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Supporting IDEA

WITH A CONTRACT FROM THE US OFFICE OF SPECIAL EDUCATION PROGRAMS, FPG has launched the National Early Childhood Technical Assistance Center (NECTAC) to help support the implementation of early childhood provisions of the Individuals with Disabilities Education Act (IDEA). The Center will replace NECTAS, which has provided support to the states in early childhood services for nearly 30 years.

“We believe the new TA Center will carry on and build upon the tradition, commitment and foundation of the NECTAS project,” says Pascal “Pat” Trohanis, director of NECTAC. “Our new contract demands a more focused approach to TA—one that seeks to influence early childhood service systems in a way that leads to more positive outcomes for young children and their families.”

Since the passage of IDEA, states have made considerable progress in implementing the early childhood provisions of the law. Challenges remain, however, in assuring that all eligible children and families receive and benefit from high-quality services that address their unique priorities. NECTAC’s mission is to strengthen service systems to ensure that children with disabilities and their families receive and benefit from high-quality, culturally appropriate and family-centered supports and services.

Trohanis believes that for NECTAC’s assistance to yield improved results for children and families, a multilevel systems change approach is needed. Toward that end, NECTAC will target state infrastructure, personnel development, community infrastructure, service providers and practices and individual children and families.

NECTAC employs various strategies, including strategic planning, consultations, workshops, information materials, teleconferences and contributions to a topically focused web site: www.nectac.org. To make their information more widely available, NECTAC is affiliating with the Education Resources Information Center (ERIC) as an adjunct clearinghouse for information on early intervention and early childhood special education.

As the prime contractor, FPG will work closely with two key subcontracting organizations—the National Association of State Directors of Special Education in Alexandria, VA, and the Parents Advocacy Coalition for Education Rights (PACER) in Minneapolis, MN. |ed|



Pat Trohanis

*national
early childhood*
TA Center

IDEAs □ partnerships □ results

a seamless system of services?



Gloria Harbin

IN RECENT YEARS THE NUMBER of federal and state programs designed to help young children with special needs in this country has grown dramatically. Programs such as Head Start, Even Start and early intervention offer families of young children an array of services and supports. Altogether, these programs should form a seamless system allowing children and families to get the services they need with minimal hassle. But how easy is it for a family to learn about these services and access them? How comprehensive are early intervention services and how well-coordinated across different agencies and programs? FPG Scientist Gloria Harbin has studied these questions since 1986 and her findings are revealing.

Early intervention services consist of many types of services that address children's health and development as well as supports for their families. No one agency or program offers all of the therapies or special services that an individual child or family may need. As a result, families often must seek the services and supports they need from more than one agency. Although coordinating these child and family services offered by various agencies makes sense and is federally mandated, state early intervention systems have found this difficult to achieve. The lack of coordination

stems largely from the fact that each of the federal programs was developed separately—with their own mission, mandates and ways of determining who is eligible for services.

Over the years, Congress has heard testimonies of families being bounced from one agency to another; of professionals who did not communicate with each other and gave families conflicting information; of agencies' failures to refer a child to another agency that provided the service the child was eligible to receive; of family members having to quit their jobs to devote time to finding the service their children really needed; and of families providing the same family history or assessment results over and over to each agency. The lack of coordinated early intervention services has meant that some children have experienced long delays in obtaining the services they needed or, worse yet, have not received the services at all.

In 1986, Congress passed the Infant-Toddler Program, Part C of the Individuals with disabilities Education Act, which included, among other things, a remedy to this problem. A comprehensive system for early intervention, coordinated across multiple agencies and disciplines at both the system and individual level was a key component of the new legislation. Since the law's passage,

Harbin has studied the effectiveness of the federal requirements that early intervention services be integrated and coordinated across programs and agencies. She is among the few researchers to do this on a national scale.

Harbin's research has focused on the state and local levels where most of these programs are housed and administered. Her state-level studies, conducted primarily between 1987 and 1992, analyzed the amount

of coordination, approaches to coordination, agreements among agencies, structures and linkages to facilitate coordination

and outcomes of coordination. At the local level, Harbin has analyzed nine communities in three states from 1992 to 1997. She is still following three of those communities and has been studying all communities in North Carolina for the last four years.

Harbin has identified six levels of coordination at the state and local level. Her recent research indicates that most states are using one of the three less comprehensive and coordinated models. "In general, states have not put together a comprehensive system of services," Harbin says. "Most focus only on a child's educational and therapeutic needs."

The result, she says, is that adults and children with disabilities in many communities do not feel supported, but instead feel unwelcome and stigmatized by their community.

By contrast, communities such as Canyon City, CO, that took an

integrated approach to providing services yielded a much higher degree of satisfaction and sense of belonging among families in need. "We found the best outcomes for kids in the broadest and most coordinated service systems, those that were designed to serve all children and their families," Harbin says. "In other words, children with disabilities are more likely to receive better services if communities begin to plan more cohesive and integrated systems for children rather

...an integrated approach to providing services yielded a much higher degree of satisfaction and sense of belonging among families in need.

than allowing programs to function in isolation." Harbin said that a parent in her study said it best: "We never ran into the walls of the system in Canyon City like we did in the community where we previously lived."

Based on her findings, Harbin sees a need for communities across the nation to integrate *all* programs for *all* children and families into a cohesive whole. She admits there are significant political, financial and psychological barriers to doing this. The single most important ingredient to accomplishing integration, she says, is leadership.

"The presence of leadership or the lack of it is a major key to success or failure," she says. "We need university programs that will train a generation of community leaders who have a vision of interagency cooperation and a comprehensive system of services and resources that supports and actively nurtures the development of *all* children in the community, instead of only some of the children. |ed|

Six Levels of Service Coordination*

- 1 Single program
- 2 Network of programs beginning to coordinate
- 3 Primary coordination with intervention, secondary coordination with other agencies
- 4 Multiagency system with some leadership coming from lead agency
- 5 Multiagency system—leadership and decision making dispersed among agencies
- 6 LICC is lead agency for comprehensive and cohesive system for all children

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