 10}

Burns, M. K., Appleton, J. J., & Stehouwer, J. D. (2005). Meta-analytic review of responsiveness-to-intervention research: Examining field-based and research-implemented models. *Journal of Psychoeducational Assessment*, 23(4), 381-394.

Gersten, R., Beckman, S., Clarke, B., Foegen, A., Marsh, L., Star, J. R., & Witzel, B. (2009). Assisting students struggling with mathematics: Response to intervention (RTI) for elementary and middle schools (NCEE 2009-4060). Washington, DC: U.S. Department of Education, Institute of Education Sciences, National Center for Education Evaluation and Regional Assistance. Retrieved from <http://ies.ed.gov/ncee/wwc/publications/practiceguides/>

Gersten, R., Compton, D., Connor, C. M., Dimino, J., Santoro, L., Linan-Thompson, S., & Tilly, W. D. (2008). Assisting students struggling with reading: Response to intervention and multi-tier intervention for reading in the primary grades. A practice guide. (NCEE 2009-4045). Washington, DC: U.S. Department of Education, Institute of Education Sciences, National Center for Education Evaluation and Regional Assistance. Retrieved from <http://ies.ed.gov/ncee/wwc/publications/practiceguides/>

Practices Relating to Systems-Level Supports

Professional Development (PD)

PD includes teaching and learning activities designed to support the acquisition of professional knowledge, skills, and dispositions related to inclusion as well as the application of this knowledge in practice. The content of the PD should include evidence-based practices that define high-quality early childhood inclusion.^{11, 12}

Cochran-Smith, M., & Zeichner, K. (2005). Executive summary. In M. Cochran-Smith & K. M. Zeichner (Eds.), *Studying teacher education: The report of the AERA panel on research and teacher education* (pp. 1-36). Mahwah, NJ: Erlbaum.

Trivette, C. M., Dunst, C. J., Hamby, D. W., & O'Herin, C. E. (2009). Characteristics and consequences of adult learning methods and strategies. *Winterberry Research Synthesis*, 2(2). Retrieved from http://www.signetwork.org/content_page_assets/content_page_66/adult%20learning%20Trivette%20and%20Dunst.pdf

7 Buysse, V., & Peisner-Feinberg, E. (2010). Recognition & response: RTI for pre-k. *Young Exceptional Children*, 13(4), 2-13.

8 Hemmeter, M. L., Ostrosky, M., & Fox, L. (2006). Social and emotional foundations for early learning: A conceptual model for intervention. *School Psychology Review*, 35(4), 583-601.

9 Greenwood, C. R., Bradfield, T., Kaminski, R., Linas, M. W., Carta, J. J., & Nylander, D. (2011). The response to (RTI) approach in early childhood. *Focus on Exceptional Children*, 43(9), 1-22.

10 No research syntheses or published peer-reviewed studies are available for appraising the evidence of tiered models of instruction/intervention and to monitor progress in young children prior to kindergarten. The citations included are school-aged examples.

11 National Professional Development Center on Inclusion. (2008). *What do we mean by professional development in the early childhood field?* Chapel Hill: The University of North Carolina, FPG Child Development Institute, Author.

12 Because very few syntheses address professional development in early childhood, most of these citations are drawn from studies across different ages, disciplines, and content areas.

Wei, R. C., Darling-Hammond, L., Andree, A., Richardson, N., & Orphanos, S. (2009). *Professional learning in the learning profession: A status report on teacher development in the United States and abroad*. Dallas, TX: National Staff Development Council.

Whitehurst, G. J. (2002, March 5). Research on teacher preparation and professional development. Address to the White House Conference on Preparing Tomorrow's Teachers. Retrieved from <http://www2.ed.gov/admins/tchrqual/learn/preparingteachersconference/whitehurst.html>

Zaslow, M., Tout, K., Halle, T., Whittaker, J. E., & Lavelle, B. (2010). *Toward the identification of features of effective professional development for early childhood educators: Literature review*. Washington, DC: US Department of Education.

Models of Collaboration

A variety of approaches have been developed to support ongoing communication and collaboration in conjunction with quality improvement and professional development in early childhood (and education more broadly). These include technical assistance, consultation, coaching, mentoring, collaborative problem-solving, and communities of practice/professional learning communities.¹³

Sheridan, S. M., Welch, M., & Orme, S. F. (1996). Is consultation effective? A review of outcome research. *Remedial and Special Education*, 17(6), 341-354.

Family-Professional Collaboration

Family-professional collaboration builds opportunities for both relationship building and the active participation of parents and practitioners in achieving mutually agreed upon goals. The collaborative efforts build and strengthen family and professional capacity to provide or mediate the provisions of resources, supports, and services that ensure inclusion of children with disabilities in typical school and community activities.^{14,15}

Dunst, C. J., & Trivette, C. M. (2009). Meta-analytic structural equation modeling of the influences of family-centered care on parent and child psychological health. *International Journal of Pediatrics*, 2009, 1-9.

Dunst, C. J., Trivette, C. M., & Hamby, D. W. (2007). Meta-analysis of family-centered helping practices research. *Mental Retardation and Developmental Disabilities Research Reviews*, 13(4), 370-378.

Trivette, C. M., Dunst, C. J., & Hamby, D. W. (2010). Practices on parent-child interactions and child development. *Topics in Early Childhood Special Education*, 30(1), 3-19.

¹³ No research syntheses or published peer-reviewed studies are available for appraising evidence related to using models of collaboration with personnel serving young children prior to kindergarten. The citation included is a school-aged example.

¹⁴ Dunst, C. J., Trivette, C. M., & Snyder, D. M. (2000). Family-professional partnerships: A behavioral science perspective. In M. J. Fine & R. L. Simpson (Eds.), *Collaboration with parents and families of children and youth with exceptionalities* (2nd ed., pp. 27-48). Austin, TX: Pro-Ed.

¹⁵ Turnbull, A., & Turnbull, R. (2010). *Families, professionals, and exceptionality: Positive outcomes through partnerships and trust* (6th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.

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<http://community.fpg.unc.edu/npdci>

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FPG is one of the nation's oldest multidisciplinary centers devoted to the study of children and families. Our mission is to cultivate and share knowledge that enhances child development and family well being. **FPG.**
Advancing knowledge.
Enhancing lives.

Finding Inclusion Partners: Websites that Help

North Carolina Specific Websites

Exceptional Children's Assistance Center (ECAC)

<http://www.ecac-parentcenter.org/>

ECAC provides services and support across NC to parents, families, students, educators and other professionals.

N.C. Infant-Toddler Program (ITP)

<http://www.beeearly.nc.gov/index.php/>

The Infant-Toddler Program provides supports and services for families and their children, birth to three who have special needs. Download a brochure with information on services available for infants and toddlers in NC. The brochure includes contact information for the eighteen Children's Developmental Services Agencies (CDSAs) across North Carolina that work with local service providers to help families help their children succeed.

NC Preschool Exceptional Children's Program

<http://www.earlylearning.nc.gov/PreKindergarten/PreschoolEC/indexNEW08.asp>

Since 1991, the Public Schools of North Carolina have entitled all three- four- and pre-k five-year-old children with disabilities a free and appropriate public education mandated through the federal Individuals with Disabilities Education Act (IDEA), Part B, Section 619 legislation. This site provides information about these services, how to make a referral, and who to contact for more information. Family resources are also available.

Other Websites

Child Care plus+.

<http://www.ccplus.org/>

Child Care plus+: The Center on Inclusion in Early Childhood of the University of Montana Rural Institute provides training, technical assistance, and resources to support inclusion of young children with disabilities in early childhood programs. Back issues of their extremely helpful and easily readable newsletter are available on the website.

Child Care Settings and the Americans with Disabilities Act (ADA).

<http://www.thearc.org/faqs/ecqa.html/>

This site explains the provisions of the ADA and how they affect child care. It includes definitions of terms and resources to support inclusion.

Disability is Natural

<http://www.disabilityisnatural.com>

This is a great resource on "people first" language, including a one-page handout or longer articles.

CONNECT – 2013

<http://community.fpg.unc.edu>

Finding Inclusion Partners: Websites that Help

Division for Early Childhood (DEC) of the Council of Exceptional Children.

<http://www.dec-spед.org/>

DEC is a nonprofit organization advocating for individuals who work with or on behalf of children with special needs. Policies, position statements, concept papers, and recommended practices are on this site.

Head Start Early Childhood Learning and Knowledge Center (ECLKC)

<http://eclkc.ohs.acf.hhs.gov/hslc>

This site has great resources on many topics. Use the search tool and the terms “children with disabilities” for resources on making adaptations or “early intervention” for resources to support families to understand their rights and ideas on what teachers can do to support learning for all children.

The Early Childhood Technical Assistance Center (ECTA Center)

<http://ectacenter.org/>

ECTA is the national TA provider for early intervention. Their site includes information on the components of Part C, contact people and agencies in every state, topical pages, and ideas to support inclusion.

National Information Center for Children and Youth with Disabilities (NICHY)

<http://www.kidsource.com/NICHCY/>

NICHY is a great source for information on specific disabilities, articles for families, and links to other agencies and organizations.

Technical Assistance Center on Social Emotional Intervention (TACSEI)

<http://challengingbehavior.fmhi.usf.edu/>

This site has extensive resources for families, teachers and those providing support to programs working to implement Pyramid Model practices to support social emotional competence in all children.

Zero to Three: The National Center for Infants, Toddlers, and Families.

<http://www.zerotothree.org>

Zero to Three has full-length articles for parents and professionals. Use their search tool for specific topics of interest, including screening and assessment practices, early intervention policy, etc.

Prepared by Lanier DeGrella, Manager, *Statewide Infant/Toddler Project*, North Carolina Child Care Services Association, 2013. Updated by CONNECT, August 2014.

CONNECT – 2013

<http://community.fpg.unc.edu>

“I Have This Child...”

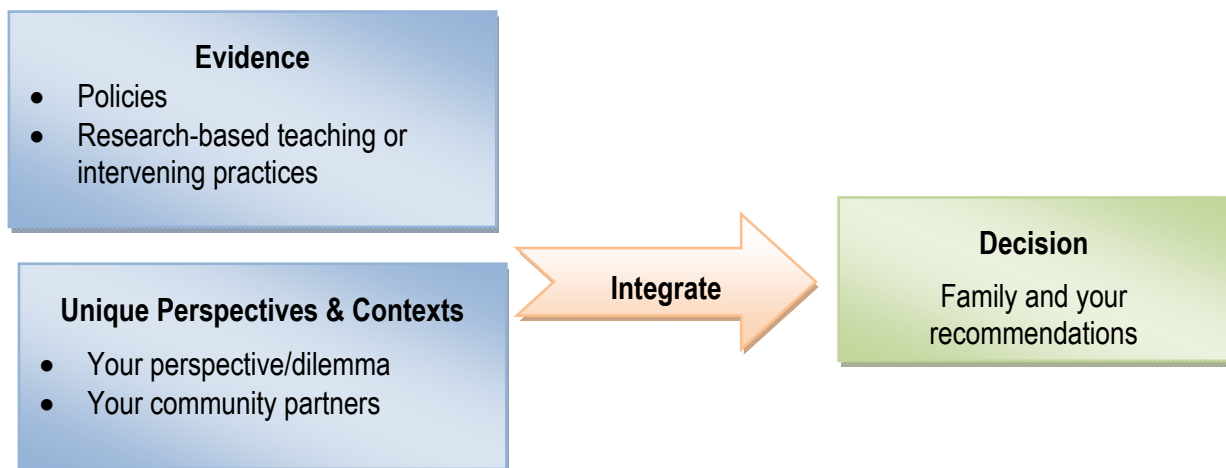
Name

Date

Dilemma

What is your biggest dilemma(s) related to challenges you face every day working with children with disabilities?

Use the framework below to come to an evidence-based practice decision about using the resources from this workshop to help with your dilemma.



Is there a particular child who would be challenging to serve in your program or classroom now because of his / her developmental or educational needs? Integrate the evidence with your unique context and dilemma, and create an action plan using the following guiding questions:

- Identify the rights and responsibilities of children, families, and teachers according to the laws and policies related to this dilemma.

Foundations of Inclusion Action Planning Form

- b. Identify possible research-based teaching or intervening practices that you might implement to promote this child's developing and learning and support families.

- c. Identify community partners (e.g., early childhood specialists, TA practitioners, advocates) that might help you with this dilemma.

- d. What additional information and support do you need in order to implement this plan?

- e. How will you carry out this plan? What do you need to do next to implement this plan?

Foundations of Inclusion Pre-Workshop Survey – Learner Version

I. Content related to early childhood inclusion

Please fill in the blanks with the appropriate terms / words.

1. The National Association for the Education of Young Children (NAEYC) and _____ developed and validated a definition of inclusion.
2. The early childhood definition of inclusion includes three essential features: _____, _____, and _____.
3. Under the _____, children with disabilities are entitled to equal access to all early childhood (Head Start and preschool programs) and child care facilities (center-based and family child care).
4. Under the _____, parents have the right to participate in meetings related to the identification, evaluation, and placement of their child.
5. Teachers have the right to participate in _____ meetings.
6. _____ interventions involve a range of strategies to promote a child's access to learning opportunities, from making simple changes to the environment and materials to helping a child use special equipment.
7. Scaffolding strategies, tiered models of instruction / intervention and embedded interventions are research-based practices that support children's _____ in learning opportunities.
8. There are 3 steps an early childhood teacher can take to encourage inclusion in their program: understand the laws, create inclusive _____ policies, and work with colleagues to better develop the skills needed to care for children with disabilities.
9. Identify at least one resource for getting professional development on inclusion online: _____.

Foundations of Inclusion Post-Workshop Survey – Learner Version

I. Content related to early childhood inclusion

Please fill in the blanks with the appropriate terms / words.

1. The National Association for the Education of Young Children (NAEYC) and _____ developed and validated a definition of inclusion.
2. The early childhood definition of inclusion includes three essential features: _____, _____, and _____.
3. Under the _____, children with disabilities are entitled to equal access to all early childhood (Head Start and preschool programs) and child care facilities (center-based and family child care).
4. Under the _____, parents have the right to participate in meetings related to the identification, evaluation, and placement of their child.
5. Teachers have the right to participate in _____ meetings.
6. _____ interventions involve a range of strategies to promote a child's access to learning opportunities, from making simple changes to the environment and materials to helping a child use special equipment.
7. Scaffolding strategies, tiered models of instruction / intervention and embedded interventions are research-based practices that support children's _____ in learning opportunities.
8. There are 3 steps an early childhood teacher can take to encourage inclusion in their program: understand the laws, create inclusive _____ policies, and work with colleagues to better develop the skills needed to care for children with disabilities.
9. Identify at least one resource for getting professional development on inclusion online: _____.

II. Workshop Evaluation

Rate the workshop on the following characteristics on a scale of 1-5 with "1" being "Strongly Disagree" and "5" being "Strongly Agree".

Statement	1 (Strongly Disagree)	2 (Disagree)	3 (Neither agree or disagree)	4 (Agree)	5 (Strongly Agree)
My perspectives, viewpoints and past experiences were elicited and valued.					
I engaged in active learning opportunities.					
I was encouraged to reflect, question, and expand upon what I learned.					
I was able to establish and maintain personal learning plans and goals.					
I had an opportunity to apply and / or practice what I learned in a meaningful way or context.					
I was able to get feedback and learn from my application of content.					
The organization of the information was of high quality.					
The presentation of the information was of high quality.					
The information provided was relevant to my work.					
The information provided was useful for my work.					
I gained a better overall understanding about early childhood inclusion.					
I would recommend this workshop to my colleagues and other early childhood professionals.					

Were there any topics or resources at this workshop which you would like additional information?

Please share any comments/feedback/suggestions on the content, format or logistics of this workshop.

Did you have a question during the workshop you didn't get to ask? Please share your question(s) here with your contact information if you'd like us to connect with you.

Thank you for your time!!

Answer Key to Content Related to Early Childhood Inclusion

1. Division for Early Childhood (DEC)
2. Access, participation and supports
3. American with Disabilities Act (ADA)
4. Individuals with Disabilities Act (IDEA)
5. Individualized Educatio Program (IEP)
6. Assistive technology (AT)
7. Participation
8. Admission
9. Answer could include CONNECT courses

Pre-Workshop Survey:

My knowledge of:

1. What inclusion in the early childhood setting means is:

2. Strategies to support children with disabilities is:

3. Laws and policies supporting inclusion in early childhood settings is:

4. The rights of children, families, and teachers in inclusive early childhood settings is

Limited		Good		Very Good		Excellent
1	2	3	4	5	6	7

Post-Workshop Survey:

My knowledge of:

1. What inclusion in the early childhood setting means is:

2. Strategies to support children with disabilities is:

3. Laws and policies supporting inclusion in early childhood settings is:

4. The rights of children, families, and teachers in inclusive early childhood settings is

Limited		Good		Very Good		Excellent
1	2	3	4	5	6	7

5. One new idea or fact I learned today is: _____

6. One new strategy I will use to support inclusion after today’s training is: _____

Foundations of Inclusion Glossary



Access - one of the defining features of inclusion, access means providing a wide range of activities and environments for every child by removing physical barriers and offering multiple ways to promote learning and development

Americans with Disabilities Act (ADA) - a wide-ranging civil rights law that prohibits, under certain circumstances, discrimination based on disability. It affords similar protections against discrimination to Americans with disabilities as the Civil Rights Act of 1964

Evidence-based practice - specific practices that have been found to be effective (or promising) through research

Inclusion - the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities, and society

Individualized Education Program (IEP) - a written education plan for a child with disabilities (ages 3-21) developed by a team of professionals (e.g., teachers, therapists) and the child's parents; it is reviewed and updated yearly and describes how the child is presently doing, what the child's learning needs are, and what services the child will need

Individualized Family Service Plan (IFSP) - a written plan for an infant or toddler with disabilities (birth-3) developed by a team of professionals (e.g., teachers, therapists) and the child's family; it is reviewed and updated yearly and describes how the child is presently doing, what the child's learning needs are, and what services the child will need

Individuals with Disabilities Education Act (IDEA) - the law ensuring special education services to children with disabilities; IDEA governs how states and public agencies provide early intervention, special education, and related services

NAEYC - the National Association for the Education of Young Children, the major professional organization for early childhood educators

Participation - one of the defining features of inclusion, participation means using a range of instructional approaches to promote engagement in play and learning activities, and a sense of belonging for every child

Policy - serves as the foundation for a course of action to be taken at the federal, state, or local level. Policy making has four main components

Research Synthesis - is the result of a systematic analysis of multiple published studies on a particular topic or practice that meet specific criteria (e.g., evaluate a specific practice for a specific age group).

Supports - one of the defining features of inclusion, supports refer to broader aspects of the system such as professional development, incentives for inclusion, and opportunities for communication and collaboration among families and professionals to assure high quality inclusion