



Equity & Inclusion for Children with Disabilities

Federal policy recommendations to advance equity & inclusion for young children with disabilities and developmental delays across the country.

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Authors

KAREN BERMAN
Senior Director, Illinois Policy

KATIE FISHER
Policy Manager, Consulting

MINA HONG
Director, Consulting

ZAREEN KAMAL
Policy Specialist, Illinois Policy

MELISSA LEDESMA
Independent Consultant

AMANDA SCHWARTZ
Independent Consultant

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Introduction

Equitable inclusion for young children with disabilities and developmental delays in early childhood opportunities is supported by both a human rights framework and evidence-based research. **Being meaningfully included as a member of society is a human right that all children deserve and should be able to access.**

Additionally, there is clear research on the benefits of inclusion for both young children with disabilities and their typically developing peers in early childhood programs and services. Despite this, it is well documented that nationally, young children with disabilities and delays and their families continue to face challenges with accessing inclusive early childhood services individualized to their needs in all settings, particularly young children of color.

To address this, the Alliance for IDEA Policy Initiative and other national partners developed these federal policy recommendations to advance equity and inclusion for young children with disabilities and developmental delays across the early childhood system. The development of the recommendations included:

1. A comprehensive review of research and other publications on what has already been elevated as policy priorities to support young children with disabilities and delays
2. Dissemination of a comprehensive survey to families and the field that garnered over 1,500 responses

3. 15 feedback sessions with over 120 families and direct service providers in English and Spanish

The resulting recommendations identifies actions that both Congress and federal government agencies overseeing early childhood programs across the Department of Education and the Department of Health & Human Services can and should take to better support young children with disabilities and delays. This document lays out recommendations across five areas:

1. Adequate and Robust Funding
2. Stable and Diverse Workforce
3. Governance that Enhances Coordination and Collaboration
4. Family- and Child-Centered Screening, Eligibility, and Evaluation
5. Equitable and Inclusive Services

Adequate & Robust Funding

All parts of the birth-to-five early childhood system including home visiting, Early Head Start and Head Start, childcare, preschool, and public-school systems need to have adequate financial resources so they can support the needs of young children with disabilities and developmental delays in all settings. This includes Congress providing increased federal funding for Early Head Start and Head Start; the Child Care & Development Block Grant (CCDBG); Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV); Every Student Succeeds Act (ESSA); Child Abuse Prevention and Treatment Act (CAPTA); Individuals with Disabilities Education Act (IDEA); and other federal programs. Funding should allow for the reduction of caseload sizes so the early childhood workforce can provide individualized supports to all children and support the holistic needs of children with disabilities and delays. Resources are also needed to ensure programs have ADA-compliant facilities and the physical environments needed to support young children.

In addition to adequately funding the entire birth-to-five system, federal funding is specifically needed to support young children with disabilities and developmental delays. The following recommendations identify the funding needed to ensure young children with disabilities and delays can access inclusive, responsive early childhood programs and services.

**“More federal funding
– [for] Medicaid and
IDEA!!!”**

CONGRESSIONAL ACTION

- Part C & B: Fully fund all IDEA programs.
- Part C & B: Permanently authorize IDEA Part C & Part D when IDEA is amended.
- Part C & B: Create new discretionary IDEA funding to support inclusion in community-based early care and education (ECE) settings and incorporate similar discretionary funding under Early Head Start and Head Start and CCDBG to support inclusion.
- Part C & B: As part of fully funding IDEA Part D, increase funding for Parent Training and Information Centers (PTIs) and invest a certain percentage of funds in providing families with support related to referral, evaluation and development of the Individualized Family Services Plan (IFSP) and Individualized Education Plans (IEP), including for families whose first language is not English and to consider the holistic needs of infant, toddlers and preschoolers with disabilities so they can access the services and supports needed to achieve key developmental milestones. Require each PTI to have at least one dedicated staff focused on supporting families with young children.

- Part C & B: Increase funding to state Developmental Disabilities Councils and invest a certain portion of funds in early childhood systems change, so Developmental Disabilities Councils consider the holistic needs of individuals with disabilities across the life spectrum including early childhood.
- Part C: Expand State Incentive Grants funding for states to expand eligibility to serve infants and toddlers in at-risk categories.

ADMINISTRATIVE ACTION

- Part C & B: Require states and provide technical assistance (TA) to analyze fiscal costs periodically – including workforce compensation – to understand total revenues needed to equitably deliver services to the diversity of young children with IEPs and IFSPs in all settings.
- Part C & B: Implement a cross-agency workgroup to develop a toolkit on blended and braided funding for State Education Agencies (SEAs); state lead agencies for IDEA Part B and C, CCDBG, MIECHV, and Medicaid; and LEAs. Provide dedicated TA to support blending, braiding, and maximization of federal, state, and local funds to support service delivery for young children with disabilities and delays.
- Part C: Change the Part C funding formula to allocate a portion of funds based on a State's relative share of young children living in poverty. Add additional incentives to state funding formulas for states that serve children at risk for development delay, serve children eligible under a broader list of medical diagnoses, and states that provide extended Part C services beyond the age of 3.
- Part C: Prohibit states from charging family fees or out-of-pocket expenses.

“Lack of funding – attempts to group children with different needs which may not match what child needs...”

Stable & Diverse Workforce

The cross-sector birth-to-five early childhood workforce needs to be stabilized and continue to grow. Federal funding must support a strengthened pipeline of early childhood professionals with dedicated funds to recruit, retain, and adequately compensate a diverse workforce that reflects the communities in which they serve, while also ensuring the wellbeing of the workforce. And, incentivizing cross-sector, cross-disciplinary, compensated professional development that leads with cultural humility, addresses implicit and explicit bias, and integrates collaborative practices is essential across all early childhood programs and services.

The Early Intervention (EI) and Early Childhood Special Education (ECSE) workforce specifically needs to be bolstered, as detailed by the recommendations below.

“High caseloads for providers lead to heavy turnover rates. Also, high case loads lead to children not receiving the supports they need.”

CONGRESSIONAL ACTION

- Part C & B: Expand and dedicate a portion of IDEA Part D funds to recruit, train, and retain a diverse, high-quality workforce specifically prepared to work in EI and ECSE. In addition to increasing workforce wages, this funding should focus on state-level systems to promote personnel preparation, workforce pipelines, professional development registries, “grow your own” programs, and other career and professional development systems; and support institute of higher education to attract and equitably prepare a diverse workforce.
- Part C & B: Increase federal scholarships and grants for individuals pursuing higher education to become Early Interventionists, ECSE teachers, and related service professionals including Infant and Early Childhood Mental Health (IECMH) consultants.
- Part C & B: Eliminate or create pathways towards elimination of student loans for all EI and ECSE professionals working with children with disabilities or delays after a certain number of years.

ADMINISTRATIVE ACTION

- Part C & B: Require states to collect and publicly report data on the demographics of their EI and ECSE workforce, including race, ethnicity, languages spoken, average compensation, and retention rates.

Governance that Enhances Coordination & Collaboration

The federal government must incentivize and promote opportunities for collaboration across the multi-sector early childhood system to ensure all families have access to high quality inclusive birth-to-five services regardless of geographic, cultural, linguistic, or economic circumstances. This includes better coordination and collaboration within and across agencies with clear governance to reduce fragmentation and breakdown silos; and to better align policies, guidance, data collection, and professional development to create seamless systems of support for young children with disabilities and delays. Governing bodies must also include more diverse and authentic representation of the families of young children with disabilities and delays and the providers who serve them, bolstered by investment to support their participation.

“More support for interdisciplinary collaboration across health care, early intervention, special education, etc.”

CONGRESSIONAL ACTION

- Across all early childhood programs: Fund states to strengthen data collection across all early childhood programs and services to allow for better understanding of how children with disabilities and delays are identified and where they receive their services through early childhood longitudinal, integrated, and interoperable data systems with unique identifiers. Require all early childhood state-reported data to the federal government are disaggregated by age, race, ethnicity, income level, English learner status, immigrant or refugee status, disability status, involvement in the child welfare system, and experiencing homelessness.
- Part C: Provide dedicated funding to support effective and diverse State Interagency Coordinating Councils (SICC). In addition to funding SICC staff, this funding should support representation by EI service providers and families of young children from diverse racial and ethnic backgrounds with equitable compensation and accommodations for participation. States should be incentivized to support Local Interagency Coordinating Councils (LICCs) to support coordination, alignment, and feedback loops between LICCs and SICC for better community-informed policy and systems changes for more equitable and higher quality EI.

- Part B: Provide dedicated funding to support effective and diverse State Special Education Advisory Panels. Provide resources to states to equitably compensate members to ensure significant representation by ECSE service providers and families of young children from diverse racial and ethnic backgrounds with equitable compensation and accommodations for participation.

ADMINISTRATIVE ACTION

- Across all federal early childhood programs: Within each of the major federal early childhood agencies, designate a staff position whose primary responsibility is to coordinate with their counterparts at each agency to better align federal program goals, funding streams, eligibility requirements, data collection, provision of technical assistance, and quality standards.
- Part C & B: Provide technical assistance to states to support effective shared or participatory governance structures and processes that rely on ongoing feedback loops between states and communities with authentic inclusion of diverse family and provider voices in systems change efforts.
- Part B: Require states to have early childhood educators from both school-based and community-based early childhood programs as part of the membership of the State Special Education Advisory Panel. The IDEA statute currently requires teachers to be members of the panel but does not specify early childhood educators. Also, require states have at least one parent of a child ages three to five with a disability or delay as part of State Special Education Advisory Panels.

Family- and Child-Center Screening, Eligibility & Evaluation

Across the comprehensive early childhood system, young children should routinely be screened for developmental delays and medical conditions and experience seamless referrals to EI or ECSE evaluations when needed. This means bolstering supports to the cross-sector early childhood workforce from pediatricians to home visitors to childcare teachers to family childcare providers and everyone in between so they can effectively partner with parents to screen young children and know when and how to refer families to services with cultural humility.

CONGRESSIONAL ACTION

- Across all early childhood programs: Adequately fund states to develop and maintain universal developmental screening – including social-emotional and trauma screening – and referral systems that’s inclusive of EPSDT across all early childhood programs and services that are tracked in states’ integrated data systems, including data on referral sources and when children are screened.
- Part B: When IDEA is amended, clarify that LEAs must serve children ages 3-9 under the category of developmental delay.

ADMINISTRATIVE ACTION

- Across all early childhood programs: Provide additional guidance, training, and professional development for the early care and education community, including family childcare, to support their work with families throughout the eligibility and evaluation process.
- Part C & B: Integrate into existing federal programs – like Learn the Signs, Act Early – strategies and guidance that promote racially, culturally, and linguistically responsive eligibility and evaluation processes, including access to evaluations in a family’s home language.
- Part C & B: Require states to maintain the same developmental delay eligibility criteria for Part B 619 as Part C to ensure smooth transitions from EI to ECSE. Similarly, eligibility for developmental delay should stay consistent up through the early elementary years.

“Child care providers need to be trained and provided with resources to do screenings.”

- Part C: Provide additional guidance and training to increase awareness and understanding of automatic eligibility criteria among health providers (including in birthing hospitals), early interventionists, and families. This includes the difference between evaluation and assessment for children who are automatically eligible through the medical condition diagnoses or at-risk criteria, and what types of services could be provided to children who may not yet be showing delay. Also, increase awareness around required collaboration between Part C and families connected to child welfare, families experiencing homelessness, and children of parents with substance misuse.
- Part C: Require States to provide families at least 24 months' advance notice of any changes to eligibility requirements under the Part C program.

“Make sure educators have access to screening tools to complete [screenings] and also have the training to feel comfortable to share results with parents.”

Equitable & Inclusive Service Delivery

Across the holistic birth-to-five early childhood system, young children with disabilities and delays have the right to be in early childhood programs and services with their typically developing peers while receiving the individualized supports they need that's absent of exclusionary discipline practices. All early childhood programs must be prepared to accommodate young children with disabilities and delays, including partnering and collaborating with EI, ECSE, and IECMH consultants so young children, particularly children of color, can receive the inclusive and equitable supports they need to thrive.

“[We need to] support practitioners to work with interpreters and families whose first language is not English.”

CONGRESSIONAL ACTION

- Part B: Pass federal regulations that include a clear definition of least restrictive environment (LRE) for 3–5-year-olds. It should clarify that LRE means children receive their services in settings with typically developing peers where they would have been educated had they not been disabled. Give states a transition period with financial resources, technical assistance and guidance on itinerant models, blended classrooms, and other staffing models to support broad implementation; and ensure disproportionality data is centered and addressed.
- Part C & B: Allocate additional federal funds to states to develop and implement an equity plan that includes: 1) identified subgroups and/or regions with inequitable access to EI and ECSE services, 2) an action plan to increase equitable access to services for those subgroups/in those regions, and 3) a proposed budget for executing the plan. The equity plan must engage diverse representation of families and providers to help identify the designated subgroups and/or regions and to co-create and monitor the implementation of the action plan to increase equity.

ADMINISTRATIVE ACTION

- Across all early childhood programs: Promote and increase access to professional development and guidance from IECMH consultants in ECE programs; and incentivize states to use models such as Project LAUNCH, the Pyramid Model, universal design for learning and other inclusion supports to improve social emotional supports and be responsive to all children’s strengths and needs.
- Part C & B: Improve data collection methods to identify disciplinary practices used within the ECE service delivery system to include disaggregation by factors such as race, ethnicity, gender, disability category, family income, and ECE or ECSE location.
- Part C & B: Require state reporting of average wait time between development of IFSP and IEP and receipt of services, including reporting of barriers that cause delay of receipt of services.
- Part C: Provide additional guidance on flexibility of delivering services in the natural environment and provide incentives for childcare including family childcare to be coached by an EI provider.
- Part B: Change IDEA data reporting requirements on preschool environments/LRE to better understand where preschoolers receive their special education services (e.g., school-based vs. community-based settings), other ECE programs they are involved with, reasons why families decline ECSE services, and disaggregated data by key demographics in addition to race and ethnicity.
- Part B: Factor early childhood inclusion indicators into states’ Part B determinations.
- Part C: Add a significant disproportionality indicator to states’ Part C State Performance Plan/Annual Performance Report that captures over- or under-serving of children in certain racial and ethnic groups, by primary home language, by homelessness, and by CAPTA referral. This new indicator for children in Part C should be factored into states’ annual Part C Determination Letter from OSEP.
- Part C & B: Require SEAs to ask all families receiving IDEA services about their satisfaction with their child’s services including where services were received and any perceived bias experienced. Require states to offer the Part C family outcomes survey and any other family-facing surveys in multiple formats (e.g., paper, digital, text message) and in multiple languages.

“Get rid of preschool special education classrooms and have services delivered in community early childhood settings.”

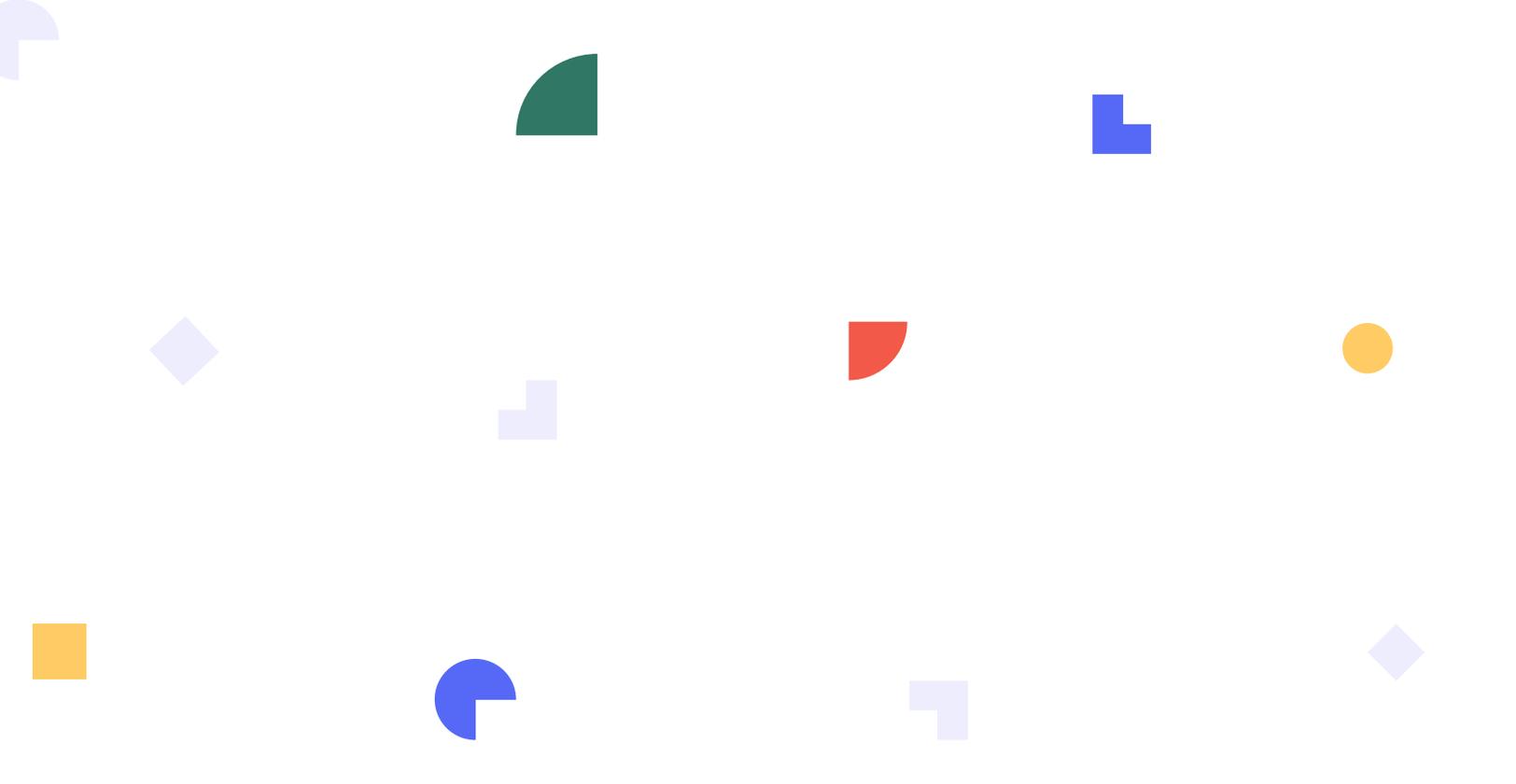
- Part C & B: Require all states to create a plan to eliminate any transitional gap between EI and ECSE and provide additional federal funds to support an extended IFSP option. All state plans should give families the flexibility to choose between an extended IFSP or transition to ECSE. Ensure families and providers are part of the process to develop the state plan including the SICC. In addition to beginning implementation, put this plan into state rules and regulations.
- Part B: Clarify Part B regulations to lay out a required process for supporting children receiving Part B 619 services during their transition to kindergarten. This includes a transition plan developed in partnership with the family, ECSE and preschool providers, Head Start, and other service providers, and Kindergarten and elementary school staff (if possible), and transfer of all key records that describe the child's development.

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