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# Early Childhood Disabilities and Special Education

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The earliest years of life are full of rapid changes and transitions. Young children are all precious, especially to their caregivers, regardless of challenges to health, learning, and/or development that are common prior to school entry. Parents and early childhood teachers are usually the first to notice when infants, toddlers, and preschoolers are not developing and learning as expected. Parents and teachers are also in the best position to provide additional support and special care when it is needed. There is not always a clear difference, however, between the usual ups and downs of the early childhood years and developmental problems that indicate a need for special services.

Infants and toddlers generally acquire developmental milestones in a typical sequence, but no two develop at exactly the same rate or following the same patterns. Caregivers often wonder how to tell the difference between a child's unique timetable and a developmental problem. For example, most infants crawl before they walk, but some do not. A few take their first steps at 8 months and others not until 15 months. Many infants begin to use words around their first birthday, but others begin talking much later. Parents and other caregivers often understand toddler speech that sounds like gibberish to strangers.

All preschool children are learning to get along socially, to share and take turns and use inside voices, but some are unusually shy or overly aggressive. Both teachers and parents are familiar with common troublesome behaviors such as interrupting, refusing, tantrumming, hitting, and biting. Most young children quickly learn to replace problem behaviors with socially appropriate ones. Others persist in defiant or inappropriate behavior that has a negative effect on peer and adult relationships. These examples clearly illustrate the vast amount of variation among typically developing children. The hard questions teachers and caregivers sometimes face include: *At what point does an individual difference in the rate, sequence, or pattern of early development indicate a problem? When do the common problems of early childhood become serious enough to require special services?*

## WHAT IS A DISABILITY?

The concept of disability has many definitions and components, all of which sort children into two groups: those who have disabilities and those who do not. In reality, applying the concept of disability to early development can be confusing. Some children receive disability diagnoses as newborns, although developmental and learning problems may not become evident for some time. Conversely, parents and teachers often have concerns about the development and learning ability of some children long before a disability is identified.

### Definitions

Dictionary definitions for "disability" include words such as *incapacity*, *disadvantage*, and *handicap*, and indicate that disability has a negative effect on health, development, and/or learning. Medical definitions include diagnoses such as *Down syndrome*, *cerebral palsy*, *Fragile X syndrome*, *traumatic brain injury*, and *spina bifida*. Such labels refer to specific conditions that compromise a child's ability to interact, move, grow, and/or learn at expected rates and in typical sequences. This handout addresses early disabilities and special education services that address early developmental and learning needs in very young children.

### IDEA 2004

A federal law entitled Individuals with Disabilities Education Improvement Act (IDEA 2004) provides eligible children, starting at age 3, the right to special education services in U.S. public schools. Preschool children ages 3 to 5 are served under Part B of IDEA, which addresses assessment, individualized programs, and placements for 3- to 21-year-olds. Some states also provide special education services to infants and toddlers

under Part C of the same law. IDEA identifies specific disability categories such as *orthopedic and other health impairments, specific learning disabilities, autism, blindness and deafness, and mental retardation*. Each state defines disability to reflect health, learning, and developmental problems that can be addressed by special education. To be eligible for special education services, a child must have a disability that meets the state's definition for at least one of the IDEA categories and must also need special services.

Infants, toddlers, and preschoolers are most often eligible under the broad disability category of *developmental delay* because eligibility criteria for a more specific disability category tend to be unreliable or inappropriate for very young children. State definitions vary somewhat, but in general a developmental delay is considered to be significant disruption in the process of early development that is likely to have a negative effect on school performance. Temporary disruptions (such as illness, moving, or emotional upset) and minor departures (such as walking, talking, or completing toilet training later than usual) are usually resolved quickly with no lasting impact. A developmental delay, on the other hand, carries long term implications and the need for special care and support. Developmental delay does not necessarily mean a global delay, but is found in one or more of the major areas of development, including physical, cognitive, communication, social-emotional, or adaptive development.

### **WHEN SHOULD CAREGIVERS MAKE REFERRALS?**

All young children are growing and learning new things each day. We expect to see changes in what very young children know and are able to do from one week to the next. For this reason, identification of disabilities involves comparisons between each child and his or her peers, as well as monitoring changes in growth and development over time. Caregivers need to be familiar with expected ranges of development in order to know when a child might be showing signs of a significant delay or disability.

### **Birth to 12 Months**

Newborn infants have small repertoires of simple behaviors such as looking, sucking, turning eyes and heads, waving arms and legs, cooing, and crying. Most disabilities that are identified during infancy involve conditions that have a pervasive effect on health, basic movement, sight, and/or hearing. Serious disabilities are often identified at birth or during first year well-baby checks. Infants should be referred for evaluation if, by their first birthdays, they do not:

- Develop consistent sleep/wake patterns and routines
- Calm when familiar caregivers hold, cuddle, and talk soothingly

- Move with symmetry, balance, and coordination in increasingly upright postures such as sitting, crawling, walking
- Chew and swallow a variety of solid foods
- Use sounds and gestures to communicate; combine consonant and vowel sounds to make words

### **12 Months to 3 Years**

By the time children are 3 years old, they typically have learned the basic skills necessary for independent movement, communication, and social interaction. Disabilities identified during this period involve conditions that interfere with talking, walking, relating to peers, and using hands. Referrals for special services may be appropriate for 3-year-olds who do not:

- Use motor skills in play (running, climbing, jumping)
- Use fingers and hands to draw, build block structures, play with small toys
- Play near and with peers; begin pretend play
- Continue to increase vocabulary and combine words into increasingly longer sentences
- Use eating utensils, undress and dress themselves, use the toilet
- Learn simple concepts (hot/cold; up/down; in/out; big/little)
- Match a variety of actions to appropriate objects in play (hugging stuffed toys, turning pages of books, putting hat on head, stacking blocks)

### **3 to 5 Years**

During the preschool years children combine and coordinate a number of fundamental skills to become adept at communicating, moving about, socializing, and learning new information. Referrals may be in order for 6-year-olds who do not:

- Participate in groups; attend to adult leading groups of children
- Engage in cooperative and imaginative play with peers
- Ask and answer simple questions; consistently use full sentences
- Use balanced and coordinated motor skills in physical play
- Show understanding of print concepts ("reading" signs, logos, familiar books; "writing" notes, lists, labels)
- Demonstrate beginning knowledge of letters and numbers
- Eat, dress, and toilet independently

- Use present, past, and future tenses of primary language; use descriptive words (adjectives and adverbs)

It is important to consider the child's learning experiences when determining if preschoolers are truly having difficulty with these skills. A child who has never been to preschool and has mild delays in some of these preacademic skills may only need exposure to these types of tasks to "catch up" with normally developing peers.

### **IDENTIFYING DISABILITIES IN EARLY CHILDHOOD**

It's important to identify developmental delays and disabilities in early childhood because young children must be determined eligible to receive services under IDEA legislation. Young children have no time to lose when they need special services, and research suggests that earlier initiation of services is associated with improved outcomes. The process for determining the presence of a disability is fairly consistent for children from birth to school age.

#### **Early Identification and Screening**

Unless a medical diagnosis is made at birth or during a well-child visit, the first step in identifying a young child's disability is a concern raised by someone familiar with the child. Usually a parent, preschool teacher, or other caregiver becomes worried about a young child's development or learning because they have noticed delays in the skills listed on the previous pages. Pediatricians and child-care providers are often the first to receive referrals from parents, discuss concerns, and begin the process of identification.

The first assessment is usually a brief screening to determine if more comprehensive assessment is warranted. Screening assessments involve evaluating a few key skills in each of the major areas of development: physical, cognitive, communication, social-emotional, and adaptive. Pediatricians routinely conduct developmental screenings during well-child visits, and publicly funded early education programs such as Head Start also screen children annually. In many communities, schools, public health departments, and other agencies also provide early childhood screening clinics. Results of screening assessments indicate which children seem to be developing as expected, and also identify those for whom a comprehensive assessment is needed to determine if there are significant delays or disabilities.

#### **Comprehensive Evaluation and Services**

If screening results indicate a potential disability, a comprehensive evaluation is conducted to determine the nature and severity of the problem and establish a child's

eligibility for special services. Comprehensive evaluations generally involve a very careful and detailed assessment of the skills a child has in each area of development, and are often conducted by a multidisciplinary team of professionals.

#### **Birth to 3 Services**

Early intervention services for infants and toddlers with special needs, including eligibility evaluations, are provided by school districts in some states, and by health and human service agencies in other states. Once a child is determined to be eligible under Part C of IDEA, further assessment focuses on identifying the functional skills that very young children need to participate in daily routines and family life, such as eating, sleeping, moving about, interacting, and playing. Therapists, psychologists, and early interventionists may participate on assessment teams for birth to 3-year-olds, and parents also are considered to be important members of assessment teams. The team also discusses family priorities, concerns, and resources for the child being assessed. An Individualized Family Service Plan (IFSP) combines family priorities with child assessment results to determine unique and relevant outcomes for each family. Services for eligible infants and toddlers are provided in "natural environments" such as children's homes, neighborhood play groups, child-care settings, parks, libraries, or other places where families participate with infants and toddlers without disabilities.

#### **Preschool Services, Ages 3 to 5**

Local school districts are responsible for providing preschool special education services, including comprehensive evaluations. Children ages 3 through 5 are usually scheduled for an evaluation at the school by a multidisciplinary team of professionals. The evaluation team may include therapists, psychologists, and educators who participate in a detailed assessment. All the assessment results are combined to determine if the child meets eligibility requirements and needs special education. If the child is eligible, an Individualized Education Program (IEP) is designed that contains goals and objectives for each child. Preschoolers who are eligible for special education are usually served in preschool classrooms in the local school district, or community-based preschool programs that enroll children with and without disabilities.

### **THE ROLE OF PARENTS AND TEACHERS**

Parents and early childhood teachers often worry that the needs of young children with disabilities can only be met by special therapeutic, medical, and educational

professionals. Specialized instruction and therapies are important components of special education but, first and foremost, young children thrive in settings with familiar adults who know them and provide loving care. Parents and other caregivers of children with suspected or identified disabilities may find confidence in the following guidelines:

- Make referrals when you have a persistent concern about children in your care. Early identification of disabilities is strongly associated with positive outcomes.
- Trust what you know about individual children and share with the evaluation team. Your area of expertise is the unique knowledge of children in your care.
- Keep in mind that a disability diagnosis does not change the child in any fundamental way, but it may change how you think about the child. Remember, the child is still the same child.
- Continue to participate with the child in familiar caregiving routines and activities. Consistency is an important foundation for learning in early childhood.
- Keep the child involved in neighborhood and community-based services if at all possible. Children with disabilities often thrive with peers in familiar early childhood settings, especially with the additional support of special services.
- Work with special services personnel to embed IEP and IFSP goals, objectives, and outcomes into ongoing routines and activities at home and in preschool classrooms. Individual goals, objectives, and outcomes are most meaningful when children can use the skills in home, school, and community activities.
- Expect to learn about a lot of new information, acronyms, agencies, personnel, and teaching strategies. Many parents and early educators become experts about the disabilities of their own children.
- Realize that referral, assessment, eligibility evaluation, and diagnosis can be a very emotional process for parents. Early educators provide an invaluable service to parents by listening, being involved in the process, and offering personal support when parents need it.

## REFERENCE

Individuals with Disabilities Education Improvement Act.  
20 U.S.C. § 1400-1485 (2005).

## RECOMMENDED RESOURCES

### For Parents

Children's Disability Information: <http://www.childrensdisabilities.info>

Practical information and many links to other sites, including sites on specific disabilities.

PACER Center: <http://www.pacer.org>

Information for parents on advocacy, disability, IDEA, services, and resources, birth-21.

Parents Helping Parents: <http://www.php.com>

Guidance, support, and services designed and delivered from parents of children with special needs.

### For Early Educators

Division for Early Childhood: <http://www.dec-sped.org>

Early childhood division of the Council for Exceptional Children (CEC), an international professional organization for early childhood special education and early intervention, with many resources supporting inclusion of children with disabilities in early childhood programs.

National Association for the Education of Young Children: <http://www.naeyc.org>

Professional organization dedicated to the well-being of all young children ages birth to 8 years, also with resources on inclusion.

Zero to Three: <http://www.zerotothree.org>

A wealth of practical and educational resources specific to infants, toddlers, their families, and professionals who serve them.

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