

Children with Disabilities: Module 1

This training module has three different parts:

- ✦ Discussing a child with significant disabilities who is entering the program
- ✦ Assessing participant's readiness to include the child in terms of attitudes, knowledge about the specific disability, ability to work with parents and specialists, facilities, issues, etc.
- ✦ Using the results of the assessment to develop an action plan

Take time to learn about the whole child

Head Start staff routinely takes steps to learn more about a child entering Head Start, and the process is no different when a child has disabilities. Staff can learn about the child's disability, as well as the child's past experiences, by looking at the child's records and by talking to people who know the child. For example, staff can find out what other preschools or early intervention programs the child may have attended; what her experiences were like in those settings; what outside services the child may be receiving; what types of adaptations she needs; and what kinds of resources are available in the community to assist the child and her family. If this information is not available, or if the child's parents have not signed a release form, a supervisor can suggest how to approach family members to get necessary and appropriate information. *Emphasize that learning about the child's disability is an important step, **but it is only the beginning**. Just as with any child, it is important to learn about the child's interests and strengths, as well as her individual needs.*

Form Family Partnerships

The child's parents are a critical source of information as well as the ultimate decision makers. The partnership should begin with understanding the parents' hopes, dreams and goals for their child. Parents can also offer important information about their child's strengths and interests, situations that the child finds difficult, strategies that they have used that were effective, and connections they have with other agencies, organizations, and specialists.

Since its inception, Head Start has been committed to respecting parents as the primary teachers and caregivers of their children. Head Start has also always valued strong family partnerships.

Family-centered care, a growing practice within the medical community, can offer Head Start useful ways to think about and strengthen family partnerships. Family-centered care represents a fundamental shift in thinking and practice:

- ✓ from a disease and deficit focus to one that identifies and builds on individual and family strengths;
- ✓ from reliance on professional and institutional expertise towards partnerships and collaboration; and
- ✓ from practices that foster dependency to those that empower children and families.

Information sharing, respect, and collaboration between families and staff are cornerstones of family-centered care.

Head Start staff can strengthen their partnership with families and promote family-centered care by incorporating the following principles into practice and policy:

- Recognize that the family is the constant in a child's life, while the program, staff, and services within the delivery system change over time.
 - Actively solicit and respond to the family's preferences, questions, and needs.
 - Exchange complete and unbiased information with families which takes into account their different needs and coping strategies.
 - Honor individuals, family, and cultural diversity and strengths.
 - Assure that the program's support systems are flexible, accessible, comprehensive, and responsive to the needs of all children and their families.
 - Facilitate and encourage family-to-family support and networking.
 - Strengthen family partnerships at all levels in the way you:
 - care for children with disabilities and their families.
 - develop, implement, evaluate, and refine programs for children with disabilities.
 - form and strengthen policies for children with disabilities and their families.
 - Appreciate families as families and children as children. recognize that all families and children possess a wide range of strengths, concerns, emotions, and aspirations beyond their need for specialized health and educational services and support.
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1. As well as gathering information about past experiences of the child, records, outside services the child has or is receiving it is also necessary to

- a. know the entire family's medical history.
- b. have the medical staff take complete charge of the child's program.
- c. learn about the child's interests and strengths.
- d. isolate this child from the other children.

2. The bottom line of decision making about the child's program and care through Head Start

- a. is always in the hands of the Special Services/Mental Health staff.
- b. varies depending upon the special circumstances of the child.
- c. is dependent upon the parents who are the ultimate decision makers about the child.
- d. must be controlled by the Head Start Director.

3. Family-centered care is dependent upon

- a. accurate record keeping and highly qualified staff.
- b. Information sharing, respect, and collaboration.
- c. the type of disability the child has.
- d. how cooperative the family is with Head Start staff.

4. An important principle in family-centered care would include

- a. keeping all information about the child only between the parents and Special Services staff.
 - b. only provide special services to the child if parents are present.
 - c. respecting the family's culture and strengths.
 - d. making sure this family does not interact with other families.
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Help children understand the needs of their classmates

Children are naturally curious: if a classmate uses special equipment or has special needs, they are bound to ask questions. In order for children with disabilities to be an integral part of the program, staff must be able to communicate respectfully with and about them, so that children will feel valued for who they are and what they have to offer. *An important part of communicating with respect is to talk to the children in a "matter of fact" manner about any special equipment or special needs, and integrate these changes as part of the daily routine of normal procedures.* The last thing we want to do is dramatize the circumstances through secrecy, changes in tone of voice when we refer to the special needs child, over protectiveness, etc.

Know the laws

Including children with disabilities is best practice and required by the Head Start Program Performance Standards, and is based on federal law. The laws and regulations provide individuals with disabilities and their families with essential rights to have access to and participate in critical services and program facilities. *Only when staff understand these laws and regulations can they advocate for the rights of children with disabilities and their families within the program and the larger community.*

Use the Individualized Education Program (IEP) or the Individualized Family Service Plan (IFSP) as a road map

The IEP and IFSP provide an individualized "road map" that Head Start programs can use to meet the educational and family needs of children with disabilities. Families are the key decision makers in the process. Teacher and other Head Start staff also play an important role in working with parents and specialists, and in translating IEP/IFSP goals and objectives into practice. In order for Head Start staff to meet this challenge, they must first understand the language of the IEP/IFSP and key points/ destinations in the IEPs/IFSPs process.

Collaborate with specialists

Health professionals such as physical and occupational therapists, speech and language therapists, mental health professionals, and primary medical care providers offer a wide range of services to children, families, and staff. The challenge is to find the best ways to share expertise and plan services to meet a child's individual goals and objectives within a developmentally appropriate curriculum. Specialists can also help ease the child's transition from early intervention programs to Head Start, and from Head Start to public schools.

5. Because children are curious it is understandable that children will ask questions about a child with a disability. As Head Start staff our response

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| a. | <input type="checkbox"/> | must be to ignore the question and redirect the child's attention so as not to violate confidentiality. |
| b. | <input type="checkbox"/> | would be to tell the child that it is rude to ask questions about someone who has a "problem". |
| c. | <input type="checkbox"/> | would be to respectfully talk to the children in a "matter of fact" manner about any special equipment or special needs. |
| d. | <input type="checkbox"/> | would be to direct the child to ask the question of the other child's parents. |

6. It is very important that as Head Start staff we know the laws concerning children with disabilities primarily so that

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| a. | <input type="checkbox"/> | we can advocate for the rights of children with disabilities and their families within the program and the larger community. |
| b. | <input type="checkbox"/> | we can avoid any legal complications in addition to any fines or penalties. |
| c. | <input type="checkbox"/> | we can protect ourselves from doing too much for the child and the family. |
| d. | <input type="checkbox"/> | we can keep more accurate records and know all the specifics involved in treatments. |

7. The purpose of the IEP/IFSP is to

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| a. | <input type="checkbox"/> | protect ourselves from other service providers who would want us to do everything for the child. |
| b. | <input type="checkbox"/> | provide the family with all the information about the child's disability. |
| c. | <input type="checkbox"/> | direct who should help the child and who should stay away from the child. |
| d. | <input type="checkbox"/> | provide an individualized "road map" of services. |

8. A key feature of using "specialists" in a child's care program would be

- a. to make sure every child is getting the same benefits.
 - b. to help the Teachers so that they do not have to do everything.
 - c. provide a variety of options so we can individualize the services to the child and family.
 - d. that we hire these people so we might as well use them.
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