



**early developments** Frank Porter Graham Child Development Center

**Summer 2001** | Volume 5, Issue 1

*pre-Kindergarten*

*Contents*

Pre-K at Issue

School Readiness

FPG Recent Publications

Pre-K for Children with Special Needs

*NCEDL News*

State Initiatives

State Policies on Readiness

New Directions

NCEDL Recent Publications



# Recent Publications

 from the Frank Porter Graham Child Development Center

**Author and reviewer guidelines: Reporting qualitative studies.** McWilliam, R. A. (2000). *Journal of Early Intervention*, 23, 77-80.

**Behavioral problems among preschool children in South Africa: A longitudinal perspective from birth to age five.** Richter, L., Griesel, D. & Barbarin, O. (2000). In N. Singh, J.P. Leung, & A.N. Singh (Eds.), *International perspectives on child and adolescent mental health*, pp.159-182. Amsterdam, Holland: Elsevier Publishers.

**Biology versus experience: Balancing the equation.** Reznick, J. S. (2000). *Developmental Science*, 3, 133-134.

**Changing paradigms for gifted education in the United States.** Gallagher, J. (2000). In K. Heller (Ed.), *International handbook of gifted education*, pp.681-694. Amsterdam, Holland: Elsevier Publishers.

**Characteristics and quality of child care for toddlers and preschoolers.** NICHD Early Child Care Research Network. (2000). *Applied Developmental Science*, 4(3), 116-135.

**Children's social and cognitive development and child care quality: Testing for differential associations related to poverty, gender, or ethnicity.** Burchinal, M. R., Peisner-Feinberg, E., Bryant, D., & Clifford, R. (2000). *Applied Developmental Science*, 4, 149-165

**Classification of teachers' interaction behaviors in early childhood classrooms.** de Kruijf, R. E. L., McWilliam, R. A., Ridley, S. M., & Wakely, M. B. (2000). *Early Childhood Research Quarterly*, 15(2), 247-268.

**Classroom behavior of elementary school-age boys with fragile X syndrome.** Symons, F.J., Clark, R.D., Roberts, J.P., & Bailey, D.B. (2001). *The Journal of Special Education*, 34(4), 194-202.

**Cultural resources and psychological adjustment of African-American children: Effects of spirituality and racial attribution.** Christian, M., & Barbarin, O. (2001). *Journal of Black Psychology*, 27, 43-63.

**Cumulative risk and early cognitive development: A comparison of statistical risk models.** Burchinal, M. R., Roberts, J. E., Hooper, S., & Zeisel, S. A. (2000). *Developmental Psychology*, 36, 793-807.

**Comfort zone revisited: Child characteristics and professional comfort with consultation.** Wesley, P. W., Buysse, V., & Keyes, L. (2000). *Journal of Early Intervention*, 23(2), 106-115.

**Economic status, community danger, and psychological problems among South African children.** Barbarin, O., & Richter, L. (2001). *Childhood*, 8(1), 115-131.

**Exposure to violence, coping resources, and psychological adjustment of South African children.** Barbarin, O., & Richter, L., & De Wet, T. (2001). *American Journal of Orthopsychiatry*, 71,6-25.

**Factors associated with fathers' caregiving activities and sensitivity with young children.** NICHD Early Child Care Research Network. (2000). *Journal of Family Psychology*, 14(2), 200-219.

**Families with young children: A review of research in the 1990s.** Demo, D., & Cox, M. (2000). (Special decade-in-review issue entitled "Understanding families into the new millennium"), *Journal of Marriage and the Family*, 62, 876-895.

**Family experiences and factors associated with the diagnosis of fragile X syndrome.** Bailey, D.B., Skinner, D., Hatton, D., & Roberts, J. (2000). *Developmental and Behavioral Pediatrics*, 21(5), 315-321.

**Family literacy programs: A promising practice for the twenty-first century.** Wasik, B. H., Herman, S., Dobbins, D. R., & Roberts, J. (2000). In D.B Day (Ed.), *Teaching and learning in the 21st century: Wise practices*, pp.7-19. Raleigh: NC Association for Supervision in Curriculum and Development.

**Home visiting: Procedures for helping families (2<sup>nd</sup> ed.).** Wasik, B. H., & Bryant, D. M. (2001). Thousand Oaks, CA: Sage.

**"I wish it wouldn't all depend upon me": Research on families and early childhood inclusion.** Erwin, E., Soodak, L., Winton, P., & Turnbull, A. (2001). In M. Guralnick (Ed.), *Early childhood inclusion: Focus on change*. pp.127-158. Baltimore, MD: Paul H. Brookes.

**Inclusive preschool programs.** Odom, S.L., & Bailey, D. (2001). In M.J. Guralnick (Ed.), *Early childhood inclusion: Classroom ecology and child outcomes*. pp.253-276. Baltimore: Paul H. Brookes.

**Innovations in professional development: Creating communities of practice to support inclusion.** Buysse, V., Wesley, P. W., & Able-Boone, H. (2001). In M. J. Guralnick (Ed.), *Early childhood inclusion: Focus on change*. pp.179-200. Baltimore, MD: Paul H. Brookes.

**Instructional perspectives in inclusive preschool classrooms.** McWilliam, R. A., Wolery, M., & Odom, S. L. (2001). In M. J. Guralnick (Ed.), *Early childhood inclusion: Focus on change*. pp.503-530. Baltimore, MD: Paul H. Brookes.

**Linking literacy and language with social and emotional learning.** Bryant, D. (2000). *Committee for Children Prevention Update newsletter*. Spring issue.

**Measuring variability in early child language: Don't shoot the messenger.** Fenson, L., Bates, E., Dale, P., Goodman, J., Reznick, J. S., & Thal, D. (2000). *Child Development*, 71, 323-328.

**Models of collaboration for early intervention: Laying the groundwork.** Buysse, V., & Wesley, P. W. (2001). In P. M. Blasco (Ed.), *Early intervention services for infants, toddlers, and their families*. pp.259-293. Boston, MA: Allyn and Bacon.

## Summer 2001



**Nonverbal assessment of IQ, attention, and memory abilities in children with fragile-X syndrome using the Leiter-R.** Hooper, S.R., Hatton, D.D., Baranek, G.T., Roberts, J.P., & Bailey D.B. (2000). *Journal of Psychoeducational Assessment, 18*, 255-267.

**Observing children at play: Using engagement to evaluate activities and the classroom environment.** Ridley, S. M., & McWilliam, R. A. (2000). *Children and Families, 14*(3), 36-38.

**Otitis media in early childhood in relation to preschool language and school readiness skills among black children.** Roberts, J.E., Burchinal, M.R., Jackson, S.C., Hooper, S.R., Roush, J., Mundy, M., Neebe, E.C., & Zeisel, S.A. (2000). *Pediatrics, 106*, 725-735.

**Persistent effects of early intervention on high-risk children and their mothers.** Ramey, C.T., Campbell, F.A., Burchinal, M., Skinner, M., Gardner, D., & Ramey, S.L. (2000). *Applied Developmental Sciences, 4*, 2-14.

**Personal preparation and secondary education programs for gifted students.** Gallagher, J. (2001). *Journal of Secondary Gifted Education, 12*, #3, Spring.

**Preferences for conspecific and heterospecific faces: Effects of inversion and feature rearrangement.** Boccia, M.L., & Pedersen, C.A. (2000). *American Journal of Primatology, 51*, 46.

**Prevalence of aggressive behaviors among preschoolers in Head Start and community child care programs.** Kupersmidt, J. B., Bryant, D., & Willoughby, M. (2000). *Behavioral Disorders, 26*(1), 42-52.

**Professionals' and families' perceptions of family-centered practices in infant-toddler services.** McWilliam, R. A., Snyder, P., Harbin, G. L., Porter, P., & Munn, D. (2000). *Early Education and Development, 11* (Special Issue: Families and Exceptionality), 519-538.

**Recommended practices in interdisciplinary models.** McWilliam, R. A. (2000). In S. Sandall, M.E. McLean, & B.J. Smith (Eds.), *DEC recommended practices in early intervention/early childhood special education*. pp.47-52. Denver, CO: DEC.

**Services to young children with disabilities: A descriptive analysis.** Harbin, G. L., McWilliam, R. A., & Gallagher, J. (2000). In S. J. Meisels, & J. P. Shonkoff (Eds.), *Handbook of early childhood intervention*, 2nd edition. pp.387-415. Cambridge: Cambridge University Press.

**Short-form versions of the MacArthur Communicative Development Inventories.** Fenson, L., Pethick, S., Renda, C., Cox, J.L., Dale, P.S., & Reznick, J. S. (2000). *Applied Psycholinguistics, 21*, 95-115.

**Test of candidate oxytocin ligands in rhesus monkeys: Pharmacokinetics and PET imaging studies.** Boccia, M.L., Pedersen, C.A., & Wood, F. (2000). *American Journal of Primatology, 51*, 46.

**The acculturation of immigrant children: Implications for educators.** Kurtz-Costes, B., & Pungello, E. P. (2000). *Social Education, 64*, 121-125.

**The relation of child care to cognitive and language development.** NICHD Early Child Care Research Network. (2000). *Child Development, 71*(4), 960-980.

**The development of visual expectations in the first year.** Reznick, J. S., Chawarska, K., & Betts, S. (2000). *Child Development, 71*, 1191-1204.

**The early interventionist.** Ayankoya, B., & Oser, C. (2000). *Bulletin of ZERO TO THREE*, National Center for Infants, Toddlers and Families, October/November, 21(2).

**The Young Family Interaction Coding System.** Paley, B., Cox, M. J., & Kanoy, K. W. (2000). In P.K. Kerig, & K.M. Lindahl (Eds.), *Family observational coding systems: Resources for systemic research*. pp.273-288. Hillsdale, NJ: Lawrence Erlbaum Associates.

**Two tails of the normal curve: Similarities and differences in the study of mental retardation and giftedness.** Robinson, N., Zigler, E., & Gallagher, J. (2000). *American Psychologist, 55*(12), 1413-1424.

**Unexpected journey: The earliest days.** [Video]. Wesley, P. W. (Producer). (2001). Chapel Hill: UNC-Chapel Hill, Frank Porter Graham Child Development Center.

**Variability in FMRP and early development in males with fragile X syndrome.** Bailey, D.B., & Hatton, D.D. (2001). *American Journal on Mental Retardation, 105*(1), 16-27.

**When is an assessment an intervention? Parent perception of infant intentionality and language.** Reznick, J. S., & Schwartz, B. B. (2001). *Journal of the American Academy of Child & Adolescent Psychiatry, 40*, 11-17.

**Working women's selection of care for their infants: A prospective study.** Pungello, E. P., & Kurtz-Costes, B. (2000). *Family Relations, 49*, 245-255.



# Pre-K Children with Special Needs

## New survey examines preschool programs for children with disabilities

ALTHOUGH PRE-K PROGRAMS ARE THE LATEST HOT TOPIC OF DEBATE in many states, preschool for children with disabilities has been a reality in the US for more than 15 years. In 1975, the federal Education for All Handi-capped Children Act laid the foundation for preschool programs by providing initiatives and guidelines for states. In 1986, states were mandated to provide a free, appropriate, public education for all 3-and 4-year olds with disabilities.

To capture a picture of the services offered to preschoolers with disabilities in NC, FPG researchers studied all 117 of NC's local education agencies (LEAs). More than 350 preschool teachers and 520 support service personnel, including speech-language pathologists, physical therapists and occupational therapists completed a lengthy survey about the services they provided to preschoolers.

On-site visits to 22 preschool classrooms were made to complete an *Early Childhood Environment Rating Scale-Revised (ECERS-R)* and to collect a measure of child engagement. Investigators were Sharon Palsha, Mark Wolery, Don Bailey and research assistant Margaret Brashers.

## Synopses of findings

### Intensity of services

NC's school systems use a variety of arrangements to provide services to preschoolers with disabilities. For example, Amanda is a 4-year old with Down syndrome and is among about 4,500 NC preschoolers served in preschool programs operated by the NC Dept. of Public Instruction. She attends a self-contained classroom (children with disabilities only) which is the most prevalent service available across the state. The study found about 2,000 preschoolers served in this arrangement.

About 800 preschoolers with disabilities attend inclusive public school classrooms. Children in inclusive settings spend more hours at school than the children who attend self-contained classrooms.

Another 1,400 children receive itinerant services. These services typically involve the itinerant teacher making two 30-minute visits per week to the child's regular day care program. The study found only a small number of preschoolers (129) receiving home-based services, which usually involved one 1-hour visit per week to the child's home.

### Parent participation

Amanda's parents are actively involved in the Individualized Education Plan (IEP) process, parent meetings and volunteering

in the classroom. Most systems reported parent participation in these activities. Few systems, however, reported parent participation in evaluating the preschool program or in setting policies and procedures.

### Transportation services

Amanda spends about 15 minutes in route to her classroom each morning driven by her mother and 20 minutes going home in the afternoon via the school bus. The study reported that the majority of children spend a reasonable amount of time being transported to and from school.

A third of the coordinators at preschool programs, however, said that transportation is "often a problem" or an "extremely big problem." Two hundred and sixty preschoolers across the state were reported as spending more than one hour being transported one way.

### Child transition

Amanda will be moving on to kindergarten next year. Fortunately for Amanda and her family, her program uses a large number of recommended transition practices. The study found this to be true for most of the responding systems.

Examples of transition activities include holding transition meetings with the

family, holding meetings with kindergarten personnel, and inviting kindergarten teachers to the IEP meeting.

Respondents reported that more than three-fourths of their preschoolers from the previous school year aging out of the program were placed in a regular kindergarten and another 14% spent at least some time in a regular kindergarten. Only 53% of the systems report that the preschool program continues to provide support to the child during the kindergarten year.

### Preschool teachers

Amanda's preschool teacher is only responsible for her one self-contained classroom. This is the typical practice across the state. The study found, however, that about a quarter of the full-time teachers and a fifth of the part-time teachers had multiple teaching assignments.

The teachers were almost exclusively Caucasian females. Two-thirds of the teachers held a bachelor's degree and one third held a master's. About three-quarters held a birth-kindergarten license.

### Preschool coordinators

Coordinators in LEAs reported having a range of other responsibilities with close to half (42%) indicating that they also provided direct services to preschoolers. They are almost exclusively female (95%) and Caucasian (90%). As a group the coordinators are well educated, with the majority holding a master's degree. More than half (56%) hold birth-kindergarten or preschool handicapped certification.

### Related service personnel

Therapists serving the preschoolers with disabilities tend to be female and Caucasian. Speech-language pathologists and occupational therapists tend to be full-time employees of their school system. Therapists are moderately to substantially involved in a number of the IEP activities.

### IEP development, monitoring

Amanda's parents actively participate in the IEP process and suggest goals for their daughter. This behavior was atypical of what was reported in our study. The majority of teachers reported that less than half of their preschoolers' parents

suggested or asked for a modification of an IEP goal for their child.

Teachers typically gave parents formal feedback on IEP goals every nine weeks. More than half of the preschoolers acquired three-fourths of their IEP goals.

### Classroom observations

The ECERS-R data suggest that the observed inclusive classes overall were of good quality and were of higher quality than the self-contained classes. For each category, with the exception of parents and staff, the inclusive classes had higher mean scores than did the self-contained classes. Statistically significant differences occurred in 3 of the 7 ECERS-R categories, all in the direction of the inclusive classrooms having higher quality.



### Typical, ideal practices

Amanda's physical therapy and speech-language therapy both take place in her classroom in the context of her daily classroom activities. Related service personnel reported that at least half of all therapy should be provided in the child's regular class and in the context of ongoing classroom routines and activities, but that this was not currently happening. Therapists said they should work with almost all teachers to help them individualize classroom instruction based on therapy goals and needs, but that this happened with only about half the teachers.

## RECOMMENDATIONS

The study included specific recommendations in each of the above areas. These include:

**PARENT PARTICIPATION:** Parent participation is a critical component of a preschool program, and therefore every effort should be made to encourage parents to be involved actively in their child's preschool life. The study recommended that the schools offer their diverse parent population a range of options in which to participate at the systems, policy, program, classroom, and child level. Systems should have IEP procedures in place that encourage parents to offer IEP goals for their child.

**TRANSITION POLICIES:** It is important that systems have policies and procedures in place to support children and their families not just in the transition from preschool to kindergarten, but also during the kindergarten year so that placement into the school-age program meets with the greatest success for the child and family.

**TRANSPORTATION:** Transportation is an important, yet challenging, part of the preschool program. Coordinators, teachers and parents all should be aware of the length of time preschoolers spend being transported to school. In cases where there are problems all of these parties should work together to explore solutions.

**MORE INCLUSION:** The findings from the on-site observations suggest that the NC preschool program should strongly consider moving toward a model offering more inclusive classrooms. Inclusive classrooms overall offered better quality. Integrated therapy: If therapists serving preschoolers want to follow the field's recommended practices, they would provide more integrated therapy than is now provided. Systems should analyze staff development activities that break down the barriers to providing integrated therapy. Given the discrepancy between the therapists' typical and ideal practice in helping classroom teachers individualize instruction, systems need to provide therapists and teachers with the time and resources to consult on therapy IEP goals.



### If you want to know more

**NCEDL Spotlight No. 6:**  
*Disabilities & Transitions*,  
published by NCEDL  
[www.fpg.unc.edu/~ncedl/PDFs/spot6.pdf](http://www.fpg.unc.edu/~ncedl/PDFs/spot6.pdf)

**NCEDL Spotlight No. 25:**  
*Early childhood support structure is proposed*, published by NCEDL  
[www.fpg.unc.edu/~ncedl/PDFs/spot25.pdf](http://www.fpg.unc.edu/~ncedl/PDFs/spot25.pdf)

**NCEDL Spotlight No. 15:**  
"Early Intervention: What's Next?"  
[www.fpg.unc.edu/~ncedl/PDFs/spot15.pdf](http://www.fpg.unc.edu/~ncedl/PDFs/spot15.pdf)