Inclusion and early childhood intervention – the whys and wherefores

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This webinar explores the nature and rationale for the inclusion of children with developmental disabilities in early childhood services, and how participation in early childhood education programs functions as a form of early childhood intervention. It also includes an update on research and practice evidence, with a discussion of principles of universal design and tiered response systems.

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Inclusion and early childhood intervention
– the whys and wherefores

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NEEDS OF CHILDREN WITH DEVELOPMENTAL DISABILITIES

- Children with developmental disabilities have the same needs as all children – needs for attachment, nurturance, emotional responsiveness, care, safety and security etc.
- These crucial relationships qualities have the same impact on their development as they do on other children
- However, children with disabilities may have difficulty having these needs realised because of the nature of their disabilities – they may initiate interactions less frequently and give cues that are more subtle and difficult to read
- Children with disabilities may also have reduced access to the range of environments and experiences that other children have, and fewer opportunities to participate
- The principal way in which children learn is through what Mahoney (2013) calls massive practice, that is, having multiple opportunities to practice functional skills in everyday settings
- Performance improves with practice, and hence a major aim should be to provide as many opportunities as possible to actively practice key skills
- This is best achieved by capitalising on the naturally occurring opportunities that arise in everyday home and community settings.

- To help children with disabilities develop and learn, families need the support of *early childhood intervention services*, and children need the experience of inclusion and meaningful participation in mainstream early childhood settings

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RETHINKING DEVELOPMENTAL DISABILITIES AND DELAYS

There are two models for framing developmental disabilities:

- The *medical model of disability* identifies and describes disability based on categories, such as deafness or intellectual disability, and sees disability as a condition that resides in the child.

- It also masks the extreme variation within each category: although disability lies at one end of a continuum of human functioning, we see large differences among children with the same diagnosis.

- The *social model of disability* recognises that society—through policies and environmental adaptations—either facilitates or impedes the way individuals participate in daily activities.

- In this framework, disability doesn't reside in the child; rather, it's a function of the child and the child's environment.

- This distinction is captured in the WHO International Classification of Functioning, Disability & Health (2007) which distinguishes between impairment, activity and participation:

  - *impairments* refer to the actual body functions and structure - how a person is affected at a physical level,

  - *activity* refers to the impact of these upon the person's ability to do certain activities - what restrictions the impairments place upon the person's ability to do things, and

  - *participation* refers to the child's ability to participate as they would like within family and community settings - what restrictions the social environment placed upon the person's capacity to participate in life activities

- Viewing disability in this way means examining the extent to which a child can or cannot participate with family members and peers in day-to-day activities in the home, the community and in early childhood programs: environments that aren't adapted to meet children's level of functioning restrict their participation in everyday activities, thus impairing their ability to develop and learn.

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- *Educational environments … aren't neutral factors when it comes to existing and emerging disabilities. These environments contribute positively or negatively to the way children will function—and even, for some children, to whether they are considered disabled at all (Hebbeler and Spiker, 2016)*

Another way in which traditional views of developmental disabilities have been challenged is by those who argue that human abilities exist along continua and that there is no absolute cut-off point for any of the many forms of disability.

- In his book **Neurodiversity** (2010), Armstrong (2010) maintains that:

  Human beings and human brains exist along continuums of competence. People with disabilities do not exist as 'islands of incompetence' totally separated from 'normal' human beings. Rather they exist along continuums of competence, with 'normal' behavior simply a stop along the way.

  Human competence is defined by the values of the culture to which you belong - whether you are regarded as disabled or gifted depends largely upon when and where you live

- In **The Other Side of Normal** (2012), Smoller argues that

  The more we learn about the architecture of the mind, the more we see that conditions we recognise as disorders are variations of the same biological and psychological systems that operate in all of us.

  Normal and abnormal are like night and day: we recognise them as different, but there is no sharp line between them

Others argue that we should rethink our attitudes and perspectives of disabilities.

- In **Neurotribes: The legacy of autism and how to think smarter about people who think differently** (2015), Silberman urges us to rethink our view of autism:

  Instead of viewing [autism] as an error of nature – a puzzle to be solved and eliminated with techniques like prenatal testing and selective abortion – society should regard it as a valuable part of humanity's genetic legacy while ameliorating the aspects of autism that can be profoundly disabling without adequate forms of support.

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AIMS AND RATIONALE FOR EARLY CHILDHOOD INTERVENTION

Based on earlier reviews of the evidence in the US (Workgroup on Principles and Practices in Natural Environments, 2008) and Australia (Centre for Community Child Health, 2011), the aims and rationale for early childhood intervention are as follows:

- While ECI providers can play an important role in supporting children with disabilities and their families, they have a limited role to play in the everyday lives of these children

- ECI providers have limited direct time with children with disabilities and their parents and therefore are not one of the main providers of early learning environments.

- The bulk of the child's learning occurs *between* home visits or other sessions with professionals, not *during* them.

- Therefore, individual therapy cannot be a major driver of development – what drives development is children's meaningful participation in everyday activities and environments

- **The overall aim of early childhood intervention is *to ensure that the parents or other key caregivers are able to provide young children who have developmental disabilities with experiences and opportunities that help the children gain and use the functional skills they need to participate meaningfully in the key environments in their lives*.**

A recent review of the evidence (Moore, 2019) has confirmed these finding:

- The overall aim of ECI as identified in the previous review (CCCH, 2011) has continued to be endorsed by all experts – the central goal is to promote the capacity of caregivers to support the child's learning

- The other core plank of ECI services – the inclusion and participation of children with disabilities and their families in community settings that serve typically developing children – also continues to be endorsed both as the right of children with disabilities and as best practice

- The three defining features of high-quality inclusion are

  - *Access*: removing barriers and making necessary adaptations to create opportunities for learning

  - *Participation*: promote meaningful engagement in play and learning activities with other children

  - *Supports*: creating an infrastructure of systems-level supports for implementing high-quality inclusion

- The enhancement of participation is the ultimate outcome for health and educational interventions

- Focusing on participation is critical for children with disabilities because, without special efforts to support their participation, they are likely to experience lower levels of participation than their normally-developing peers.

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AIMS AND RATIONALE FOR INCLUSION

In various international and national policy documents, we can see an emerging commitment to make societies more inclusive:

- Both the United Nations' *Convention on the Rights of the Child* (1990) and *Convention on the Rights of Persons with Disabilities* (2006) envision an inclusive society in which health and education contribute to the well-being of all.

- The United Nations Sustainable Development Goals 2015-2030 builds on the principle of 'leaving no one behind', and also envisions a fully inclusive society.

- Early Childhood Development is included in SDG Goal 4: *Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.*

- Australia's National Disability Insurance Scheme (2013) also promotes inclusion and participation for people with disabilities

- Among its objectives, this Act is designed to:

  - give effect to Australia's obligations under the Convention on the Rights of Persons with Disabilities 2006

  - support the independence and social and economic participation of people with disability

  - provide reasonable and necessary supports, including early intervention supports, for participants in the NDIS

Australia's national early childhood frameworks also support inclusion and participation:

- One of the key aims of the Early Years Learning Framework *Belonging, Being and Becoming* is that all children should learn to participate fully and actively in society

- Similarly, the Australian Children's Education and Care Quality Authority's Guide to the National Quality Standard includes among its guiding principles *equity, inclusion and diversity*

Defining inclusion

- Inclusion is *the meaningful participation of children with developmental disabilities in the same range of home, early childhood and community environments, experiences and activities as other children*.

- An inclusive environment or program is one in which all children, regardless of ability or background, are able to participate in all activities of their choosing.

- From the family perspective, inclusion is defined as *the active involvement of families of children with developmental disabilities in the same range of community environments, experiences and activities as other families*.

- An inclusive community environment or program is one in which all families, regardless of their abilities or backgrounds, are able to participate in all activities of their choosing.

The inclusion in children with developmental disabilities in early childhood settings has been endorsed national and internationally:

- A joint statement of US Department of Health and Human Services & US Department of Education (2015) states that:

  All young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations.

  Though this policy statement focuses on including young children with disabilities in early childhood programs, it is our shared vision that all people be meaningfully included in all facets of society throughout the life course. This begins in early childhood programs and continues into schools, places of employment, and the broader community.

  Inclusion in early childhood programs can set a trajectory for inclusion across the life course, making it critical that we include individuals with disabilities in all facets of society from birth.

- Early childhood inclusion has also been endorsed in joint statement sby peak early childhood and early childhood intervention bodies in the US (Division of Early Childhood and the National Association for the Education of Young Children, 2009) and Australia (Early Childhood Australia and Early Childhood Intervention Australia, 2012).

- Early Childhood Australia has issued a *Statement on the inclusion of every child in early childhood education and care* (2014) and a companion paper on *A rationale for why we need the Statement on Inclusion (2014)* which state that:

  - ECA is committed to the inclusion of every child in early childhood education and care

  - Inclusion means that every child has access to, participates meaningfully in, and experiences positive outcomes from early childhood education and care programs

  - Exclusion is when some children and their families find it harder to access and participate in ECEC than others

  - Exclusion may be deliberate or unintentional, but even when it is not deliberate, it is not okay

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EVIDENCE AND BEST PRACTICE REGARDING INCLUSION

Kathy Cologon (2019) has summarised the evidence for the effects of inclusion of children with developmental disabilities in education programs:

- There is a consistent lack of evidence to suggest any benefit of segregated education.
- By contrast, there is a considerable body of research demonstrating the benefits of inclusive education

- All children benefit from inclusive education, not only those with developmental disabilities

- Despite these well-known findings, which have been persistent for more than half a century, current research nationally and internationally shows that segregated education not only continues but is increasing.

  For an example of the ongoing battles over the value and efficacy of inclusion, see Imray and Colley (2017) *Inclusion is Dead, Long Live Inclusion*, and the reply from Roger Slee (2018) *Inclusive Education isn't Dead, it Just Smells Funny.*

- Inclusive education results in higher quality education for students who do and do not experience disability

- Through participation in inclusive education, teachers experience professional growth and increased personal satisfaction

- Developing skills to enable the inclusion of students who experience disability results in higher-quality teaching for all students and more confident teachers

Features of best practice

Promoting access - removing barriers to attending and participating

- *Assistive technology* 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.

- *Universal design* is an approach to the design of all products and environments to be as usable as possible by as many people as possible regardless of age, ability, or situation

- *Universal design for learning* involves the design of instructional materials and activities that make the learning goals achievable by individuals with wide differences in their abilities to see, hear, speak, move, read, write, understand English, attend, organize, engage, and remember. These alternatives are built into the instructional programs, activities and materials, not added on after-the-fact

  The creation of inclusive early childhood programs does not depend upon adapting the mainstream curriculum for the benefit of those with developmental disabilities, but on creating a curriculum and environment that is designed from the start to cater for the individual needs of all children.

Promoting engagement and safety

- Importance of attachment – challenges for children with developmental disabilities
- Importance of establishing familiar routines and safe places

Promoting participation

- What meaningful participation involves – not just being present

- Hearing the child's voice – importance of close observation and following the child's interests and preferences

- Ask the other children how to involve them

Promoting practice of functional skills

- Natural learning opportunities and other naturalistic interventions – these address specific developmental or learning goals within the context of everyday activities, routines, and transitions at home, at school, or in the community

- Scaffolding strategies

- Importance of monitoring – informal (observation) and formal

- Tiered models of instruction/intervention

  - *Response to Intervention* (Buysse and Peisner-Feinberg, 2013)

  - *The Pyramid Model for Promoting Social-Emotional Competence and Addressing Challenging Behaviour* (Hemmeter, Fox and Snyder, 2013)

  - *Building Blocks* (Sandall and Schwartz, 2008)

  - *Multi-Tiered Systems of Support for Young Children* (Carta & Young, 2019)

Promoting supportive partnerships

- Importance of close family-professional collaboration – actively engage parents in choosing and devising ways of meeting goals for the child

- *Team Around the Child* (Limbrick, 2009, 2014)

- – for children with complex conditions and multiple needs, build a team of caregivers and practitioners to support the child and the family and the EC service

- Interface with external services - ECIA *Working Together Agreement* (2018)

  The Working Together Agreement promotes a coordinated approach to early childhood inclusion for children with disability and/or developmental delay. When families, early childhood intervention (ECI) practitioners, early childhood education and care (ECEC) educators work together, this supports the human rights, best interests of and outcomes for all children participating in ECEC.

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CONCLUSIONS / KEY POINTS

- In young children, disabilities are *developmental* – they are evolving, shaped by continuous interaction with their environment

- The overall aim of both ECI and ECEC services is to ensure that children's early learning environments – in family, ECEC and community settings – help children develop the functional skills they need to participate in those environments

- No child with developmental disabilities needs therapy – what they need is the services of a therapist to help their caregivers / EC practitioners adapt their practices to meet the child's developmental needs

- We need to create services and a service system that caters for *all* children and is capable of catering for the full range of children's abilities and stages of development

- *Attachments* are critical for the development of all children, but particularly so for children with developmental disabilities – they are the medium through which young children learn

- *Participation is the engine of development* – we must ensure that all children are able to participate meaningfully in their everyday environments
- All children stand to benefit from fully inclusive ECEC services

RESOURCES

Australian resources to support inclusion

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