ABSTRACT
                This research examined the effectiveness of early childhood
inclusion from the perspective of parents. Participating in the study were 18
parents (mothers and fathers) of 3- to 6-year-old children with a disability
who had been placed in various educational settings. Half of the children
were dually enrolled. Parents were interviewed separately. Three themes
emerged from the interviews: (1) expectations and world view of parents; (2)
the broad definition of inclusion; and (3) relationships with professionals.
The findings indicated that the families reported various reasons for placing
their child in an inclusive setting, including desire for the child to have a
"normal" experience and not be isolated from his or her peers. Parents
focused on the social aspects of inclusion, normalization, and the greater
acquisition of skills. Some parents viewed inclusion from a social
interaction perspective; parents whose children did not have cognitive delays
viewed inclusion as contributing to the child's cognitive development.
Parents expressed some concerns about inclusion, including lack of teacher
attention, ridicule or rejection by peers, and the quality of services
received. Findings of this study were compared to those of other studies of
inclusive programs. It was concluded that successful inclusion requires: (1)
embracing an inclusive philosophy that supports and welcomes all children
within typical settings; (2) refining educator communication and
collaboration skills to work effectively with parents and professionals to
plan and implement programs for young children with special needs in typical
settings; and (3) using teaching strategies that promote the social and
cognitive development of all children and designing appropriate educational
environments. (Contains 23 references.) (KB)

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THE EFFECTIVENESS OF EARLY CHILDHOOD INCLUSION (PARENTS' PERSPECTIVES)

RESEARCH PAPER
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Abstract

The effectiveness of early childhood inclusion from the perspectives of parents are described and summarized in this research paper. Professionals were also interviewed to see how they felt about early childhood inclusion.

Overall, parents of children with and without disabilities generally have positive perspectives toward inclusion. Parents of children with disabilities believe that inclusion helps their children develop socially, emotionally, and academically. Parents of children without disabilities positive attitudes was related to the educational and social outcomes of their children's experiences in the inclusive program.

The findings indicated that there are components that are necessary in order for early childhood inclusion to be successful. These components are:

*a dedication to the philosophy of inclusion;

*the important roles of the families, early childhood personnel, and administrators; and

*the importance of teamwork and collaboration, appropriate developmental methods of instruction, and appropriate training of early childhood professionals.

The findings from all of the early childhood inclusion studies reveal many benefits, but there are still concerns and barriers that exist.

We as educators tend to think of inclusion as it relates to school age children. Now, inclusion has expanded to the field of early childhood special education. Early childhood inclusion, formerly known as 'mainstreaming' or 'integration', refers to the full and active participation of young children with disabilities in programs with typically developing children with disabilities in early childhood classes and community settings is a well-accepted practice (Early Childhood Research Institute on Inclusion, 1996).

Preschool-age children with disabilities being included with their typically developing peers is a relatively recent phenomenon. This movement has sparked alot of interest in many people and it is continuing to move forward. By recent counts, over 50% of all preschool children with disabilities who are receiving services are in some form of inclusive setting (U.S. Department of Education, 1998). Many policymakers and administrators in the school systems are now looking at inclusion as being the first service alternative for young children with disabilities, instead of a service being provided because of parental advocacy.

Since learning is so important in the early years, this is the best time for children to begin to respect all people's differences and the contributions each individual makes. Children with disabilities are first and foremost children, and then children who may need support or adaptations for learning. The term "special needs" refers to a wide range of developmental disabilities or learning needs that

may occur in different areas and to varying degrees (National Association for the Education of Young Children, 1997).

Buysse and Bailey (1993) reviewed reasons why inclusion has been especially advocated during the preschool years. First, young children have not formed negative stereotypes about individuals yet, thus minimizing the possibility of teasing and rejection and maximizing the possibility of social acceptance of students with disabilities. Second, early interactions with individuals with disabilities may increase the likelihood of later acceptance of people with disabilities by their typically developing peers. Third, the early placement of children with disabilities in typical classroom settings creates the expectation among parents and professionals that inclusion is the norm and better prepares the child to function in typical environments. Preschool placement has been found to be related to later school placement. In addition, children served in specialized preschool placements are more likely to be placed in segregated classrooms when they enter public school than are children whose preschool experience was in an inclusive setting (Miller, Strain, McKinely, Heckathorn, & Miller, 1993).

In order for inclusion to be successful there appears to be certain necessary factors. The factors that are critical for successful inclusive settings are: a dedication to the philosophy of inclusion; the important roles of the families, administrators, policy makers, and early childhood personnel, collaboration and teaming; appropriate curricula and methods of instruction; and changes in the

training of early childhood professionals.

Research has shown that the benefits of inclusive classrooms reach beyond academics. This is particularly important for young children who learn best when they feel safe, secure, and at home in their classrooms. An environment that encourages young children's social and emotional development will stimulate all aspects of their learning (National Association for the Education of Young Children, 1997).

Children in inclusive classrooms:

*demonstrate increased acceptance and appreciation of diversity;

*develop better communication and social skills;

*show greater development in moral and ethical principles;

*create warm and caring friendships; and

*demonstrate increased self-esteem.

Baker, Wand and Wahlberg (1995) reported that young children in inclusive classes consistently perform better than their peers in segregated settings. These researchers emphasize that the majority of evidence from studies indicate that inclusive practices have the potential to benefit children, families, and professionals.

Generally, children who enroll in inclusive settings are more likely to have mild or moderate disabilities (e.g., communication disorders, mild mental retardation) rather than more severe disabilities (e.g., severe mental retardation, multiple disabilities, autism). In a state-wide survey in North Carolina, Buysse,

Bailey, Smith, and Simeonsson (1994) found that children with severe disabilities were more likely to be placed in specialized settings.

Several researchers (Odum, Wolery, et al., 1999) have done extensive review of the literature on preschool inclusion. From that review, they have identified a number of results that appear to be supported by the literature. The statements are as follows:

*Positive outcomes are reported for children with disabilities and typically developing children in inclusive settings;

*Children with disabilities engage in social interaction with peers less often than typically developing children in inclusive classrooms;

 *School systems are more likely to place children with mild disabilities in inclusive settings than children with severe disabilities;

*Inclusion means different things to different people;

*The quality of the early childhood environments in inclusive settings appears to be, at least, comparable to quality in traditional special education classes and community-based early childhood programs serving only typically developing children;

*Individualized instructional techniques and curricula have been employed in inclusive settings and have produced positive behavioral and developmental outcomes;

*Teachers generally have positive attitudes about including children with

disabilities in their classrooms, but concerns also exist;

*Family members generally express favorable attitudes toward the inclusion of their children in inclusive programs, and positive attitudes increase over time;

*A range of policy factors (e.g., program standards, fiscal issues) affect the implementation of inclusive programs, and the interpretation of policy by key administrators appears to have the most substantial impact; and

*Cultural and linguistic characteristics of community and family shape the form that inclusion takes in the classroom and access that children have to inclusive programs.

This movement is a critical one for children and families and may involve some emotions. A significant factor that contributes to the development of effective inclusion programs is the involvement of parents of children with and without disabilities in the inclusion process (Bennett, Dulca, & Bruns, 1997; Reichart et al., 1989; Salend, 1998). The study of parents' views of the inclusion experience has been a neglected area of research. We as educators must remember that parents play a huge role in their child's education. However, sometimes the parents get forgotten about and the focus is on what educators think is best for the child without asking how the parents feel.

When investigating further into early childhood inclusion, the following research questions guided my investigation:

1. How effective do parents think inclusion is/or has been for their

   child/children with a disability?

2. What concerns do parents have?

Rationales

Educational, legal, and philosophical rationales for inclusive programs are

noted by Bricker (1978) and Bailey, McWilliam, Buysse, and Wesley (1998). One

philosophical rationale for placing children with disabilities in inclusive settings has

been that all children have the right to a life that is as normal as possible. This

philosophical/ethical rationale emphasizes that children with disabilities should

experience the same quality preschool classroom program (presumably high quality)

as typically developing children (Bailey et al., 1998); that they become members of

the classroom community through participation in class activities (Schwartz, 1996);

and that they develop positive social relationships with class members and teachers

(Guaralnick, in press; Storey, 1993).

Legislative and legal issues also provide justification for inclusive programs

for preschool children. The Individuals with Disabilities Education Act (IDEA),

extended its support for special education to preschool children and maintained the

provision in the earlier law that children be placed in classes with typically

developing peers to the extent appropriate. The legislation which led to inclusive

practices was initiated in 1975 with the passage of the Education of the

Handicapped Act (Public Law 94-142). This law upheld the rights of youth with

disabilities (ages 3 to 21 years) to a free and appropriate education which met their individual needs in the least restrictive environment (LRE). However, there were exceptions to this mandate in the case of preschoolers (ages 3 to 5 years) who were only served with a state's permission (Lerner, Lowenthal, & Egan, 1998; Lerner, 1997). However, because of the support of legislators, professionals, and families concerned about the education of preschoolers, P.L. 94-142 was amended and retitled P.L. 99-457. The amendments mandated services for preschoolers and supported the rights of eligible infants and toddlers to early intervention services. The states were encouraged through federal grants to develop early intervention systems. An educational rationale is sometimes used to support inclusion. Professionals and family members think children with disabilities should be placed in inclusive settings because they believe that the developmental benefits in inclusive settings are superior to nonintegrated settings.

In the past, fathers were not expected to be involved in their child's education, but that has changed over the years. Some researchers are now interested in what factors parents think are related to successful integration in early childhood programs.

In this particular study, 18 parents (comprised of husband and wife) with children with a disability were interviewed. The children in the study ranged in age from 3-6 years, had a variety of disabilities, and were placed in various educational settings. Half of the children were dually enrolled because of parent preference.

The need for dual enrollment includes the child's need to be exposed to a normal environment being met in the inclusive program, whereas the need to have related service and intensive intervention being met in the special program. A semi-structured interview employing open-ended questions was used in order to explore parents' views of reality (Reinharz, 1992). Mothers and fathers were interviewed separately so that they could express their views privately. Based on the interview, three themes emerged: (1) the expectations and world view of parents, (2) the broad definition of inclusion, and (3) relationships with professionals.

All of the families had different reasons for placing their child in an inclusive setting. One family wanted their child to have a "normal" experience, and another family wanted their child to be included and not isolated from their peer group. Parents also took other factors into consideration when placing their child in an inclusive setting. Factors such as the type of disability, age of child, and experiences in the school system. The word inclusion has different meanings for professionals as well as for parents. Parents seemed to be concerned about their child's inclusion in all areas of life (i.e., neighborhood, recreation, and church activities) as they were about the school environment. Mothers and fathers focused on the social aspects of inclusion, normalization and the greater acquisition of skills.

Parents differed in their expectations of the inclusion setting according to the disability of their child. Some parents viewed inclusion from a social interaction perspective, while others whose children did not have cognitive delays viewed

inclusion as contributing to the cognitive development of the child.

Although parents acknowledged the benefits of inclusion they also expressed some concerns. Some of the concerns were lack of attention from teachers, their child being ridiculed or rejected by peers, and quality of services the child will receive. Parents mentioned the importance of constant communication and relationship building among themselves and professionals. By gathering all this information from parents, professionals have gained helpful information and an understanding about parent expectations and values.

Several studies have examined the experiences parents of children without disabilities have had with inclusive educational programs. The responses of the parents revealed that integration was beneficial and promoted the acceptance of children with disabilities and exposed them to the real world. These results also indicated that the parents overcame their initial doubts regarding the instructional effectiveness of inclusion for their children. The parents' ratings indicated that their children exhibited an improved feeling of self-worth from helping others, an increased sense of personal development, and a greater tolerance of human differences. The parents did not report that their children "picked up" the inappropriate behaviors of their classmates with disabilities, but indicated that they felt that the presence of students with disabilities helped their children learn appropriate behaviors and did not limit the amount of teacher attention their children received.

The studies I reviewed revealed that parents of children without disabilities have varied but generally positive perspectives toward inclusion. Some of the benefits that parents specifically perceived of inclusive placements for their children include social cognition (e.g., greater awareness of other children's needs), prosocial personal characteristics (e.g., more responsiveness and helpfulness to the needs of classmates with disabilities), and greater acceptance of human diversity (e.g., more likelihood of feeling comfortable with classmates and others with disabilities, and less likelihood of holding prejudices and stereotypes about people who look or behave differently).

In another study, Guralnick (1994) and colleagues examined the experiences of parents of children with disabilities in an inclusive program. The respondents identified several benefits for their children, including fostering their acceptance, preparing them for the real world, and providing them with an interesting and creative environment that stimulates their learning. For children without disabilities, the mothers noted that inclusive settings provided them with increased opportunities to learn about individual differences. Regardless of their children's placement, parents of children in integrated and specialized placements identified their children's ability to socialize with peers as very important. The parents felt that their children's current placement facilitated their children's peer relationships and friendships.

In another study, done by Bennett et al. (1997) parents of children with disabilities reported that inclusion benefited their children by providing them with positive role models and friendships, as well as facilitating their acquisition of preacademic, social, language, and motor skills. Furthermore, the results indicated that parents held positive views toward inclusion programs regarding their social impact on children with and without disabilities, but raised concerns about their children's ability to receive Individualized Education Program (IEPS) in the inclusive settings. Moreover, parents of children with disabilities perceive integrated placements to be superior in enhancing their children's self-image; affording their children greater access to appropriate role models and friendships; making their children happier, more confident, and more extroverted; and preparing their children for the real world.

There was a study conducted about inclusion with early childhood educators who worked with special needs children and parents who had children receiving early intervention services. Perceptions about inclusion was assessed through *Barriers and Supports to Early Childhood Inclusion,(1)* a rating scale consisting of two subscales (34 barriers and 26 supports) representing conditions that facilitate or inhibit the implementation of inclusion. The directions briefly defined inclusion and ask the respondents to indicate "the degree to which each one of them felt each item represents a barrier or support to early childhood inclusion based on their own

experiences and/or beliefs". Each item was rated on a Likert-type scale from 1 (definitely not a barrier or support) to 5 (definitely a barrier or support). Four barrier factors emerged from this study: early childhood program quality, community resources, service coordination and integration and attitudes and beliefs.

Early childhood program quality barriers included items that addressed some aspect of the classroom that served to inhibit the inclusion of young children with disabilities. Items that loaded on this factor included class size, teacher-child ratios, personnel training for both child care staff and specialists, inadequate classroom facilities, and lack of teacher planning time. Personnel training and preparation of general early childhood educators and specialists is perhaps the single most prominent barrier to inclusion that has emerged from previous research.

Community resource barriers incorporated items reflecting aspects of the community, rather than a single program or classroom, that discourage the practice of early childhood inclusion. Barriers that fell into this category included limited child care options, inadequate child care quality, lack of transportation, and low state standards for child care licensing.

Barriers associated with coordinating and integrating services for young children with disabilities and their families consisted of six items. These included limited involvement of family members in planning special services, lack of communication with families of children with disabilities, inadequate supervision and support for child care staff, the failure of state child care standards to address

the needs of young children with disabilities, lack of planning time to coordinate special services, and the limited availability of special services in general early childhood programs.

Attitudes and belief barriers encompassed the views of teachers, parents, specialists, and administrators toward inclusive policy and practices. Items that loaded on this factor included philosophical differences between classroom teachers and specialists and resistance to inclusion among therapists, early childhood special educators, and administrators.

The participants in this study viewed supports for inclusion as a single dimension, perhaps due to less exposure to these resources for inclusion. Items that fell into this category included: families of children with disabilities advocate for inclusion, specialists provide services within general early childhood settings, families of typically developing children advocate for inclusion, and administrators act creatively to overcome barriers to inclusion.

On average, children served in inclusive settings have higher initial levels of functioning than children served in self-contained settings (Buysse, Bailey, Smith, & Simeonsson, 1994). Higher functioning children demonstrated greater developmental growth in inclusive classes and lower functioning children made greater gains in specialized classrooms (Cole, Mills, Dale, & Jenkins, 1991). The self-contained classrooms may have limited the social growth of children who were less delayed by presenting fewer developmentally similar peers with whom to

interact.

Summary

Inclusive programming for young children with disabilities is a growing trend in early childhood special education. Research indicates that preschoolers with special needs benefit both academically and socially from placement in inclusive settings.

The findings of the studies cited indicated that the attitudes and reactions of parents of children with and without disabilities toward inclusive educational programs appear to be varied and affected by a variety of interacting variables. The general findings across studies have been that family members: (a) have positive feelings about inclusive settings; (b) have identified some benefits for their children; and (c) share some fears or concerns about inclusive placements.

Successful inclusion will not be realized, however, by simply placing young children with special needs into typical settings. Professionals need to embrace an inclusive philosophy that supports and welcomes all children within typical settings. Educators need to refine their communication and collaboration skills to effectively work with parents and other professionals to plan and implement programs for young children with special needs in typical settings. Further, educators must take an active role in ensuring young children's success in inclusive settings by utilizing teaching strategies that promote the social and cognitive development of all children and designing appropriate educational environments.

Other researchers have found inclusion to be very beneficial to children, parents, and professionals. The biggest benefit of inclusion was related to socialization skills. Throughout the research there were barriers and support factors that were directly related to early childhood inclusion.

Early childhood appears to be the optimal time to begin including children with special needs in typical settings. The task for early childhood professionals is to provide children with quality programming that incorporate promising practices from both early childhood education and early childhood special education to maximize success for all children in typical settings.

My research shows that parental perceptions and experiences with inclusive programs is very important. This information can be used to enhance the effectiveness of a program.

Conclusion

For young children with disabilities and their families, a resounding theme for the 21st century is that programs not children, have to be, "ready for inclusion" (Early Childhood Research Institute on Inclusion, 1998). There have been some good research done on the topic early childhood inclusion, but research needs to continue in the future. While reviewing the literature there were some areas that lacked content. None of the studies, reviewed focused on the attitudes of parents from culturally and linguistically diverse backgrounds toward inclusive practices or programming. This information can add to professionals knowledge of effective

culturally sensitive inclusive practices.

The majority of the studies cited had relatively small sizes, which makes it difficult to generalize the findings to the larger population of parents of children with and without disabilities. To expand our knowledge of parental perspectives of and experiences with inclusive practices, future research is needed to address these limitations.

Overall the quality of the research material was excellent, but the quantity needs to be expanded on certain issues in future research. One area that is/was lacking in the area of research was parental perspectives and experiences. This is a very important component to the field of early childhood inclusion. Parents play a very important part because they are viewed as partners of the team, so professionals need to know and hear what the parents are saying.

The question in the future should not be "should we do inclusive education", it should be "how do we do inclusive education and make it successful"?

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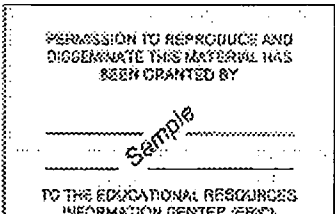
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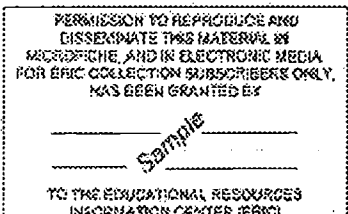
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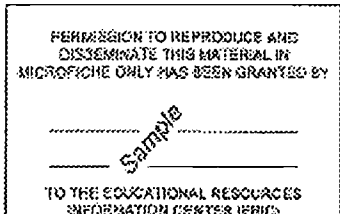
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