

Abstract

The Full Inclusion Preschool Project (FIPP) was a collaborative, county/state funded grant that included: four non-subsidized preschools, seven school districts and university support. The four-year FIPP grant fully included a total of forty-five students with disabilities, two to five years of age, over a three year period. The preschools reflected the natural proportion of children with disabilities. Interested participants were admitted to the FIPP using a zero reject strategy. The majority of students served by the FIPP were labeled autistic. The primary disability labels of the other participants in order of frequency were: developmental disability, deaf and hard of hearing, emotionally disturbed, cerebral palsy and pervasive behavior disorder. A full range of best practice inclusive strategies were provided for the participants in their preschool classrooms including peer mediation, curriculum adaptation, and integrative therapy. Other essential components included key preschool administration support, school district collaboration, teacher and parent training. One hundred percent of the participants that have graduated from FIPP have transitioned to a general education inclusive kindergarten setting. The following provides a brief report of the outcomes of the first year of operation.

*Full Inclusion Preschool Project:
Year One Research Outcomes Brief Report, 2002*

The Full Inclusion Preschool Project (FIPP), funded by a county commission created to improve the health and welfare of children ages 0 - 5, was designed to provide early care and education opportunities for all children to maximize their potential to succeed in school. Unfortunately, typically the word “all” rarely includes children with special needs. In fact, in the extant school readiness rhetoric, children with disabilities are seldom factored in to the readiness definition (Schwartz & Davis, 2006; May & Kundert, 1997). The literature more commonly attributes economic disadvantage to the concept of school readiness or the prerequisite variables necessary for developing children ready to learn when they enter kindergarten and 1st grade. This is due in large part to the biased operational definition of the term, school readiness. Defined as children physically, cognitively, socially, and emotionally functioning at an age appropriate level allowing them to start school ready to learn, this definition precludes those students whose disabilities hinder their physical, cognitive, social and emotional levels. Adhering to this definition implies that no child with a disability will ever be “ready” for kindergarten and 1st grade. Therefore, this project tapped into a proportion of Commission funding to ensure that children with special needs or at risk of being identified with special needs are very seriously considered in the school readiness initiative.

The goal of the Full Inclusion Preschool Project (FIPP) was to provide quality education to children with special needs or children at risk with the ultimate vision of preparing them to enter a fully inclusive kindergarten classroom in their home-school district. Traditionally children with special needs are placed in segregated preschools where all the children or the majority of the children is students with special needs. Despite federal education mandates (Part C of IDEA reauthorization mandates states to provide services in natural environments, which include community settings in which children without disabilities participate) and laws decades old, the

overwhelming majority of persons with disabilities face discrimination and segregation on a daily basis (USDOE, 2002). Less than 7% of children with significant disabilities are educated with their non-disabled peers. Only 32% of children with mild to significant disabilities are educated in the natural settings of their neighborhood childcare center. In addition, students with disabilities continue to exhibit the lowest employment and college enrollment figures of any group, as well as the highest drop out rate (USDOE, 2002).

The National Council on Disabilities (NCD) vision statement of its 2005 Strategic Plan asserts: “The United States of America will be a stronger country when its 54 million citizens with disabilities are fully integrated into all aspects of American life.” NCD goes on to state that “significant barriers to achieving the goals of independence, inclusion and empowerment for all persons with disabilities still remain. Conflicting, poorly designed or outdated government programs and policies combine with service gaps and continued negative attitudes toward people with disabilities to marginalize the 54 million Americans with disabilities. The effects of these barriers on both people with disabilities and society are enormous. Physical and spiritual isolation rob individuals of energy, creativity and productivity. Society loses by not enjoying the benefits of their talents and by incurring large costs to support them (NCD, 2005).

Equally important, families are not always well informed of all inclusive placement options that might potentially provide the best possible education for their infant or toddler. Brofenbrenner pointed out that “the family is both the most effective and economical system for fostering the development of the child” and are most involved in their child’s lifespan transitions.

Research strongly suggests that a solely segregated educational preschool or child care experience does not successfully prepare a child to enter a regular education kindergarten when they reach the chronological age at which their typically developing peers are entering

kindergarten (Peck et al, 1994; Hunt et al, 1994; Hanline, 1993; Staub et al, 1994). Most restrictive placements do not prepare individuals for the least restrictive placements (Brown, et al., Wilcox, 1987). In fact, approximately 75% of students that are placed in special education classrooms remain in special education classrooms for their entire school career. Conversely, the extant early childhood literature strongly suggests that students with disabilities succeed far better in integrated or inclusive settings academically and socially (Friend & Cook, 1992; Hunt et. al., 1994; Levine & Antia, 1997; Lord & Hopkins, 1986; Odom & Diamond, 1998; Staub, 1999). A document published by the National Council on Disabilities (1995) reported: “When children with disabilities receive the supports they need from a very young age in inclusive classrooms, their potential to develop the physical, psychological and social skills required to be full participants in their communities is greatly enhanced (1995, Dr. Martin Gould, National Council on Disabilities).”

In the first year of operation, FIPP activities demonstrated that students with special needs and their families could and would be prepared to enter a general education fully included kindergarten classroom upon graduation from the FIPP early childhood programs.

Project Description

In the first year of the project twenty-six children, ages two to six, enrolled and were provided inclusive preschool opportunities. Participants were recruited for the project by FIPP and preschool staff dissemination efforts through: school districts, parent advocacy groups, regional center, preschool newsletters, and word of mouth. Funding constraints and maintaining natural proportions of classroom compositions resulted in a waiting list of potential participants. As openings were available, each applicant was accepted into the program. As a result, there was a zero reject rate for applicants as an opening occurred. Eighty-nine percent of the participants of the project were male, while 11% were female. The primary disability labels of the participants

were as follows: 56% Autistic, 16% Developmental Disability, 12% Deaf and Hard of Hearing, 8% emotionally disturbed, 4% Cerebral Palsy, 4% Pervasive Behavior Disorder.

The four non-subsidized private preschool sites were recruited contingent upon the stated commitment of each preschool director to the inclusion goals of the FIPP project. At Preschool A, the director position turned over three times during the four-year project. The replacement directors were less committed to inclusion. As a result, the number of new participants decreased each year, but was made up by corresponding increases at the other project sites. The remaining three preschools, B, C, & D, have continued to offer inclusion opportunities to new applicants with disabilities even after the conclusion of project funding. Preschool A has not maintained this practice. The southern California county in which this project took place is a suburban community of 800 square miles. The current population exceeds three million, with an annual median family income of \$71,200. Preschool A served as the central, model demonstration site for the other three early childhood centers. During the project period, only Preschool B & D were NAEYC accredited. Both A & C were preparing for accreditation. Only Preschool B & D were wheelchair accessible. All four preschools followed a child-directed, developmental model of early childhood education. All four preschools had previously admitted students with disabilities in an informal capacity, but had received no formal preparation or training to do so.

Personnel included general education teachers, inclusion facilitators, inclusion specialists, and one administrator (project director). Project personnel and general education staff teamed, co-taught, and were involved in staff training as well as support of all children.

FIPP participants were included in age-appropriate classroom and playground settings at natural proportions. No one classroom ever had more than two students with an IEP. Preschool teachers included the participants in all activities and environments. FIPP staff provided additional small group peer mediation in social skill curriculum. A small group would include one FIPP

participant and no more than three other typical peers (Weiner, 2006a). Peer mediation was conducted in classrooms as well as all other site locations including playgrounds. This strategy was seen as one of the most critical aspects to the program.

Curriculum followed a developmentally appropriate approach to instruction and design that was child-initiated and child-directed. Coupled with individualized and embedded teacher-directed instruction, these approaches were combined to meet the needs of all the students in the early childhood programs (Fox & Hanline, 1993).

Further explicit details of staffing, training, parent support and program development are reported in Weiner (2006b).

Results by Outcomes

Outcome: Increased Availability and Access to Quality Early Care And Education

Twenty-six students and families were identified and recruited for the project's fully included preschools. Students' disabilities ranged from life threatening food allergies, to developmental, sensory, physical, cognitive, and language delays or disorders. The project exceeded the outcome of increasing the number of affordable quality early care and community slots to meet the needs of these 26 students who would not have typically been admitted to any community pre-school.

Outcome: Increase Access to Early Screening, Assessment and Intervention

The project succeeded in providing assessment and screening to 26 students identified as at risk or with a disability for the inclusive pre-school program. Ten project staff were trained in criterion-referenced screening, assessment and intervention.

The project exceeded its original contracted outcome to increase staff capacity, screening and provide intervention for 25 children. An additional teacher was recruited for each classroom to provide direct service, to assist with data collection, and to assist with needed individualized student service needs. The 10 new project staff provided assessment, screening, and intervention

to the 26 project students identified as at risk or with a disability for the inclusive pre-school program. The 30 regular education preschool staff not directly employed by the grant were trained in intervention strategies for the students in need of specialized support. At the end of Year One, 10 children were on a waiting list for project services, since other community preschools were not accepting children with their disabilities into their settings.

The two project preschools that collaborated to achieve this outcome, Preschool A and Preschool B, were both non-profit agencies. Preschool A served 170 typically developing children between the ages of 2 and 5. The school day began at 9:00 a.m. and ended at either 12:45 or 6:00 p.m. depending upon the needs of the families and the school is open year round. Preschool B served 90 children of the same age. Its school day was 9:00 am to 12:45 p.m. Preschool B was also opened most of the year. As a result of a thorough, ongoing, comprehensive staff development package, all teachers had provided state-of-the-art inclusive educational practices to the target students as well as to all students in the school. One of the goals of the project was to prepare regular education preschool teachers to teach to all children if given appropriate training and classroom support. Each preschool classroom teacher received extensive monthly, weekly, and daily inservice training and in class consultation by the project staff. The project demonstrated strong progress in this area and, given the 100% success of graduates by the end of project's first of three years in operation, this goal was being measurably achieved. In addition, the staff completed a satisfaction survey to determine their approval and motivation for the project. The responses were extremely favorable. For example, one telling query asks, "If given the chance again next Fall, would you have another student with disabilities in your classroom." The response was an overwhelming 100% "Yes".

Outcome: Increased available resources to support families

The project developed twenty-six preschool “slots” that served children with mild to significant disabilities. The project also provided a total of \$16,000 in tuition stipends for the past twelve months for families in need, to insure a zero rejection outcome for families.

Additional specialized services have been delivered in an Integrated Therapy model such as speech therapy by project staff or collaborating local school districts and other public and private agencies. In cases in which districts refused services to students, the project was able to continue support services for those children in dire need of speech therapy, occupational therapy, physical therapy, and behavioral therapy with grant funds.

Parents gained so much from their inclusive opportunities at Preschools A and B. The effects were astounding. All project families reported a noticeable improvement in their child’s functioning and social skills, and more confidence in their ability to help their child learn and develop. One parent reported that she was so overwhelmed by the progress that her son was making in comparison to the little he had gained from his segregated special education experience: “He’s making friends, he’s playing with other kids, and he talks to me more, it’s so wonderful!” Another mom took the initiative to write a glowing letter of support to the state Commission, which was directly responded to by a state Senator. A family survey was distributed investigating families’ attitudes and satisfaction with the project. Again, the positive response was significant. Families reported strong support from the program, valuable insight from family trainings, exceptional efficacy from staff and an overall warm sense of belonging not experienced in other early childhood programs. Families reported feeling empowered to pursue a long-term inclusive education for their children and a gratifying sense of community involvement.

Outcome: Increased “School Readiness” in Kindergarten and First Grade

Of the nine students with disabilities leaving the project for public school, all had confirmed transition placements in a regular kindergarten classroom. As a result, the project met its highest

priority outcome measure, 100% of the transitioning children entered a regular education kindergarten. These data indicate that those children and their families received quality education during their preschool experience as a result of the services and support provided by FIPP. Two of those students were deaf/hard-of-hearing, one had brittle bone disease, hearing loss, and other developmental challenges, one had Attention Deficit Disorder, one had a life threatening food allergy, one had Cerebral Palsy, and three had Autism. This outcome is quite dramatic considering the severity of their disabilities and that typically these students would not have graduated to a regular education kindergarten, but instead would have been placed in special education at an unspecified grade level. By providing these children with availability and access to quality early care and education, the project has enabled them to be “ready for school”.

Additional milestones met included: (a) all nine children advanced developmentally, (b) all children’s communication and motor skills improved, and (c) all children who had Individualized Education Plans (IEPs) met their annual goals.

The project was extremely successful in collaborating with some schools and school districts to establish a very close relationship that supports the children and families. For example, three districts in particular were exemplary in their reciprocal efforts to provide an Integrated Transdisciplinary Therapy model including speech, occupational, and physical therapies. Teachers from a nearby special education preschool collaborated with the FIPP teachers for the purposes of data collection, planning, curriculum design, evaluation, service delivery, and training. In addition to school collaboration, the a regional state corporation that provides services to individuals with developmental disabilities from birth to death worked jointly with FIPP to provide on-site integrated services and further data. Through the cooperative efforts of this regional corporation, Preschool A was licensed to provide child-care to preschoolers with disabilities. This action served as a step in the institutionalization of the grant. Similarly, several

privatized service providers funded by families' health insurance have worked directly with FIPP to provide services at the school sites. This service delivery model is essential to successfully generalizing skills acquired in the therapeutic context and has been shown in extant research to be most efficacious for preparation to normalized educational environments. Finally, the relationship with the university greatly facilitated the project's goals. As a result of collaborative endeavors with its department of special education, two student teachers were placed at Preschool A in order for them to fulfill their state competencies for the Early Childhood Specialist credential. This opportunity has created a multiple long-range impact for the field of early care and education. Pre-service training in an inclusive preschool context prepares teachers as inclusion specialist, meeting the needs of families and children who wish to be educated along side their typically developing peers. Rather than simply being trained to teach to children in segregated environments, these teachers will now have been exposed to the best practices of preparing children and their families to be able to continue to benefit from an inclusive educational experience for the remainder of their school career from kindergarten and beyond.

Services Planned for but Not Provided

At this stage in the funding period, all services planned to be provided are being provided according to the project timeline. All scheduled outcomes have been achieved to date. In fact, many of our targeted objectives were met prior to our target dates. What is most disconcerting is that we have a waiting list of families in need of this service and there are not a sufficient number of programs available to accommodate them. We currently have 10 families who are searching for an inclusive educational preschool placement for their children between the ages of 2 and 5. FIPP is restricted in the number of students it can serve per site because we can not exceed the proportionate number of children with disabilities represented in the general population, which is 10%.

Capacity Development

Child and family recruitment, assessment, and programs. Twenty-six students with various special needs were identified and recruited for the project over the past 10 months. Recruitment was accomplished through contacting relevant agencies including Regional Center of Orange County, school districts, Orange County Office of Education, PROUD, Comfort Connection, the local Autism chapter, ARC, and local universities. Once they were enrolled in the school, children were assessed based upon criterion-referenced tests as well as applicable standardized measures. Data from our own evaluations as well previous collected information from families were used to determine the child's needs. An individualized plan was developed in a team context with parents, teachers, the inclusion specialist, and collaborating therapists. From this plan, curriculum, strategies, and classroom modifications were designed to implement the plan based on a developmental, child-initiated model with direct instruction when necessary. Each objective on the plan has a quantitative data system to track progress for the purpose of making program changes if necessary.

Staff recruitment and hiring. Staff were recruited from various sources including public newspapers, web based recruitment sites, advertisement at local universities, word of mouth, and internally. We currently have the following staff employed: Three inclusion specialists, one consulting speech therapist, two full-time teachers, 7 part-time teachers, one clerical assistant, and two consulting educational specialists.

Staff training. Monthly staff training meetings have taken place over the past 10 months and during three of those months two meetings were held. The trainings were conducted by prominent experts from the field who are collaborating with the project. Some trainings were also offered by Regional Center of Orange County and Irvine Unified School District. Follow up to trainings is offered on a daily basis by the project director and inclusion specialists. All follow up is tied directly to the children and made relevant to the children's and families' needs.

Family Support and Training. A family support group has been formed and meets on a monthly basis. Meetings consist of either families gathering to simply discuss their children, or experts from the field are brought in to do presentations based on family requests and needs. Dr. Lou Brown from the University of Wisconsin, an internationally renowned expert in inclusive educational practices, spoke at the JCC to families and staff. Staff is accessible to families on a daily basis formally or informally. Meetings for children take place monthly or on an as-needed basis. Each child has a Home/School Communication book that enables staff and families to correspond regarding progress or challenges. During the initial assessment period teachers conduct home visits to contribute to the evaluation material.

Collaboration. The project has established a collaborative working relationship with schools, school districts, public agencies, private agencies and individuals. Staff and administrators from Irvine Unified School District, Newport Mesa School District, and Taft School for the Deaf provide on-site services, meetings and trainings for FIPP staff. Ongoing outcome data are being

collected and provided demonstrating effects of inclusive practices for their students. FIPP staff is invited to district I.E.P. meetings, and families of our program are reciprocally supported. Public agencies such as the Regional Center of Orange County, the Department of Social Services, Orange County Department of Education have been instrumental in supporting FIPP's children and families for the purposes of recruitment and referral, service delivery and service coordination. Equally instrumental have been private service providers that have worked jointly with FIPP to provide referrals, on-site training, service, and family support. Finally, California State University, Fullerton, has served as a very strong collaborator through its Department of Early Childhood Special Education. Through on-site and off-site preservice training, teachers are being prepared in state-of-the-art empirically based best practices of inclusive education. The project director, who is also a professor in the Department of Special Education, brings to the project a wealth of experience, expertise, and research background. This unique opportunity to coordinate services with a nationally and state accredited university and department has resulted in the accomplishment of valuable outcomes that have strong implications for the field of early childhood education on a national scale.

Increased availability and access to early care. Twenty six students and their families were identified and recruited for the projects fully included preschools. Student disabilities ranged from life threatening food allergies, to developmental, sensory, physical, cognitive, and language delays or disorders. The project exceeded the outcome contract of increasing the number of affordable quality early care and community slots in the most inclusive setting to meet the needs of 26 students with disabilities and their families.

Lessons Learned

The goal of this project was to attract students with the most significant disabilities than those currently being served. Although the students currently being served have very disabling

challenges, students with even more severe challenges are generally served by county-funded programs that are separate from local school districts, making them even less accessible to inclusive educational programs and less likely to enter a regular education kindergarten. The project plans to make more aggressive efforts to recruit those families whose children have very severe needs so that they can share the wonderful benefits that all the children are experiencing by this project.

Another goal of this project was that all teachers in the preschool not directly employed by the grant would have been fully trained by the project's funding date to teach to all children regardless of their challenges and that the children would not need additional support beyond the scope of the preschool's existing teaching staff. Due to the degree of challenges of many of the children, FIPP site classrooms continue to require specialized additional support provided by the project staff development and staff-to-student ratios must remain higher. This will continue until the school districts develop the capacity and are able to provide reasonable and necessary support.

What is significant is the ongoing support that has been provided by the administration by the end of the first year. This is critical to the success of the project and data collection is currently underway to provide empirical evidence to support this hypothesis. Also significant and under investigation is the dramatic improvement observed among students who entered the program from more segregated placements. These students are meeting their IEP goals and are making new friends.

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