



**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
U.S. DEPARTMENT OF EDUCATION**

**DRAFT POLICY STATEMENT ON
INCLUSION OF CHILDREN WITH DISABILITIES IN
EARLY CHILDHOOD PROGRAMS**

May 15, 2015

PURPOSE

The purpose of this policy statement is to set a vision and provide recommendations to States, local educational agencies (LEAs), schools, and public and private early childhood programs, from the U.S. Departments of Education (ED) and Health and Human Services (HHS), for increasing the inclusion of infants, toddlers, and preschool children with disabilities in high-quality early childhood programs.ⁱ

It is the Departments' position that all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with appropriate support in meeting high expectations. This joint ED and HHS policy statement aims to advance this position by:

- Providing a definition of inclusion in early childhood programs;
- Increasing public understanding of the science that supports meaningful inclusion of children with disabilities, from the earliest ages, in early childhood programs;
- Highlighting the legal foundations supporting inclusion in high-quality early childhood programs;
- Providing recommendations to States, LEAs, schools, and early childhood programs for increasing inclusive early learning opportunities for all children; and
- Identifying free resources for States, programs, early childhood personnelⁱⁱ, and families to support high-quality programming and inclusion of children with disabilities in early childhood programs.

Though this policy statement focuses on including young children with disabilities in early childhood programs, it is our shared vision that all Americans 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.

ⁱ Early childhood programs are those that provide early care and education to children birth through age five, where the majority of children in the program are typically developing. These include, but are not limited to, private or publicly funded center or family-based child care, Early Head Start, Head Start, private preschool, and public school and community-based pre-kindergarten programs.

ⁱⁱ Early childhood personnel refer to professionals who provide early care and education services to children birth through age five, including public or private preschool teachers, home and center-based child care providers, Head Start and Early Head Start teachers, home visitors, early interventionists, special education teachers, and related services providers.

OVERVIEW

This year our country proudly celebrates the 25th anniversary of the Americans with Disabilities Act, the 40th anniversary of the Individuals with Disabilities Education Act (IDEA), and the 50th anniversary of Head Start. All three efforts have been transformative in ensuring equal opportunity for all Americans. While tremendous progress has been made, the anniversaries of these laws are cause for reflection on the work that lies ahead.

Children with disabilities and their families continue to face significant barriers to accessing inclusive high-quality early childhood programs and too many preschool children with disabilities continue to receive special education services in separate settings, as opposed to the least restrictive environment (LRE). This lag in progress is troubling for many reasons. First, equal opportunity is one of America's most cherished ideals. Being meaningfully included as a member of society is the first step to equal opportunity and is every person's right – a right supported by our laws. Second, research indicates that early childhood inclusion is beneficial to children with and without disabilities.^{1,2,3,4,5} Third, preliminary research shows that operating inclusive early childhood programs is not more expensive than operating separate early childhood programs for children with disabilities.⁶ Finally, meaningful inclusion in high-quality early childhood programs can support children with disabilities in reaching their full potential resulting in societal benefits more broadly, including higher productivity in adulthood and fewer resources spent on interventions and public assistance later in life.

It is well documented that the beginning years of all children's lives are critical for building the early foundations of learning and wellness needed for success in school and later in life. During these years, children's brains develop rapidly, influenced by the experiences they share with their families, teachers, peers, and in their communities. Like all children, children with disabilities must be exposed to a variety of rich experiences where they can learn in the context of play and everyday interactions and engage with their peers with and without disabilities. In partnership with families, high-quality early childhood programs can facilitate the experiences that foster learning for all children.

The Federal government has launched several efforts to expand access to high-quality early childhood programs through the Race to the Top-Early Learning Challenge, Preschool Development Grants, expansion of Head Start and Early Head Start, and the Early Head Start-Child Care Partnerships, among others. States and communities are also making significant progress in expanding early learning opportunities for young children, with 40 States and the District of Columbia now offering State-funded public pre-kindergarten programs⁷ and a growing number of States are expanding access to high-quality infant-toddler early childhood programs. Unfortunately, these expansions have not resulted in a proportionate expansion of inclusive early learning opportunities for young children with disabilities. Expansion of high-quality early childhood programs must be accompanied by a responsibility to ensure that children with disabilities are included in these opportunities, so they too reap the benefits of high-quality early learning experiences. Systems must be built and expanded to support the learning and development of all children. This includes defining a "high-quality" early childhood program as one that is inclusive of children with disabilities and their families, and ensuring that policies, funding, and practices enable their full participation, and success.

Given the important nationwide focus on early learning, the time is right to strengthen our efforts to address barriers to inclusion in early childhood programs. All early childhood programs and services, including public and private preschool, center and family-based child care, Early Head Start and Head Start, and Part C and Part B, section 619 of the IDEA, in partnership with families and communities, play an important role in building a nationwide culture of inclusion in early childhood.

THE FOUNDATION FOR INCLUSION IN EARLY CHILDHOOD PROGRAMS

Policy makers have partnered with families, advocates, practitioners and researchers for decades to expand access to inclusive early childhood programs for children with disabilities; however, there is more work to be done to reach meaningful inclusion. Further progress will require a shared responsibility and a nationwide commitment to prioritize high-quality early childhood inclusion in policies, budgets, and practices; to work together to reshape attitudes and beliefs about inclusion and to raise expectations for what children with disabilities can achieve; and to create a comprehensive system that meets the learning and developmental needs of all children, especially those with the highest needs. The following sections set a basic foundation for inclusion that can inform the implementation of the State, LEA, school and program level recommendations offered in subsequent sections.

Defining Inclusion in Early Childhood Programs

The Departments define *inclusion in early childhood programs* as including children with disabilities in early childhood programs, together with their peers without disabilities, holding high expectations and intentionally promoting participation in all learning and social activities, facilitated by individualized accommodations, and using evidence-based services and supports to foster their cognitive, communication, physical, behavioral, and social-emotional development; friendships with peers; and sense of belonging. This applies to all young children with disabilities, from those with the mildest disabilities, to those with the most significant disabilities.

This definition and recommendations provided here build on the values, principles, and definition set forth in the joint position statement from the National Association for the Education of Young Children (NAEYC) and the Division for Early Childhood (DEC).⁸ While NAEYC and DEC's position statement focuses on the inclusion of young children in society more broadly, the definition within this policy statement refers specifically to inclusion of children with disabilities in general early childhood programs.

The Scientific Foundation of Inclusion

Decades of research support the benefits of inclusion for young children with and without disabilities. Studies have shown that individualized evidence-based strategies for children with disabilities can be implemented successfully in inclusive early childhood programs.^{9,10,11} Children with disabilities, including those with the most significant disabilities and the highest needs, can make significant developmental and learning progress in inclusive settings.^{12,13,14} Some studies have shown that children with disabilities in inclusive settings experienced greater cognitive and communication development than children with disabilities who were in segregated settings, with this being particularly apparent among children with more significant disabilities.^{15, 16,17} Further, children with disabilities tend to have similar levels of engagement as their typically developing peers,¹⁸ and are more likely to practice newly acquired skills in inclusive settings as compared to segregated settings.¹⁹ Likewise, research suggests that children's growth and learning are related to their peers' skills and the effects are most pronounced for children with disabilities.²⁰ High-quality inclusion that begins early and continues into school likely produces the strongest outcomes, with some studies showing higher achievement test scores and higher graduation rates for children served in inclusive settings.^{21,22}

In addition to making learning and achievement gains, children with disabilities in inclusive early childhood programs also demonstrate stronger social-emotional skills than their peers in segregated settings.^{23,24} These social benefits are robust and can continue into elementary school and beyond.^{25,26} Studies have found that children in inclusive early childhood programs, who transitioned into inclusive classrooms in elementary school, demonstrated more social interactions with peers with and without

disabilities, expressed fewer feelings of stigmatization, and had a stronger understanding of socially acceptable behaviors.^{27,28,29} Importantly, while studies indicate that inclusive services produce benefits for children with disabilities, these desired outcomes are achieved only when young children with disabilities are included several days per week in social and learning opportunities with typically developing peers.³⁰ Additionally, the developmental benefits of early childhood inclusion can be lost if children are placed in more restrictive placements in preschool, kindergarten and elementary school, making it imperative that inclusion in early childhood settings be followed by inclusion in elementary school.³¹

Children without disabilities also benefit from inclusive early childhood programs. Studies indicate that typically developing children show positive developmental, educational, communication, social, and attitudinal outcomes from inclusive experiences. They demonstrate greater compassion and empathy and have a more positive perception of children with disabilities.^{32,33} They also develop a better understanding of diversity and disability as concepts.^{34,35} When programs and teachers have an advanced understanding and capacity for individualizing learning and developmental supports all children benefit, because all children learn best with individualized supports. Children without disabilities in high-quality inclusive early childhood settings also benefit from developmental specialists who can identify and address delays in development that might otherwise not be identified, before the delay can become a barrier for the child.

The Legal Foundation for Inclusion

Inclusion is not only supported by an empirical foundation; it is also supported by a robust legal foundation. The IDEA supports equal educational opportunities for children with disabilities birth through 21. The law supports appropriate early intervention services for any infant or toddler with a disability in natural environments, including the home, and community settings in which children without disabilities participate, to the maximum extent appropriate, factoring in each child's routines, needs, and outcomes. For children ages three through 21, services are to be provided, to the maximum extent appropriate, in the least restrictive environment (LRE) factoring in an individual child's unique strengths and needs. It further requires a continuum of placement options available to best meet the diverse needs of children with disabilities. Under LRE requirements, the IDEA presumes that the first placement option considered for each child with a disability is the regular classroom the child would attend if he or she did not have a disability. Thus, before a child with a disability can be placed outside of the regular educational environment, the full range of supplementary aids and services that could be provided to facilitate the child's placement in the regular classroom setting must be considered. Each LEA must ensure that a free appropriate public education is provided in the LRE regardless of whether the LEA operates public general early childhood programs. This could include providing special education and related services in public or private general early childhood or preschool programs, Head Start and Early Head Start programs, and community-based child care programs.

In addition to the IDEA, both the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Sec. 504) require schools and agencies to provide equal educational opportunities for children with disabilities. Additionally, the Head Start Act and the Child Care and Development Block Grant Act (CCDBG) also have specific provisions and requirements that support high-quality inclusive opportunities for children with disabilities. By statute, Head Start and Early Head Start programs must make at least 10% of their enrollment opportunities available to children with disabilities. The CCDBG Act requires States to develop strategies for increasing the supply and quality of child care services for children with disabilities. See Appendix 1 for more information on the legal foundation for early childhood inclusion, including frequently asked questions addressed by the Department of Justice on the ADA and child care.

CHALLENGES TO INCLUSION IN EARLY CHILDHOOD PROGRAMS

Families and experts have identified several challenges to inclusion in early childhood programs. Families of infants and toddlers with disabilities report that they have difficulty finding and keeping child care, which can cause stress and negatively impact their employment.³⁶ While infants and toddlers with disabilities typically receive early intervention services in natural environments, including home and community settings, families report a lack of coordination between early intervention, preschool special education, and child care services and difficult transitions between Part C and Part B 619 services.³⁷

Preschool children with disabilities have difficulty receiving special education services in inclusive settings. In 2013, more than half (54.3%) of preschool children with disabilities received special education services in separate settingsⁱⁱⁱ.³⁸ Of the two-thirds (66%) of preschool children with disabilities attending regular early childhood programs, a third (34%) received their special education services in a separate setting. Indeed, data trends over the past three decades indicate that the percentage of preschool children with disabilities who receive special education services in general early childhood programs has remained largely unchanged.³⁹ In many cases, children are referred to separate settings, such as special education preschool classrooms, as a first resort. This may be especially true for children with more significant disabilities, despite evidence that inclusion is beneficial to children across ability levels. The following challenges are frequently cited as barriers to inclusion in early childhood programs:

Attitudes and Beliefs: The most highly reported barrier to early childhood inclusion that has remained largely unchanged over the past several decades are attitudes and beliefs related to inclusion and children with disabilities.⁴⁰ False beliefs and negative attitudes about inclusion may be influenced by misinformation of the feasibility of inclusion, fear of the unfamiliar, resistance to changing existing practices, stereotyping of children with disabilities, the worry that children with disabilities will divert attention and resources from their peers without disabilities, and lack of awareness of the benefits for all children, including those without disabilities and those with the most significant disabilities. Any effort to expand early childhood inclusion must be accompanied by a strong focus on shifting attitudes and beliefs.

IDEA Interpretation and Perceived Barriers: Some jurisdictions misinterpret IDEA's natural environment policy as only allowing early intervention services to be provided in children's homes, and not in inclusive early childhood programs. Other jurisdictions misinterpret IDEA's LRE requirement as only allowing preschool special education services to be delivered in preschool programs operated in a public school building as opposed to non-public school settings, such as child care and Head Start where services can be delivered. A mixed delivery system of public and private high-quality early childhood programs is important to increasing the availability of inclusive opportunities for children with disabilities.

Lack of Staffing, Training, and Expertise of the Early Childhood Workforce: There is a large amount of variability in the training, education, and expertise of the early childhood workforce. Providers may lack basic knowledge and competencies in child development, early childhood pedagogy, individualizing instruction, managing challenging behavior, promoting social-emotional development, and scaffolding learning across activities and between peers. This affects all children, including those with disabilities, and may present a challenge to providing a high-quality inclusive early learning experiences.

Lack of Comprehensive Services: The lack of comprehensive services delivered in early childhood programs is also a barrier to inclusion. Programs like Head Start and Early Head Start provide children with a coordinated set of comprehensive services. Outside of Head Start, however, few scaled programs offer the same type of coordinated comprehensive services. The multiple systems that provide services to

ⁱⁱⁱ Segregated settings refer to attending a regular early childhood program but receiving services in another location, residential facility, separate class separate school, and service provider location.

young children, such as the early care and education, early intervention and special education, and health-including pediatric medical homes^{iv} and mental health, often deliver services in separate settings. The lack of delivery of comprehensive supports in early childhood programs may be a barrier to the full participation and success of children with disabilities in inclusive settings. Children with disabilities, more than other children, may have increased interface across several systems, and may therefore be disproportionately affected by the lack of comprehensive services offered in any one system.

Limited Time and Commitment to Build Partnerships: A key ingredient to successful inclusion is a strong partnership between general early childhood, early intervention, special education, and related services providers who provide services and supports. Many communities believe in the importance of inclusion but have made little progress due to limited time or a lack of commitment and support from leaders. Fostering relationships between providers requires an on-going commitment. Equally important is a commitment across providers to build strong partnerships with families, children's first and most important advocates.

THE PATH AHEAD: **PARTNERING TO BUILD A NATIONWIDE CULTURE OF INCLUSION**

Addressing the remaining challenges and barriers to inclusion in early childhood programs requires a community-wide partnership that brings families, advocates and self-advocates, developmental specialists, early childhood programs, schools, LEAs, and community and State leaders together to build a culture of inclusion, supported by the empirical and legal foundations of inclusion. Though some of this work has been underway in communities for many years, these efforts must be expanded and universally adopted across the country. This will require partners to come together to:

- Celebrate diversity in all facets of society;
- Talk to neighbors, community members, and State and local leaders about the importance of inclusion; highlight the universal benefits of inclusion for children with and without disabilities; and counter myths, misconceptions, and stereotypes about children with disabilities;
- Co-create written inclusion vision statements at the State, LEA, school and program levels; and
- Strongly communicate inclusion as a shared responsibility and a top priority, and demonstrate a commitment to inclusion through policy changes and appropriate resource allocation at all levels.

A central component of establishing a culture of inclusion within the early childhood system is ensuring that the expectations and goals of children with disabilities are always considered with those of other children. The early childhood system must adopt and implement the principles of *access, participation, and support*. As defined in the DEC/NAEYC inclusion position statement⁴¹, *access* refers to removing structural, physical, or communicative-related barriers to full participation; *participation* refers to strategies used to promote children's learning, development, and sense of belonging; and *support* refers to the broader system that enables these efforts, including program/school-family partnerships and professional development. Only by designing systems in ways that are accessible and beneficial to all children^v, can we ensure that all children have an equal opportunity to learn. A culture of inclusion sets the stage to implement the recommendations provided here and is the first step to reaching the ultimate vision of providing access to inclusive high-quality early learning opportunities to all.

^{iv} A pediatric medical home is a team-based health care delivery model defined by the American Academy of Pediatrics (AAP) as providing care that is comprehensive, family-centered, coordinated, compassionate, and culturally effective.

^v This includes all children in need of special assistance and support, including children with special health care needs, children with disabilities or developmental delays, children in poverty, children who are English learners, who are migrant, homeless, or in foster care.

RECOMMENDATIONS FOR STATE ACTION

1. Create a State-Level Interagency Task Force and Plan for Inclusion

All State agencies that provide services to young children must take an active role in ensuring that policies and investments support a coordinated, comprehensive early childhood system that provides inclusive early learning opportunities to all children. State leaders should prioritize, invest in, and set the vision for inclusion, and establish expectations for LEAs, school principals, and early childhood program directors to implement the vision in local communities. States should leverage existing early childhood councils or taskforces, such as their State Advisory Councils for Early Care and Education, and create (or strengthen) a focus on early childhood inclusion. As young children with disabilities are served across multiple programs, at a minimum, the effort should include representatives from IDEA Part B, section 619, IDEA Part C, Head Start, Early Head Start, child care, home visiting, pediatrics, Medicaid, the State educational agency (SEA), the State lead agency under IDEA Part C, mental health, and related service organizations. The council should build on existing early childhood efforts in the State, including quality improvement efforts. States should review and coordinate existing State plans, such as strategic early childhood state plans, Child Care and Development Fund State Plans, IDEA State Systemic Improvement Plans, or plans for specific grant programs (e.g. Preschool Development Grants), to ensure that early childhood inclusion is consistently addressed across plans. The state should also review previous and current early childhood inclusion efforts (e.g. MAPS to inclusive child care, Expanding Opportunities, SpecialQuest, and National Professional Development Center on Inclusion) to ensure that lessons learned are applied. The council or taskforce should bring partners together, co-create a written State vision statement for early childhood inclusion, and develop and carry out an inclusion State plan.

States Should:

- ✓ Bring partners together and co-create a State vision statement for inclusion
- ✓ Leverage existing early childhood state councils or taskforces and establish a focus on inclusion
- ✓ Develop a plan for inclusion
- ✓ Review funding sources and modify early childhood resource allocation to better support inclusion
- ✓ Make state quality frameworks inclusive
- ✓ Strengthen accountability and create incentives
- ✓ Enhance existing professional development systems to emphasize inclusion
- ✓ Support children's social-emotional development
- ✓ Raise public awareness

2. Ensure State Policies Support High-Quality Inclusion

State policies set the direction for how LEAs, schools and early childhood programs^{vi} implement inclusion. States should review their policies to ensure that they facilitate- rather than create barriers to- high-quality inclusion and that they are consistent with Federal and State legal requirements. The State should eliminate policies that promote separate learning of children with disabilities. States should also:

- Consider policies that promote coordinated comprehensive services across early childhood programs, including health, mental health, and other social services.

^{vi} Early childhood programs are those that provide early care and education to children birth through age five, where the majority of children in the program are typically developing. These include, but are not limited to private or publicly funded center- or family-based child care, Head Start, private preschool programs, and public school and community-based pre-kindergarten programs.

- Consider children who are dually placed in more than one program and eliminate policies that require unnecessary transitions between service providers that can burden families, disrupt service delivery, and interrupt child progress.
- Ensure that after children are identified with a disability, families are not forced to choose between early intervention or special education services and remaining in their existing early childhood program.
- Ensure that the principle of natural proportions^{vii} guide the design of inclusive early childhood programs.
- Review their early learning guidelines to ensure that they are inclusive of the learning and developmental needs of children with disabilities.
- Ensure that future early learning initiatives within the State, including expansion of early childhood programs such as State pre-kindergarten, have specific policies and procedures to recruit, enroll, and appropriately support the learning and developmental needs of all young children with disabilities, including those with the mildest and most significant disabilities.

3. Set Goals and Track Data

Guided by their written vision statement on inclusion, States should set concrete goals for expanding inclusive high-quality early learning opportunities. States should establish a baseline that identifies the number of inclusive high-quality early childhood slots available, the number of children under five with and without disabilities served in those slots, and benchmarks that track progress in reaching the State's goals.

4. Review and Modify Resource Allocations

Preliminary studies have shown that inclusive early childhood programs are not more expensive than segregated early learning programs.⁴² States should review how existing resources are allocated and how they may be reallocated to better support inclusion. States should consider braiding funds across early childhood programs, particularly IDEA funds with other early childhood funding streams, including public preschool, child care, Title I funds for pre-K services, and Early Head Start and Head Start. In addition, States should provide technical assistance and guidance to LEAs and early childhood programs on allocating resources and braiding funds at the local level to support inclusion. States should also encourage the use of Title II teacher development funds to be used to expand knowledge and skill in providing inclusive early childhood education for public school personnel and to invite other local early childhood personnel to participate. In addition, Medicaid funding for early intervention services is available for children enrolled in Medicaid through the Early and Periodic Screening, Diagnostic and Treatment Program (EPSDT),⁴³ and State Medicaid agencies are important financing partners.

5. Ensure Quality Rating Frameworks are Inclusive

Most traditional quality standards are applicable and necessary for the learning and development of all children (e.g. health and safety standards, appropriate ratios, evidence-based curriculum, developmental screening, continuous professional development). However, they may not fully address the learning and developmental needs of children with disabilities. State quality rating frameworks must take this into account. Each level in a quality framework should include indicators applicable to children with

^{vii} “National proportions” means the inclusion of children with disabilities in proportion to their presence in the general population.

disabilities, as opposed to indicators specific to children with disabilities being optional or only applying at the highest level of a framework. In rating early childhood programs, States should consider that traditional environmental quality assessments may not be sufficient for assessing the quality of the environment for children with disabilities⁴⁴. States should supplement traditional environmental assessments with tools that specifically measure the quality of inclusion, but those supplements should always be part of the assessment of early childhood settings, not optional.

6. Strengthen Accountability and Build Incentive Structures

The State must address inclusion within their accountability system for early childhood programs. This should include reviewing the individualized family service plan (IFSP) and the individualized education program (IEP) process in local communities to ensure that teams are making decisions that are both individualized and consistent with natural environment and LRE requirements when considering the range of placement options that must be available. State agencies should hold local programs and agencies accountable for including children with disabilities by having LEAs document how they are meeting requirements, including through their partnerships with early childhood programs in the community. States may also incorporate inclusion indicators in their child care licensing standards and hold programs accountable to meeting basic standards through monitoring. States can incentivize high-quality inclusive early learning models through, for example, using tiered reimbursement in their quality rating and improvement systems, ensuring all trainings on inclusion are credit bearing, and requiring training in inclusive practices for hiring.

7. Build a Coordinated Early Childhood Professional Development (PD) System

An effective early childhood workforce is a key component of inclusive high-quality early childhood programs. States should ensure that their professional development efforts are coordinated, that inclusion is meaningfully addressed, and that efforts are inclusive of paraprofessionals and aides, center-based and family child care providers, teachers, directors and principals, and other leaders.

- **Build a Common Knowledge and Competency Base Across Child-Serving Providers**

The National Academies of Science report, *Transforming the Workforce for Children Birth Through Eight*, recommends that all service providers who work with young children have a common knowledge and competency base. All providers should have knowledge of child development and learning, the importance of consistent and nurturing relationships, and the biological and environmental factors that influence development. They should also share competencies in engaging children in high-quality interactions, promoting social-emotional development and mitigating challenging behaviors, recognizing signs that children may need assessments and additional services, and using various tools and techniques to promote learning. States should ensure that their efforts to build this common base, in partnership with training programs and institutions of higher education, include considerations for children with disabilities.

- **Ensure that State Certifications, Credentials, and Workforce Preparation Programs have a Strong Focus on Inclusion**

All early childhood personnel need to be prepared to support children with disabilities. States should ensure that personnel standards, credentials, certifications and licensure requirements for

general early childhood personnel, including directors or principals, teachers and providers^{viii}, and paraprofessionals or aides, include competencies for working with children with disabilities and their families. The State should partner with institutions of higher education to ensure that early childhood preparation degree programs include specific pedagogy for children with disabilities woven throughout the entire curriculum, including coursework and practicum experiences, rather than contained in a small number of supplemental courses or a separate program.

- **Ensure Personnel Qualification Policies Facilitate Inclusion**

States should support early childhood teachers and providers, many of whom do not have specialized disability certifications, in their delivery of direct services to children with disabilities in inclusive settings. This should be done in consultation with and under the supervision of professionals with specialized training and certifications, such as speech-language pathologists or other related service providers, special educators, and early interventionists. States should consider promoting co-teaching models where specialists and early childhood teachers or providers work jointly with children in inclusive settings, and coaching/mentoring models to support early educators.

- **Offer Cross-Sector Professional Development and Technical Assistance**

States should ensure that existing early childhood professional development and technical assistance (TA) efforts always consider and are inclusive of children with disabilities. States can supplement existing efforts to ensure that professionals working with young children can access information and obtain on-site technical assistance in evidence-based inclusion practices. States can consider the following actions to promote cross-sector professional development and TA:

- ✓ Develop and implement a cross-sector professional development /technical assistance plan for all teachers and providers working with young children.
- ✓ Establish a group of inclusion experts that provide ongoing TA and professional development opportunities to all staff.
- ✓ Ensure that professional development is tied to specific competencies, are sequential and credit bearing, and focus on a wide range of topics, each inclusive of how the content and practice applies to children with disabilities.
- ✓ Use Title II teacher development funds on building capacity in providing inclusive high-quality early education. Invite community-based providers to join trainings.
- ✓ Establish a method for local programs to request support around inclusion through, for example, statewide hotlines, telemedicine consultation, or coaching networks.
- ✓ Develop community hubs and networks of teachers and providers who can share training and technical assistance.
- ✓ Expand access to specialists, including behavioral or mental health consultants, with the eventual goal of providing universal access to all early childhood programs in the State.
- ✓ Identify and highlight programs that are exemplars of inclusion so that State and local leaders and teachers and providers can visit the site to see how inclusion can be successfully implemented.

^{viii} Early childhood teachers and providers refer to professionals who provide early care and education services to children birth through age five, including public or private preschool teachers, home and center-based child care providers, including family child care providers, and Head Start and Early Head Start teachers.

8. Implement Statewide Supports for Children’s Social Emotional and Behavioral Health

A lack of program capacity to manage challenging behavior or social-emotional developmental delays may be barriers to inclusion. As such, all early childhood programs should have access to specialists who can build capacity in working with young children, with an emphasis on fostering social-emotional and behavioral health. States should implement early childhood mental health consultation (ECMHC) models or age appropriate positive behavior intervention and supports (PBIS) frameworks. Practices like ECMHC and PBIS, both of which generally consist of staff capacity building paired with external specialized support, have been shown to reduce and prevent expulsion and suspension in early learning and school settings, as well as reduce rates of teacher-rated challenging behaviors in young children.^{45,46} See Attachment 2 for more resources on ECMHC, PBIS and expulsion in early learning settings.

9. Raise Public Awareness

The State must take an active role in trying to shift perceptions of inclusion. The State should partner with families, self-advocates, and other community leaders to communicate the benefits of early childhood inclusion, affirm the laws and research that provide the foundation for inclusion, and set the expectation that the community is responsible for ensuring that all children have access to high-quality early childhood programs and the individualized supports they need to fully participate in those programs. Key audiences and partners should include early childhood programs and schools and their staff; parents and families of children with and without disabilities; philanthropic, business, and other private sector partners; faith-based organizations; elected officials, and other relevant community leaders.

RECOMMENDATIONS FOR THE EARLY CHILDHOOD SYSTEM, WHICH INCLUDES LOCAL EDUCATIONAL AGENCIES, SCHOOLS, AND EARLY CHILDHOOD PROGRAMS

With the support of State leaders, leaders in LEAs, schools, early childhood programs, and family child care networks, can strive toward providing high-quality early learning experiences for all young children. Leaders can adopt a culture of inclusion, set expectations for services to be provided in inclusive settings to the extent appropriate per child need, establish fair and appropriate policies, allocate existing resources in ways that facilitate inclusion, and prioritize workforce development. Early childhood leaders can serve as community-wide leaders for inclusion, by convening a diverse coalition of inclusion champions who can implement a culture of inclusion across the entire community.

LEAs, Schools and Programs Should:

- ✓ Create a vision statement and a culture of inclusion
- ✓ Conduct a policy review
- ✓ Prioritize inclusive placements using the IEP/IFSP process
- ✓ Review and modify resource allocation
- ✓ Enhance professional development for LEA administrators, directors, principals, teachers, providers, administrative and support staff
- ✓ Ensure access to specialized supports for staff to build capacity in promoting children’s learning, social-emotional, communication and behavioral development
- ✓ Assess the quality of inclusive settings
- ✓ Establish a supporting staffing structure
- ✓ Develop formal collaborations with community providers

1. Partner with Families

Families are young children’s first and most important teachers and advocates. Ensure all families are knowledgeable about the benefits of inclusion. Build their capacity to advocate for their children and for inclusion if they choose, and make sure they understand their rights and how to navigate the systems that serve their children. Include families in policy development, advocacy efforts, and public information initiatives. Invite them to inclusion forums and conferences. Talk with them frequently, partner with them on their children’s learning and development, share information on developmental screening and child assessment data regularly, ask for their perspectives on their children’s strengths and needs, and connect them to additional services and supports, as needed, such as family to family health resource centers.

Build staff’s capacity in family engagement. Respect and incorporate families’ cultures, preferences, and priorities into their children’s learning. Ensure administrative, custodial, and other support staff understand the program’s culture of inclusion and interface with families respectfully and compassionately. Provide continuous professional development to teachers and providers on forming strong goal-oriented relationships with families that are linked to their child’s development.

2. Adhere to Legal Provision of Supports and Services in Inclusive Settings with IFSPs/IEPs

IFSP and IEP teams make service and setting decisions for children with disabilities based on their individual needs. LEAs, schools, and other local early intervention agencies should review their IFSP/IEP processes to ensure that natural environments and inclusive settings are meaningfully discussed for each child and that the first options considered for infants, toddlers, and preschool children with disabilities are those that would be considered for children without disabilities. IFSP/IEP goals, progress measurement, strategies, and supports should be written with the intent of implementation in a natural environment or inclusive setting, such that goals and outcomes can be met with the provision of services and supports in these settings. For example, if a child in Head Start is identified with a disability, their special education services should be provided in their Head Start program. Families should not be given an “either/or” option, such that they must choose between Head Start *or* special education services. Early childhood teachers and providers^{ix}, child development specialists, and related service providers, should be included on IFSP teams, with parent permission. IEP teams are required to include at least one regular education teacher if the child is participating in the regular education environment. Teachers and providers should understand children’s goals, strategies to meet goals, and their role in helping children reach their goals.

3. Assess and Improve the Quality of Inclusion in Early Childhood Programs

Children’s progress in meeting their developmental and learning goals is typically monitored through formative assessments. Children’s assessments should be paired with environmental assessments of their early childhood programs to ensure that there are appropriate accommodations and supports to reach their goals. A high-quality inclusive class ensures both access and participation. Assessments of these may be layered on existing environmental assessments. Programs can use results of assessments to guide TA and professional development efforts.

4. Review and Modify Resource Allocation

Resource allocation plays an important role in inclusion. In many cases, LEAs, schools or early childhood programs use a large part of their funding for children with disabilities on segregated classrooms. Early childhood leaders, including family child care network leaders, can examine the ways they allocate funds

^{ix} Including family child care and center-based child care providers.

that serve children with disabilities and modify them to promote inclusion by considering and acting on the following points:

- ✓ *How are IDEA funds, including Parts B and C funds, used to provide services in inclusive programs or natural environments with typically developing peers to the maximum extent appropriate, in accordance with the provisions of IDEA?*
- ✓ *How are we supporting the use of evidence-based practices for the most effective child developmental outcomes?*
- ✓ *How might resource allocation support special educators shifting from full time teachers to providing consultative services to early childhood teachers and community providers?*
- ✓ *How might we support early intervention, special education, and related services providers in providing consultative services to early childhood teachers, providers, and staff?*
- ✓ *Can we distribute existing specialized materials and equipment currently in segregated settings across general early childhood programs?*
- ✓ *How are resources being used to expand access to professional development opportunities on supporting children with disabilities to all staff and providers?*

5. Enhance Professional Development

High-quality staff must have a strong understanding of the concept of universal design, and knowledge, competencies, and positive attitudes and beliefs about inclusion and disability in order to foster the development of all children. Preparation and professional development in each of these areas is necessary for all staff, including LEA administrators, early childhood program directors, school principals, family child care network leaders, teachers and providers, early interventionists, special educators, related services providers, and aides. LEAs, schools, and programs must ensure that the necessary infrastructures and supports are in place to enable continuous professional development and improvement of all leaders and staff. Programs with dedicated professional development funds such as LEAs and Head Start programs should ensure professional development in the area of inclusive early childhood programming is not only available to their own staff, but is also open to local early childhood partners from child care and family child care settings.

- ***LEA Administrators, Early Childhood Directors, Principals, and Family Child Care Network Leaders*** are critical to high-quality inclusion in early childhood programs. These leaders may establish priorities, policies and procedures; set the culture and climate of the district, school, program or network; oversee staff development and morale; and provide continuity when staff turnover occurs. Leaders should participate in regular professional development opportunities that include reviews of the literature on inclusion, guidance on how to establish a culture of inclusion and enact strong inclusive policies, and practical budgeting and resource allocation strategies that support inclusion. Leaders should also establish local learning communities with other local early childhood leaders to share lessons learned, brainstorm challenges, and collaborate on solutions. Leaders should establish policies that require all staff and providers to engage in professional development specific to adopting a culture of inclusion, and supporting the learning and developmental needs of children with disabilities through individualized learning. They should also ensure that staff and providers have specific time set aside for in-service training and coaching, and to engage in reflection, planning, problem solving, and peer learning on issues related to inclusion.

- **Teachers and Providers** are essential to ensuring that all children are afforded high-quality early experiences. Supported by specialists and their LEA, school, or program leaders, teachers and providers must possess the skills to meet the learning needs of all children. Through intentional preparation, training, and supports, teachers, providers and other staff can feel confident in their abilities to serve children with diverse needs. All general professional development opportunities offered to early childhood staff should incorporate how the content applies and can be individualized for children with disabilities. LEAs, schools, and early childhood programs should strive to support their workforce and strengthen their capacity in:
 - Assessing unique learning styles and implementing individualized instructional strategies to reach learning and developmental goals for all children;
 - Designing all activities, such as free play, circle time, learning groups, outdoor play, or snack time, to fully support the participation of all children, including children with disabilities;
 - Integrating IFSP/IEP goals into children’s learning across everyday routines;
 - Implementing DEC Recommend Practices;⁴⁷
 - Documenting and sharing developmental progress with families and other service providers;
 - Promoting social-emotional development, and appropriately addressing challenging behavior;
 - Identifying and facilitating social learning opportunities between children with disabilities and their peers across all activities throughout the day;
 - Forming strong, supportive, nurturing relationships with children and their families;
 - Conducting ongoing developmental monitoring, universal developmental and behavioral screenings at recommended ages, and follow-up, as needed;
 - Collaborating with community-based service providers, including local disability support agencies and children’s medical homes; and
 - Having a strong understanding of culture and diversity and employing self-reflective strategies to identify, prevent and correct all implicit and explicit biases, including racial/national origin/ethnic, sexual orientation, and disability biases.
- **Early interventionists, Special Educators and Related Services Personnel** play a unique role in supporting young children’s access to and participation in inclusive early childhood programs. Special education teachers and related services providers should deliver services to children with disabilities in early childhood programs and with support embedded in everyday routines and/or co-teach and coach early childhood teachers and providers, as opposed to working with children in separate settings or pulling children out of their settings for specialized instruction. In addition to having strong competencies in working directly with children with disabilities, leaders should ensure that these professionals have the capacity to:
 - Understand the goals, curriculum, and approach used in the early childhood program;
 - Build relationships and partnerships with early childhood providers and teachers;
 - Use evidence-based consultation and coaching models;
 - Co-teach in an early childhood program; and
 - Build trusting relationships with families and work with them to identify inclusive options.

6. Establish an Appropriate Staffing Structure and Strengthen Staff Collaboration

Establishing staffing structures and increasing staff collaboration may require programs to shift existing resources and systems. Early childhood classrooms or settings may consist of a skilled lead teacher or provider and a paraprofessional or aide, supported by early interventionists, special educators and related services providers. Programs should strongly consider implementing co-teaching models. Programs, schools, and networks should also have a disability or inclusion coordinator, who oversees child goals, coordinates child services with other service providers, connects children and families with additional services as needed, and helps families navigate services for their children. Allocate staff time for coordination and collaboration between the professionals who work with young children. This facilitates comprehensive coordinated services, enables staff to understand their roles, the roles and responsibilities of others, and how to work as a team to facilitate children's learning and development.

7. Ensure Access to Specialized Supports

Early childhood programs, schools, and family child care networks should have access to specialized supports delivered by experts like early interventionists, inclusion specialists, early childhood mental health consultants, behavior consultants, special educators, developmental specialists, or other related services providers, such as speech-language pathologists and occupational therapists. This specialized support can increase the quality of early learning experiences for *all* children. It would provide assistance in adapting the program's environment, activities, and instructional support to promote full participation of children with disabilities. Specialists may also assist schools and programs by conducting classroom observations and developing strategies to meet children's goals, including IFSP and IEP goals; including behavior support plans for children who require them and provide guidance on implementing those plans; and connecting children, families, and staff to additional support services, as needed. Specialists should be coordinated so that each is aware of the goals, strategies, and progress of the others.

8. Develop Formal Collaborations with Community Partners

Formal collaborations between community partners, including the medical home and developmental specialists, may improve screening, evaluation, and referral systems, data sharing, and may help ensure children who need additional supports receive them as soon as possible. In addition, young children with disabilities and their families often require services that may be delivered by providers outside of their early childhood programs. Many children transition from infant/toddler early childhood programs to preschool, and all young children eventually graduate from their early childhood program and progress to elementary school. Due to these transitions, early childhood programs, schools, and family child care networks should be aware of other service providers in their community and establish formal agreements with them and with each other to ensure alignment. This may also help facilitate child transitions from inclusive early childhood programs to inclusive elementary school settings. Formal agreements are critical for fulfilling the LRE requirement, particularly in LEAs or schools that do not operate an early childhood program. Specifically, if LEAs do not operate inclusive early childhood programs, they should make formal agreements with community-based early childhood programs, such as Head Start or private preschool programs, to provide services in the LRE to children with disabilities in their district.

CONCLUSION

As the country continues to move forward on the critical task of expanding access to high-quality early childhood programs for all young children, it is imperative that children with disabilities be included at the on-set of each of these efforts, and be offered equal opportunities to benefit from these experiences. The case for meaningful inclusion of young children with disabilities, not only in early childhood

programs, but in the community more broadly is an essential component of our nation's efforts to ensure equality of opportunity for all Americans. The vision presented here, that all children have access to inclusive high-quality early childhood programs, requires a shared responsibility and commitment within communities, strong State and local leadership, and a robust partnership between families, schools, communities, and government at all levels. By striving toward this vision and implementing these recommendations, we can move forward as a country in honoring the rights of all of our youngest children and living up to the American ideal of offering an equal opportunity to all.

Appendix 1: Legal Foundation for Inclusion

Inclusion is not only supported by a moral and empirical foundation; it is also supported by a robust legal foundation with applicable statutes including the Individuals with Disabilities Education Act (IDEA), Section 504 of the Rehabilitation Act, the Americans with Disabilities Act (ADA), the Head Start Act, and the Child Care and Development Block Grant Act (CCDBG). These Federal laws recognize and support inclusion because of the developmental, educational, and social benefits that inclusion provides to children with disabilities.

The Individuals with Disabilities Education Act (IDEA)

The IDEA supports equal educational opportunities for children with disabilities birth through 21 by providing funds to States to assist them in developing and implementing systems of comprehensive services for all eligible infants and toddlers and children and youth with disabilities, from birth through 21. The IDEA supports infants and toddlers with disabilities receiving services in natural environments to the maximum extent appropriate and children ages three through 21 receiving services in the least restrictive environment (LRE) to the maximum extent appropriate. Through these requirements, children with disabilities are to receive the full range of supplementary aids and services to enable them to be educated with children who do not have disabilities, participate in the general educational or developmental curriculum, and participate in typical non-academic activities with nondisabled peers, to the maximum extent appropriate. <http://idea.ed.gov>

Part C of IDEA

The Program for Infants and Toddlers with Disabilities (Part C of IDEA) requires States that receive Part C grants to develop and implement a statewide, comprehensive, coordinated, multidisciplinary, interagency system that provides early intervention services for infants and toddlers with disabilities from birth through age two and their families and, at the State's discretion, to children with disabilities through age five (or until entry into kindergarten, whichever occurs earlier). Appropriate early intervention services for any infant or toddler with a disability are to be provided in natural environments, including the home, and community settings in which children without disabilities participate, to the maximum extent appropriate, as determined by the individualized family service plan (IFSP) team. The IDEA requires that the IFSP must include a statement of the natural environments in which early intervention services will be provided, including a justification of the extent, if any, to which services will not be provided in a natural environment, which justification must be individualized by the IFSP team and be based on the child's outcomes.

Part B, section 619 of IDEA

The Preschool Grants Program (Part B, section 619 of IDEA) provides formula grants to assist States, the District of Columbia, and Puerto Rico to provide special education and related services to children with disabilities aged 3 through 5, and at a State's discretion, to 2-year-old children with disabilities who will turn 3 during the school year. In order to be eligible for these grants, States must make a free appropriate public education (FAPE) available to all eligible children with disabilities ages 3 through 5. These special education and related services must be provided in the least restrictive environment (LRE). The LRE requirements of the IDEA state a strong preference for educating children with disabilities in general education settings alongside their peers without disabilities to the maximum extent appropriate. Under LRE requirements, the IDEA presumes that the first placement option considered for each child with a disability is the regular classroom the child would attend if he or she did not have a disability, with appropriate supplementary aids and services. Thus, before a child with a disability can be placed outside of the regular

educational environment, the full range of supplementary aids and services that could be provided to facilitate the child's placement in the regular classroom setting must be considered. In addition, IDEA regulations specify that a child with a disability is not to be removed from education in age-appropriate regular classrooms solely because of needed modifications in the general education curriculum.

In 2012, the Office of Special Education Programs (OSEP), Office of Special Education and Rehabilitative Services, U.S. Department of Education issued a Dear Colleague Letter reiterating that IDEA and LRE requirements apply to preschool children with disabilities. Each local educational agency (LEA) must ensure that FAPE is provided in the LRE in which a child's unique needs can be met whether or not the LEA operates a public general early childhood program. An LEA may provide special education and related services to a preschool child with a disability in a variety of settings, including their local public preschool program, if the LEA operates one, or, if the LEA does not operate a public program, other community-based settings, such as Head Start or community-based child care programs.

The letter states:

...many LEAs do not offer, or only offer a limited range of, public preschool programs, particularly for three- and four-year-olds. LEAs that do not have a public preschool program that can provide all the appropriate services and supports for a particular child with a disability must explore alternative methods to ensure the LRE requirements are met for that child. These methods may include: (1) providing opportunities for the participation of preschool children with disabilities in preschool programs operated by public agencies other than LEAs (such as Head Start or community based child care); (2) enrolling preschool children with disabilities in private preschool programs for nondisabled preschool children; (3) locating classes for preschool children with disabilities in regular elementary schools; or providing home-based services. If a public agency determines that placement in a private preschool program is necessary for a child to receive FAPE, the public agency must make that program available at no cost to the parent.

Section 504 of The Rehabilitation Act of 1973

Section 504 of The Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in public and private programs or activities that receive federal funds. This includes the responsibility to ensure that aids, benefits or services are provided in the most integrated setting appropriate to the person's needs. Section 504 applies to public or private preschools, child care centers, Head Start/Early Head Start programs, or family child care homes that receive federal funds either directly or through a grant, loan, or contract. <http://www2.ed.gov/policy/rights/reg/ocr/edlite-34cfr104.html#A>

Americans with Disabilities Act (ADA)

The Americans with Disabilities Act (ADA), in relevant part, protects individuals with disabilities from discrimination by public entities and public accommodations. Public entities and public accommodations include public or private early childhood programs such as family or center-based child care programs, public or private nursery schools, preschools, and also Head Start and Early Head Start programs run by public or nonpublic agencies. In general, the ADA requires that child care providers not discriminate against persons with disabilities on the basis of disabilities, that is, that they provide children and parents with disabilities with an equal opportunity to participate in and benefit from the child care center's services, programs or activities. The ADA also requires that public entities and public accommodations provide their services, programs or activities in the most integrated setting appropriate to the needs of the individual with a disability. Young children in public settings, such as Head Start programs, operated by public entities are covered by Title II of ADA, which prohibits disability discrimination by State and local

governmental entities, regardless of whether they receive Federal funds. Young children in most private programs, including small family child care programs, are covered by Title III of ADA, which prohibits disability discrimination by public accommodations, regardless of whether they receive Federal funds. http://www.ada.gov/2010_regs.htm; <http://www.ada.gov/childqanda.htm>

Head Start Act

Head Start promotes the school readiness of young children from low-income families and supports the mental, social, and emotional development of children from birth to age 5. In addition to educational services, programs provide children and their families with comprehensive services including health, mental health, dental, nutrition, social, and other services. Head Start services are responsive to each child and family's cultural and linguistic heritage. Since 1972, Head Start has required that at least ten percent of its enrollment opportunities are available to children with disabilities. Head Start and Early Head Start have exceeded this mandate and serve children in inclusive, developmentally appropriate programs.

The most recent Head Start Act reauthorization in 2007 further aligned Head Start and IDEA requirements so that “not less than 10 percent of the total number of children actually enrolled by each Head Start agency and each delegate agency will be children with disabilities who are determined to be eligible for special education and related services, or early intervention services, as appropriate, as determined under the Individuals with Disabilities Education Act. <http://eclkc.ohs.acf.hhs.gov/hslc/standards/law>

Child Care and Development Block Grant Act (CCDBG)

The CCDBG Act of 2014 requires States to develop strategies for increasing the supply and quality of child care services for children with disabilities. In addition, States must describe how they will coordinate their child care services with other services for young children with disabilities operating at the Federal, State and local levels, including services under Part C and Part B, section 619 of the IDEA. The law also allows States to use funds reserved to improve the quality of child care on professional development opportunities and specialized training on serving children with disabilities and their families. <http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization>

Resources:

U.S. Department of Justice Frequently Asked Questions about Child Care and the ADA

<http://www.ada.gov/childqanda.htm>

Office of Special Education Dear Colleague Letter on Preschool LRE

<http://www2.ed.gov/policy/speced/guid/idea/memosdcltrs/preschoollre22912.pdf>

Determining Least Restrictive Environment (LRE) Placements for Preschool Children with Disabilities: Reference Points and Discussion Prompts

<http://www.ectacenter.org/~pdfs/topics/inclusion/determining-lre-placements.pdf>

IDEA Provisions Supporting Preschool Inclusion

<http://www.pyramidplus.org/sites/default/files/images/IDEA%20Provisions%20Supporting%20Preschool%20Inclusion.pdf>

Appendix 2: Professional Developed Resources to Support Inclusion^{xx}

These materials focus on professional development resources that can be used to prepare personnel to serve young children with disabilities with their typically developing peers. These resources are intended to be used by personnel in State agencies, training and technical assistance systems, institutions of higher education, as well as by local program administrators and staff.

National Centers with Resources to Support Professional Development on Inclusion

Center on the Social and Emotional Foundations for Early Learning (CSEFEL) focuses on promoting social emotional development and school readiness. The website contains training modules, training kits, videos, practical strategies, and research syntheses.

CONNECT: The Center to Mobilize Early Childhood Learning Knowledge developed modules that are practice-focused instructional resources for faculty and other professional development providers. They are designed to build practitioners' abilities to make evidence-based decisions.

The Early Childhood Personnel Center (ECPC) facilitates the implementation of integrated and comprehensive systems of personnel development (CSPD) in early childhood, for all personnel serving infants and young disabilities. Resources include a map of States' standards and quality Indicators for a personnel/workforce system.

Early Childhood Technical Assistance Center (ECTA) provides a variety of national and State resources on inclusion, Least Restrictive Environments (LRE), and Natural Environments. The center developed a compilation of Quality Indicators of Inclusive Programs/Practices: A Compilation of Selected Resources.

Head Start Center for Inclusion created resources to assist personnel in Head Start programs to include children with disabilities. The website contains detailed training modules, PowerPoint presentations, video clips, and additional training resources such as worksheets and group activities.

Head Start Early Learning and Knowledge Center (ECLKC) serves as a portal to all Head Start and Early Head Start funded national centers, training resources, and regulatory requirements.

Head Start National Center for Quality Teaching and Learning provides resources on instruction, transition to kindergarten, and teacher development and a model for practice-based coaching.

Iris Center provides a variety of instructional modules on inclusion and early intervention/early childhood, video vignettes, and activities including resources on accommodations, working with families, transition to preschool and Research Summaries.

National Professional Development Center for Inclusion (NPDCI) developed landing pads with evidence-based practices around Access, Participation, and Supports. Tools were developed to assist States and communities design cross-sector systems of professional development.

- *Planning Matrix for Early Childhood Professional Development can be used as part of a statewide planning process to gather information from representatives of early childhood agencies and initiatives regarding professional development efforts.*

^x The Early Childhood TA Center (ECTA Center) and the Race to the Top – Early Learning Challenge Technical Assistance program (ELC TA) compiled this information from federally funded programs, national organizations, and States.

- *The Landscape: A Statewide Survey for Providers of Professional Development in Early Childhood is designed to help State agency administrators gather information about early childhood professional development activities across various sectors in a state.*

National Center on Child Care Professional Development Systems and Workforce Initiatives worked with Child Care and Development Fund grantees, Head Start/Early Head Start leaders, and their partners to design and implement professional development systems that align with other early childhood quality improvement efforts. The center developed the following guides:

- *Core Knowledge and Competencies Planning and Implementation Guide: This resource is a planning and implementation guide for developing, revising, and implementing core knowledge and competencies. The guide describes an aligned State and Territory professional development system.*
- *Distance Learning Planning and Implementation Guide: This resource is a planning and implementation guide for use in developing and strengthening distance learning options as part of an aligned professional development system.*
- *Technical Assistance Planning and Implementation Guide: This resource is a planning and implementation guide for developing and strengthening technical assistance supports.*

SpecialQuest was originally funded by the Office of Head Start and maintains a multi-media training library on inclusion and professional development resources.

The Pyramid Model Consortium is a nonprofit created to continue the Pyramid Model work after federal funding for the Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI) and the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) ended. The consortium provides a variety of training and TA resources.

Technical Assistance Center on Social Emotional Intervention for Young Children (TACSEI) uses evidence-based practices for improving the social-emotional outcomes of young children. It has developed a variety of training resources such as make and take workshops, tools, and materials for implementing the pyramid model.

Professional Associations and Organizations with Resources to Support Inclusion

American Speech-Language Hearing Association (ASHA) has a technical report on Inclusive practices for children and youths with communication disorders and guidelines on the Roles and responsibilities of speech-language pathologists in early intervention.

American Occupational Therapy Association (AOTA) has a practice guide on inclusion and a number of resources on servicing young children with disabilities.

Division for Early Childhood (DEC)'s Inclusive Programs and Practices Special Interest Group (SIG) was created to increase the number and quality of early education, intervention, and community programs that include young children with disabilities, including those with needs for more significant support.

Early Childhood Inclusion: Joint NAEYC and DEC Position Statement from the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC).

Kids Included Together (KIT) has compiled a number of resources that are targeted towards supporting inclusion in early childhood programs.

National Association for the Education of Young Children (NAEYC) Early Childhood Workforce Systems Initiative (ECWSI) assists states in developing, enhancing, and implementing policies for an integrated early childhood professional development system. *Strategic Directions: Technical Assistance Professionals in State Early Childhood Professional Development Systems* (2012) examines the growing field of professional coaches, mentors, and consultants working with early childhood programs.

Appendix 3: State-Developed Resources to Support Inclusion

California

BEGINNING TOGETHER was created in collaboration with the California Department of Education's Early Education & Support Division and the WestEd Center for Child and Family Studies as an inclusion support to the Program for Infant/Toddler Care (PITC). The project conducts a "training of trainers" institute, and provides regional outreach activities, written materials, and support to institute graduates.

M.A.P. to Inclusion and Belonging – Making Access Happen is administered by WestEd and funded by the California Department of Education's Early Education & Support Division with a portion of the Federal Child Care Development Fund Quality Improvement Allocation. The project supports the inclusion of children with disabilities ages birth to 21 in child care, after school, and community settings. The website contains child care training resources, a video collection, and links to a local strategic planning initiative.

The California Inclusion and Behavior Consultation (CIBC) is coordinated by WestEd and funded by the Early Education and Support Division of the California Department of Education. The CIBC Network is designed to respond to requests for technical assistance and provide on-site consultation services to staff in early care and education programs. Videos and written resources are available.

Seeds of Partnership: Family Engagement and Professional Development in Special Education is funded by the Special Education Division of the California Department of Education. The project supports family engagement, monitoring requirements and professional development activities aligned with the State Systemic Improvement Plan and Results Driven Accountability initiatives.

The Desired Results access Project supports special educators, administrators, and families in implementing the California Department of Education's Desired Results Assessment System for infants and toddlers with Individualized Family Service Plans (IFSPs) who are reported in the CASEMIS system and all preschool-age children not enrolled in transitional kindergarten or kindergarten who have Individualized Education Programs (IEPs). The project has training modules, webinar materials and a video library.

The Inclusion Collaborative focuses on inclusion of children with disabilities in child care, preschool, and the community. The collaborative provides Education Preparation for Inclusive Classrooms, a video collection, and an Inclusion Support Warm Line and on-site Inclusion Coach support.

Colorado

As part of its Online Course Resources, the Colorado Department of Education has a video collection with vignettes that support preschool inclusion. Webinar resources and training modules are offered.

As part of their Race to the Top – Early Learning Challenge Grant, the Colorado Department of Human Services' Office of Early Childhood and the Colorado Department of Education offer scholarships for students in State community colleges interested in teaching young children.

Delaware

Delaware MAPS (Meaningful Access Participation & Supports) is a component of Delaware's Early Childhood Inclusion Toolkit and is a project of the State of Delaware Expanding Inclusive Early Intervention Opportunities (EIEIO) Workgroup. The tool kit also includes a Guide to Promoting Inclusion in Early Childhood Programs (2013) which describes quality inclusive environments for children.

Florida

The Florida Training and Technical Assistance System (TATS) is a statewide project funded by the Department of Education, Bureau of Exceptional Education and Student Services, which provides technical assistance to programs serving pre-kindergarten children with disabilities. The project's website contains information on Inclusion/Continuum of Supports, as well as videos, webinars, and podcast resources for literacy and dual language learners. TATS provides a community of practice and site-based consultation. The Florida Expanding Opportunities for Early Childhood Inclusion Initiative in collaboration with the Central Directory created a tool kit called Count Me In.

The Florida Inclusion Network (FIN) collaborates with all districts and schools to provide customized services and supports to students with disabilities. Best Practices for Inclusive Education (BPIE) is a district-level self-assessment tool and process to identify and prioritize areas of need for inclusive practices that enable all students with disabilities to achieve their highest potential.

Idaho

Idaho Stars is a voluntary program that provides training based on national quality standards to child care programs. Online courses on effective communication and collaborative practices with professionals and families and building partnerships with families are offered. The professional development system offers incentives and scholarships as well as site-based coaching strategies. Special Needs is one of their ten key knowledge components.

Maine

The Early Childhood Settings Inclusion Toolkit developed by the Maine's Expanding Inclusive Opportunities (MEIO) Initiative, provides videos on inclusion and universal design, a checklist for compliance with the Americans with Disabilities Act and considerations for reviewing program practices.

Maryland

Making Access Happen is a project of the Maryland State Department of Education and the Johns Hopkins University School of Education. A webinar describing the project is available. It is designed to increase the participation of three to five year old children with disabilities in public and private community-based early care and education programs by providing teachers and service providers with job embedded professional learning opportunities through a reflective coaching model and mentoring, a Reflective Coaching and Collaboration Checklist, communities of practice, and online modules. Mini grants to districts are available through incentives.

The Maryland Social Emotional Foundations for Early Learning MD (SEFEL) initiative represents a partnership between the University of Maryland and the Maryland State Department of Education. The project features resources for coaching and training modules.

Minnesota

The Center for Inclusive Child Care is a centralized, comprehensive resource network supporting inclusive care for children in community settings. The center provides inclusion coaching and consultation services, online modules, and tool kits.

Reaching Potential Through Recommended Practices (RP²) is an intensive technical assistance initiative offered by the ECTA Center. The initiative is designed to implement, sustain and scale up the use of selected DEC Recommended Practices that are aligned with improving child engagement.

Minnesota Centers of Excellence for Young Children with Disabilities supports a regionalized approach to the professional development system in Minnesota. Each region is coordinated by a Regional ECSE Professional Development Facilitator responsible for coordinating professional development activities. The center offers an online course, Bridging Education and Mental Health provides eight modules including a module on Environments and Experiences that Enhance Children's Development. Additional online courses and E-modules are available.

Center for Early Education and Development (CEED) offers a variety of online courses including a course on Working with Parents of Young Children: Considerations for Special Populations.

New Hampshire

The Preschool Technical Assistance Network (PTAN) is a statewide technical assistance and support network that receives funding from Bureau of Special Education, the Child Development Bureau, and school districts. The PTAN Child Care Inclusion Project provides consultation, training, and technical assistance. PTAN Partnerships for Preschool Inclusion: Self-Evaluation Tool provides a framework for discussion that promotes partnerships and teaming.

North Carolina

The North Carolina Early Learning Network (NC-ELN) Inclusion Initiative, funded by the Department of Public Instruction, has developed a variety of inclusion resources and planning tools, including a planning guide, training modules and a self-assessment to facilitate the development of comprehensive community plans and agreements to encourage school districts to work within their communities to expand inclusive placement opportunities. Job embedded professional development and technical assistance is offered.

Utah

The Child Care Professional Development Institute at Utah State University offers recognition through an All Means All Inclusion Award for licensed centers and family child care programs that have completed a Special Needs Endorsement. Awardees must provide information about how they support inclusion and have achieved at least two of specified criteria regarding inclusive practices.

Virginia

The Virginia Intervention Professional Development Center provides an online module (called Journey to Inclusion), videos, and a resource landing pad. The Virginia Cross Sector Professional Development Team website provides information for teaching all students together and supporting Professional Development providers.

Specialized Certification, Credentialing, and Competencies

Delaware

An Inclusion Certificate is offered to early childhood professionals by the Delaware Department of Education, in collaboration with the Delaware Institute for Excellence in Early Childhood.

Florida

Florida's Targeted Competencies for Specialists Supporting Inclusion was developed by the Florida Expanding Opportunities for Early Childhood Inclusion Team to ensure that specialists who support children from birth through age 5 with disabilities and their families within and across early childhood program sectors have the necessary knowledge, skills, and dispositions.

Oregon

The Core Body of Knowledge for Oregon's Childhood Care and Education Profession includes a section on inclusion on pages 43-45.

Rhode Island

Rhode Island's Workforce Knowledge and Competencies for Early Childhood Teachers and Early Intervention/Early Childhood Special Educators articulates the essential skills and knowledge for educators by defining how to promote young children's healthy development and learning.

Rhode Island Workforce Knowledge and Competencies for Early Childhood Teacher Assistants articulates the essential skills and knowledge that teacher assistants who work with young children need to know, understand, and be able to do to promote young children's healthy development and learning.

Rhode Island Early Learning and Development Standards articulate the shared expectations for what young children should know and be able to do, and provide a common language for measuring progress towards achieving specific learning goals.

Planning Tools and Self-Assessments

New Hampshire

PTAN Partnerships for Preschool Inclusion: Self-Evaluation Tool is a self-evaluation tool that is designed to provide a framework for discussion that promotes partnerships to benefit young children with disabilities and their families.

North Carolina

The North Carolina Early Learning Network (NC-ELN) Inclusion Initiative, funded by the Department of Public instruction, has developed a variety of inclusion resources and planning tools including the North Carolina Preschool Inclusion Initiative: Self-Assessment Tool, which provides a framework for discussion that promotes partnerships.

Pennsylvania

Pennsylvania Preschool Inclusion: Self-evaluation Tool is a self-evaluation tool that is designed to provide a framework for discussion that promotes partnerships to benefit young children with disabilities and their families.

Appendix 4: Resources for Families of Children With and Without Disabilities

Information and resources for families of children with disabilities

Center for Disease Control and Prevention: Family Caregivers

General caregiving guide and resources for families of children and adults with disabilities.

<http://www.cdc.gov/ncbddd/disabilityandhealth/family.html>

Center for Parent Information and Resources (CPIR)

CPIR serves as a central resource for families of children with disabilities. The site includes links to parent centers in states that provide information and training about disabilities; parent and child rights under IDEA and other relevant laws; and other local and national resources.

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

Components of Inclusive Education

Kids Together is a non-profit information and resource center focused on removing barriers that exclude people with disabilities. This page includes talking points and resources for creating inclusive learning settings from early childhood through the school age years.

<http://www.kidstogether.org/index.htm>

Council for Exceptional Children (CEC)

CEC works to improve the educational success of children and youth with disabilities and/or gifts and talents.

<http://www.cec.sped.org/>

Disability.gov

The Federal government's website for information on disability programs and services nationwide.

<https://www.disability.gov/>

Factsheet of Research on Preschool Inclusion

This factsheet was put together by leading researchers and includes the main talking points about early childhood inclusion, supported by links and references to research information.

<http://www.pyramidplus.org/sites/default/files/images/Inclusion%20Fact%20Sheet%202014.pdf>

Head Start Center for Inclusion: For Families

This page was designed specifically for families of young children with disabilities participating in Head Start and Early Head Start, but has widely applicable resources for supporting and including children with disabilities at home and in classroom settings.

<http://depts.washington.edu/hscenter/families>

National Association of Parents with Children in Special Education: Resources for Parents (NAPCSE)

NAPCSE provides a resource library of sites and topics identified by practitioners as the most relevant issues in the field, and a professional directory to connect with local resources.

<http://www.napcse.org/resources.php>

National Center for Learning Disabilities (NCLD) Parent Toolkit

The NCLD site houses resources for parents of young children with learning and attention issues through the end of their school age years. Resources for parents of young children include an interactive parenting coach with ideas for handling social, emotional, and behavioral challenges in different situations.

<https://www.understood.org/en>

National Council on Disability (NCD): Chapter 13 Supporting Parents with Disabilities and Their Families in the Community

NCD is an independent federal agency committed to disability policy leadership. This NCD publication reviews the types of supports needed for children with disabilities and their families to be meaningfully included in community settings.

<http://www.ncd.gov/publications/2012/Sep272012/Ch13>

National Down Syndrome Congress: Inclusion Works!

Information to counter arguments against Inclusive Education for children with Down Syndrome. This information was compiled by national experts on disability and references experiences of families who have children with Down Syndrome.

<http://www.ndscenter.org/?s=inclusion>

Special Needs Alliance

The Special Needs Alliance is a national, non-profit organization of member attorneys who serve people with disabilities and the families and professionals who support them.

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

Support for Families of Children with Disabilities

This site is an attempt to bring together a selection of some web-based resources for families, organize them in an accessible manner, and provide brief annotations.

<http://www.supportforfamilies.org/internetguide/>

Think Inclusive: 5 Videos That Will Change Your Mind About Inclusion

Think Inclusive is an online resource that promotes the full and authentic inclusion of people with disabilities in their school and communities through education and advocacy. The site includes brief videos (4-16 minutes) of young and school age children with a range of disabilities and levels of functioning being meaningfully included in public and private school settings.

<http://www.thinkinclusive.us/5-videos-that-will-change-your-mind-about-inclusive-education/#sthash.BsvhBU9i.dpbs>

U.S. Department of Education Resources for Parents about Disabilities

This is a collection of parent-focused technical assistance resources and resources about special education law and programming. State disability resources and organizations are also included on this resource list.

<http://www2.ed.gov/parents/needs/speced/edpicks.jhtml>

Family-to-Family Resources

Early Intervention Family Alliance

The Early Intervention Family Alliance is a national group of family leaders dedicated to improving outcomes for infants and toddlers with disabilities and their families. The EIFA works to assure meaningful family involvement in the development of Part C policies and their implementation at community, state and federal levels.

<http://eifamilyalliance.org/>

Family Voices

Family-to-family organizations in each state that connect experienced parents of children with special health care needs to parents coping with new diagnoses to navigate health care and school systems. Many of these organizations are federally funded Health Information Centers (HICs) that are non-profit and family-staffed that provide support and information to families of children and youth with special health care needs and the professionals who serve them.

<http://www.familyvoices.org/states>

National Federation of Families for Children’s Mental Health

A national, family-run organization linking state chapters that focuses on the issues of children and youth with emotional, behavioral, and mental health needs and their families. The organization emphasizes advocacy and giving families a voice in the formation of national policy, and services and support for children and youth with mental health needs and their families.

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

Universal Design

CAST

CAST is a non-profit that works to expand learning opportunities for all individuals through Universal Design for Learning (UDL). UDL is a framework to improve and optimize teaching and learning through flexible curricula for diverse learners based on how people learn.

http://www.cast.org/index.html#.VTV-iH_D_ZQ

University of Maine’s Inclusive Design Page

This page includes resources and considerations for designing environments so that the greatest number of people can use them without the need for adapting. Questions and resources specific to early childhood settings include how universal design applies to planning the curriculum and the development of teaching practices and materials so the widest range of learners can participate.

<http://umaine.edu/expandinclusiveopp/what-is-universal-design/>

Identifying a high-quality early learning program

Child Care Aware (CCA):

CCA is a research and advocacy group that houses a child care search engine. CCA has also provided information about health and safety, curriculum, and developmentally appropriate practices in early care and education settings. <http://www.childcareaware.org/>

This CCA page had particularly helpful considerations for choosing child care:

<http://www.childcareaware.org/parents-and-guardians/child-care-101>

Easter Seals ABCs of Choosing Child Care

Easter Seals provides services, education, outreach, and advocacy so that people living with autism and other disabilities can live, learn, work, and play in our communities. This list of questions was developed to help families research child care facilities.

http://es.easterseals.com/site/PageServer?pagename=ntl_abc

Developmental and Behavioral Health Screening

Birth to 5: Watch Me Thrive!

This is a coordinated federal effort to encourage healthy child development, universal developmental and behavioral screening for children, and support for the families and providers who care for them. There are links to resources for families and different kinds of providers serving infants, toddlers, and young children.

<http://www.acf.hhs.gov/programs/ecd/child-health-development/watch-me-thrive>

Centers for Disease Control and Prevention (CDC): Learn the Signs, Act Early

This CDC site has resources for tracking children's milestones from birth through age five. If parents have concerns about their children's development, suggested follow-up steps are provided.

<http://www.cdc.gov/ncbddd/actearly/>

Easter Seals Offers a Free, Confidential Online Screening Tool: Ages and Stages Questionnaire, Third Edition (ASQ-3)

This screening tool will help families guide and keep track of their children's growth and development during the first five years. The questionnaire takes 10-20 minutes and families are encouraged to come back and learn about their child's development over time.

<http://www.easterseals.com/mtffc/asq/>

Appendix 5: Resources for State and Program Administrators

Leadership and Policy Development

Policy Statement on Expulsion and Suspension Policies in Early Childhood Settings

The purpose of this policy statement is to support families, early childhood programs, and States by providing recommendations from the U.S. Departments of Health and Human Services and Education for preventing and severely limiting expulsion and suspension practices in early childhood settings.

<http://www.acf.hhs.gov/programs/ece/child-health-development/reducing-suspension-and-expulsion-practices>

The Division for Early Childhood's Statement on Leadership in Early Intervention and Early Childhood Special Education

DEC is one of the divisions of the Council for Exceptional Children (CEC) dedicated to improving the educational success of individuals with disabilities and/or gifts and talents. This position statement (2015) discusses how high-quality leadership can be developed and supported at all levels of services systems in early intervention and early childhood special education.

http://dec.membershipsoftware.org/files/Position%20Statement%20and%20Papers/LdrshpPositionStatement_final_Mar%202015%20%281%29%281%29.pdf

Joint position statement on early childhood inclusion by the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC)

This joint position statement (2009) was one of the first to offer a definition of early childhood inclusion that can be used to determine the key components of high-quality, inclusive ECE programs.

<http://dec.membershipsoftware.org/files/Position%20Statement%20and%20Papers/Inclusion%20Position%20statement.pdf>

Joint position statement on early childhood services by The Arc, and The American Association for Intellectual and Developmental Disabilities (AIDD)

The Arc and AIDD are national, community-based organizations advocating for and serving people with intellectual and developmental disabilities and their families. This position statement was adopted by the two organizations in 2008.

<http://www.thearc.org/who-we-are/position-statements/life-in-the-community/early-childhood-services>

Connecting Health, Human Services and Education Resources

Help Me Grow (HMG) National Center

HMG assists states in identifying at-risk children, and helps families find community-based programs and services. HMG is a system for improving access to existing resources and services for young children from birth to age eight. The website for the national center has resources for care coordination and cross-system collaboration.

<http://www.helpmegrownational.org/index.php>

Medical Home Initiatives and Resources by State created by the National Center for Medical Home Implementation (NCMHI)

Medical homes represent a partnership between the patient, family, and primary provider in cooperation with specialists and community providers. This state resource map provides an overview of pediatric medical home initiatives occurring through Medicaid and the Children's Health Insurance Program (CHIP). By learning about ongoing pediatric medical home initiatives in your state, state administrators can gain insight into how to coordinate efforts across multiple systems.

http://www.medicalhomeinfo.org/state_pages/

Planning for Professional Development Across Sectors

The Early Childhood Technical Assistance Center's (ECTA) Website on Inclusion in Least Restrictive Settings

This website includes a link to an archived webinar series with information about supports and resources to promote early childhood inclusion. Other helpful resources include understanding Least Restrictive Environment (LRE) requirements and determining appropriate placements, and a collection of resources summarizing the research on preschool inclusion.

<http://ectacenter.org/topics/inclusion/default.asp>

National Professional Development Center for Inclusion's (NPDCI) Planning Matrix for Early Childhood Professional Development

This matrix is used as part of a state-wide planning process to gather information from representatives of key early childhood agencies and initiatives about their agencies' professional development efforts. The tool is meant to provide agencies with a better understanding of statewide professional development efforts and potential areas for collaboration.

<http://npdci.fpg.unc.edu/resources/planning-matrix-early-childhood-professional-development>

NPDCI's The Landscape: A Statewide Survey for Providers of Professional Development in Early Childhood

This survey was designed to help state agencies gather information to compile a descriptive landscape of professional development in early childhood across multiple sectors.

<http://npdci.fpg.unc.edu/resources/planning-and-facilitation-tools/files/NPDCI-Landscape-survey-June2011>

The Office of Child Care's National Child Care Professional Development Systems & Workforce Initiatives:

This national TA center builds on state and territory capacities to prepare and sustain a qualified workforce across ECE sectors

<https://childcareta.acf.hhs.gov/professional-development-systems-and-workforce-initiatives>

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- ¹ Buysse, V., Goldman, B. D., & Skinner, M. L. (2002). Setting effects on friendship formation among young children with and without disabilities. *Exceptional Children, 68*, 503–517
- ² 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*, 169–183.
- ³ 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*, 224-235.
- ⁴ 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.
- ⁵ Strain, P.S., & Hoyson, M. (2000). The need for longitudinal, intensive social skill intervention: LEAP follow-up outcomes for children with autism. *Topics in Early Childhood Special Education, 20*, 116–122.
- ⁶ Odom, S. L., Hanson, M. J., Lieber, J., Marquart, J., Sandall, S., Wolery, R., Horn, E., Schwartz, I., Beckman, P., Hikido, C., & Chambers, J. (2001). The costs of preschool inclusion. *Topics in Early Childhood Special Education, 21*, 46–55.
- ⁷ Barnett, W.S., Carolan, M.E., Squires, J.H., Clarke Brown, K., & Horowitz, M. (2015). *The state of preschool 2014: State preschool yearbook*. New Brunswick, NJ: National Institute for Early Education Research.
- ⁸ 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.
- ⁹ Strain, P. S., & Bovey, E. H. (2011). Randomized, controlled trial of the LEAP model of early intervention for young children with Autism Spectrum Disorders. *Topics in Early Childhood Special Education, 31*, 133–154.
- ¹⁰ Rafferty, Y., Piscitelli, V., & Boettcher, C. (2003). The impact of inclusion on language development and social competence among preschoolers with disabilities. *Exceptional Children, 69*, 467–479.
- ¹¹ Grisham-Brown, J., Pretti-Frontczak, K., Hawkins, S., & Winchell, B. (2009). Addressing early learning standards for all children within blended preschool classrooms. *Topics in Early Childhood Special Education, 29*, 131-142.
- ¹² Green, K., Terry, N., & Gallagher, P. (2014). Progress in language and literacy skills among children with disabilities in inclusive early reading first classrooms. *Topics in Early Childhood Special Education 33*, 249-259.
- ¹³ Strain, P. S., & Bovey, E. H. (2011). Randomized, controlled trial of the LEAP model of early intervention for young children with Autism Spectrum Disorders. *Topics in Early Childhood Special Education, 31*, 133–154.
- ¹⁴ Rafferty, Y., Piscitelli, V., & Boettcher, C. (2003). The impact of inclusion on language development and social competence among preschoolers with disabilities. *Exceptional Children, 69*, 467–479.
- ¹⁵ Nahmias, A., Kase, C., & Mandell, D. (2014). Comparing cognitive outcomes among children with autism spectrum disorders receiving community-based early intervention in one of three placements. *Autism, 18*, 311-320.
- ¹⁶ Rafferty, Y., Piscitelli, V., & Boettcher, C. (2003). The impact of inclusion on language development and social competence among preschoolers with disabilities. *Exceptional Children, 69*, 467–479.
- ¹⁷ Strain, P. S., & Bovey, E. H. (2011). Randomized, controlled trial of the LEAP model of early intervention for young children with Autism Spectrum Disorders. *Topics in Early Childhood Special Education, 31*, 133–154.
- ¹⁸ 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.
- ¹⁹ Strain, P. S. (2015). Inclusion for preschool children with disabilities: What we know and what we should be doing. In E. E. Barton & B. J. Smith (2015), *The preschool inclusion toolbox: How to build and lead a high quality program* (pp. 37–38). Baltimore, MD: Paul H. Brookes Publishing Co.²⁸
- ²⁰ Justice, L. M., Logan, J. R., Lin, T. J., & Kaderavek, J. (2014). Peer effects in early childhood education testing the assumptions of special-education inclusion. *Psychological Science, 25*, 1722–1729.
- ²¹ Wilson, G.L., & Michaels, C.A. (2006). General and special education students’ perceptions of co-teaching: Implications for secondary-level literacy instruction. *Reading and Writing Quarterly: Overcoming Learning Difficulties, 22*, 205–225.

- ²² Cawley, J.F., Hayden, S., Cade, E., & Baker-Kroczyński, S. (2002). Including students with disabilities into the general education science classroom. *Exceptional Children*, 68, 423–435.
- ²³ Strain, P.S., Bovey, E.H., Wilson, K., & Roybal, R. (2009). LEAP preschool: Lessons learned over 28 years of inclusive services for young children with autism. *Young Exceptional Children Monograph Series No. 11*, 49–68.
- ²⁴ 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, 224–235.
- ²⁵ Strain, P. S., & Bovey, E. H. (2011). Randomized, controlled trial of the LEAP model of early intervention for young children with Autism Spectrum Disorders. *Topics in Early Childhood Special Education*, 31, 133–154.
- ²⁶ DeSimone, J.R., & Parmar, R.S. (2006). Middle school mathematics teachers' beliefs about inclusion of students with learning disabilities. *Learning Disabilities Research and Practice*, 21, 98–110.
- ²⁷ Cawley, J.F., Hayden, S., Cade, E., & Baker-Kroczyński, S. (2002). Including students with disabilities into the general education science classroom. *Exceptional Children*, 68, 423–435.
- ²⁸ DeSimone, J.R., & Parmar, R.S. (2006). Middle school mathematics teachers' beliefs about inclusion of students with learning disabilities. *Learning Disabilities Research and Practice*, 21, 98–110.
- ²⁹ Eisenman, L.T., & Tascione, L. (2002). "How come nobody told me?": Fostering self-realization through a high school English curriculum. *Learning Disabilities Research and Practice*, 17, 35–46.
- ³⁰ Strain, P. S. (2015). Inclusion for preschool children with disabilities: What we know and what we should be doing. In E. E. Barton & B. J. Smith (2015), *The preschool inclusion toolbox: How to build and lead a high quality program* (pp. 37–38). Baltimore, MD: Paul H. Brookes Publishing Co.²⁸
- ³¹ Strain, P., (2015). *Lessons learned over three decades of inclusion for young children with autism: The LEAP preschool model*. Presentation at the 2015 National Early Childhood Inclusion Institute.
- ³² 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.
- ³³ Diamond, K. E., & Huang, H.-H. (2005). Preschoolers' ideas about disabilities. *Infants and Young Children*, 18, 37–46.
- ³⁴ Odom, S. L., Buysse, V., & Soukakou, E. (2011). Inclusion for young children with disabilities: A quarter century of research perspectives. *Journal of Early Intervention*, 33(4), 344–356.
- ³⁵ 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.
- ³⁶ Ward H, Morris L, Oldham E, et al. *Child Care and Children With Special Needs: Challenges for Low Income Families*. Portland, ME: University of Southern Maine, Muskie School of Public Service, Cutler Institute for Child and Family Policy; December 2006.
- ³⁷ Ward H, Morris L, Oldham E, et al. *Child Care and Children With Special Needs: Challenges for Low Income Families*. Portland, ME: University of Southern Maine, Muskie School of Public Service, Cutler Institute for Child and Family Policy; December 2006.
- ³⁸ 2013 Part B Child Count and Educational Environments Data File. Accessed on 4/17/15 at: <http://www2.ed.gov/programs/osepidea/618-data/state-level-data-files/index.html>
- ³⁹ Barton, E. E., & Smith, B. J. (2015). Advancing high quality preschool inclusion: A discussion and recommendations for the field. *Topics in Early Childhood Special Education*. Advanced online publication.
- ⁴⁰ Barton, E. E., & Smith, B. J. (2015). Advancing high quality preschool inclusion: A discussion and recommendations for the field. *Topics in Early Childhood Special Education*. Advanced online publication.
- ⁴¹ 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.
- ⁴² Odom, S. L., Hanson, M. J., Lieber, J., Marquart, J., Sandall, S., Wolery, R., Horn, E., Schwartz, I., Beckman, P., Hikido, C., & Cham-bers, J. (2001). The costs of preschool inclusion. *Topics in Early Childhood Special Education*, 21, 46–55.

- ⁴³ Centers for Medicare & Medicaid Services (CMS). (2014). *EPSDT- A Guide for States: Coverage in the Medicaid Benefit for Children and Adolescents*. Washington, DC: Centers for Medicare & Medicaid Services (CMS). Retrieved from <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Early-and-Periodic-Screening-Diagnostic-and-Treatment.htm>
- ⁴⁴ Soukakou, E. P. (2012). Measuring quality in inclusive preschool classrooms: Development and validation of the Inclusive Classroom Profile (ICP). *Early Childhood Research Quarterly, 27*(3), 478–488.
- ⁴⁵ Gilliam, W.S. (2007). Reducing Behavior Problems in Early Care and Education Programs: An Evaluation of Connecticut’s Early Childhood Consultation Partnership. IMPACT series, Child Health and Development Institute, Farmington, CT.
- ⁴⁶ Hepburn, K.S., Perry, D.F., Shivers, E.M., & Gilliam, W.S. (2013). Early childhood mental health consultation as an evidence-based practice: Where does it stand? *Zero to Three, 33*, 10-19.
- ⁴⁷ Division for Early Childhood. (2014). *DEC recommended practices in early intervention/early childhood special education*. Retrieved from <http://www.dec-sped.org/recommendedpractices>