The Quality of Inclusion of Children with Developmental Disabilities During Transition from Early Intervention to School Programs

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Abstract

This poster proposes to consider the transition of young children with disabilities from early intervention services to school programs as a key moment for examining the quality of inclusion. Eleven in-depth case studies across three Canadian provinces were conducted during one year to access information from different sources about the transition process for children with DD. Results are presented about two participants with Down’s syndrome. Meaningful differences in terms of quality standards for successful inclusion were found between the early intervention and school context including: (a) the amount of adaptation and modification of material and educational activities; (b) educational staff support; and (c) collaboration with external therapists. The intensity of support facilitating social inclusion of the child was found to diminish during the transition process and educational goals associated with inclusion in the group varied considerably.

Background

Transition: an important but stressful time for parents and children

This period is important for sustaining gains made during preschool and for establishing the future social and academic development (Kemp & Carter, 2006).

Transition generates multiple changes for the child and the family

Shift in curriculum and educational context (LaParo et al., 2003)
Discontinuity in the service delivery system (Therrien, 2008)
Professional collaboration (Kemp & Carter, 2006)
Variation of the relationship model between parents and professionals: family centered (Dunst, 2002) vs Parent involvement

Strategies to promote successful transitions to school

Transition program: PST (Beaupré, Tétreault and Landry, 2008), TEEM (Conn-Powers, Ross-Allen and Holburn, 1995)
Transition practices: e.g. calendar, preparing child through skills development, establishing a strategy, facilitating communication between teachers and parents (Goupil, 2010; Kemp et Carter, 2006; Kraft-Sayre & Pianta, 2000)

Link between the transition and the quality of inclusion is rarely included in studies

Lack of objective measures based on the educational environment before and after transition and on the child outcomes (Jan et al, 2008, Gump et Plante, 2000)

Very few data on quality of care and quality of inclusion during transition (Kemp, 2003; Malone & Gallagher, 2009)

Objectives

Describe quality of inclusion of young children with developmental delays and disabilities as they transition into school

Identify stresses and challenges of parents when promoting the social inclusion of their child

Method

Multiple perspective case studies (n=11)

Data include interview, observation and document review

Emphasis on needs and expectations of family and professionals for each focal child

Measure: Description of the quality of the environment related to inclusion

I. Physical Environment, program of activities and special needs

1. Educational staff support

1.1. Physical Environment for Fabienne

Day care centre (preschool)

(1) Lives on the ground and programs (e.g., way to the toilet)

(2) Modifications to furniture, changing room and toilet

(3) Visual communication system introduced in class by speech and language therapist

(4) Visual Aids introduced by Occupational Therapist about classroom rules

Kindergarten (school)

(1) Very few adaptations or special equipment

(2) More structural areas for learning activities (symbolic play, group, learning table, etc.)

(3) No visual cue system

(4) Classroom computers but no assistive technology

1.2. Program of activities for Fabienne

Day care centre (preschool)

(1) 2 days in rehabilitation centre or individual therapist

(2) ECE with 6 children and specialist educator, PT, OT available

(3) General goals in the preschool curriculum are similar to those in the school curriculum

(4) Focus on social skills: cooperative learning, peer tutoring, sharing, initiation.

(5) Children limited in the centralization of health rehabilitation therapists to accommodate individual needs

(6) Rehabilitation therapists spend time and collaborate less with staff in the classroom than in daycare

Kindergarten (school)

(1) Needs met within the regular group and routines

(2) School over, one permanent special educator in the class

(3) Of 22 children have disabilities

(4) Number and diversity of activities more than in daycare

(5) Focus on cognitive abilities: communication, one-to-one rather than group tasks

(6) Extra adult in the classroom important but very few accommodations to facilitate inclusion

II. Educational staff support for Eric

Day care centre (preschool)

(1) Daycare known for inclusive approach

(2) Centre accepts and staff is used to accommodating children with different types and levels of disabilities

(3) A written inclusion policy supports inclusion

(4) Relatively large enrolment of children with disabilities in the daycare

(5) Special educator and ECE in class facilitate inclusion

Kindergarten (school)

(1) School less experienced with inclusion of disabled children

(2) Complain about lack of financial support for resources and extra staff to promote inclusion

(3) School has no written or verbal policy on inclusion

(4) Lack of accommodations and modifications to curriculum and limited supports to manage behavioural challenges

III. Collaboration with specialized services

Day care centre (preschool)

(1) Support from PE, OT, physio, speech and autism

(2) Coordination and supervision of activities and routines or activities or to carry out follow-up activities within group

(3) Assistive technology

(4) Communication, one-to-one rather than group tasks

(5) Best educators and therapists for Eric within the school

(6) Extra adult in the classroom important but very few accommodations to facilitate inclusion

School has no written or verbal policy on inclusion

(1) Lack of accommodations and modifications to curriculum

(2) Extra adult in the classroom important but very few accommodations to facilitate inclusion

QUALITY OF INCLUSION SHOULD BE CONSIDERED AN IMPORTANT OUTCOME MEASURE DURING THE TRANSITION OF YOUNG CHILDREN WITH DEVELOPMENTAL DELAYS OR DISABILITIES FROM DAYCARE TO KINDERGARTEN.

Discussion/Implications

Preliminary analyses show meaningful differences in the quality of inclusion in the daycare and kindergarten context of the child.

1. Physical Environment, program of activities and special needs

Lack of communication and transmission of knowledge between preschool and school and lack of flexibility in switching from one set of supports to another.

Shift in curriculum (activities dedicated to academic achievement in school) has an important impact on the quality of inclusion

It appears more challenging for the kindergarten than for the daycare to adapt educational programs and activities and classroom placements to meet the individual needs of student

2. Educational Staff Support

Written policy, strong leadership by the director and types of models are strongly influencing quality of inclusion

3. Collaboration with Specialized Services

Very few or no transition practices before school entry (e.g. cross program visiting, preparing child through skill development)

Parents have no choice regarding the placement of their child (integrated or segregated group) for the transition into elementary school

Quality of inclusion should be considered an important outcome measure during the transition of young children with developmental delays or disabilities from daycare to kindergarten.

Major References


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