

The State of the State for Missourians with Disabilities

EARLY INTERVENTION

“While children with disabilities may have very different needs, including significant medical needs, our goal should be to ensure our children live natural lives, included in their homes and communities, from the earliest possible moment. Unfortunately, the special programs and services many parents have come to depend on force children to live unnatural lives, isolated and segregated from the mainstream of their communities.”¹

Our Beliefs

The Missouri Planning Council for Developmental Disabilities’ (MPC) mission is to assist the community to include all people with developmental disabilities (DD) in every aspect of life. In regard to education, the council believes this mission will be achieved when people with DD attend school with their peers in regular classrooms and neighborhood schools.²

MPCDD Goal

Students and young children receive quality education in inclusive settings.

What the Research Says

Early intervention services for infants and toddlers, and early childhood special education services for preschoolers are made available through a federal law known as the Individuals with Disabilities Education Improvement Act of 2004. The federal law is based in principles of early intervention and requires systems to: 1) center on families; 2) maximize the participation of children and families in natural environments; 3) foster interactions with children without disabilities; and 4) integrate and coordinate activities at all levels of the system.³

In regard to the current state of early intervention in this country, “...universal access to inclusion is far from a reality, practices differ radically from community to community without any apparent rationale, and controversy is common across states with respect to how to interpret and apply the concept of natural environments.”⁴ Each of these dilemmas is certainly true in Missouri.

The long-term economic benefits of high-quality child care have been well documented⁵, with government earning an \$8 return for every dollar invested in early intervention.⁶ Benefit-to-cost ratios such as these are in stark contrast to the less robust returns of other investments made by government.⁷ Given the high

rate of return to investment in early childhood education at every age, logic dictates that when making budget decisions, policy makers should look to other state expenditures with lower rates of return rather than making trade-offs within early childhood care and education budgets.⁸

The State of the State in Early Intervention

In Missouri intervention for children with DD ages 0-2 is delivered via the First Steps (FS) program and through school district early childhood special education (ECSE) programs for ages 3-5. The chart below details the children served in Missouri over the last several years.¹⁰

CHILD COUNTS	2000	2001	2002	2003	2004	2005	2006
First Steps 0-2 years	3,039	2,825	2,942	3,423	3,445	3,188	3,350
ECSE 3-5 years	8,036	9,007	10,049	10,893	10,856	10,898	(na)
Public Preschool	(na)	4,400	10,697	11,604	14,169	17,849	(na)

(na) = data not available

First Steps. Missouri’s participation in the First Steps program is a voluntary, but vital, choice for the children of our state. The program seeks to fulfill the federal policy on early intervention “to develop and implement a statewide, comprehensive, coordinated, multidisciplinary, interagency system that provides early intervention services for infants and toddlers with disabilities and their families.”¹¹ Yet, **Missouri only ranks 45th nationally** in the percentage of children served to age three, at 1.53%, according to federal special education data. This compares to the national average of 2.51% of children served.¹²

A 2006 state audit of Missouri First Steps found that children’s access to the program was being limited by establishing eligibility criteria more restrictive than most states. According to department officials, the eligibility criteria have remained restrictive for budgetary reasons, focusing on serving more severely disabled children. While states with broad eligibility criteria for entry into early intervention find

What Missourians with DD and Their Families Are Saying⁹

Statewide Needs Assessment Results

Respondents thought families of children with disabilities were most likely to utilize Early Intervention services through:

- First Steps (42%)
- Head Start (26%)

Respondents thought families of children with disabilities were least likely to utilize Early Intervention services through:

- regular preschool (30%)
- special education (25%)

Adequacy of Early Intervention

- (60%) regular preschool rated inadequate/fair
- (55%) special needs preschool rated inadequate/fair
- (61%) First Steps rated good/excellent
- (59%) Head Start rated good/excellent

Availability of Early Intervention

More than half of respondents viewed inclusive early intervention opportunities as *not available* or *only somewhat available*.

“Early therapies make a huge difference in how far a child can go in developing to their full potential.”

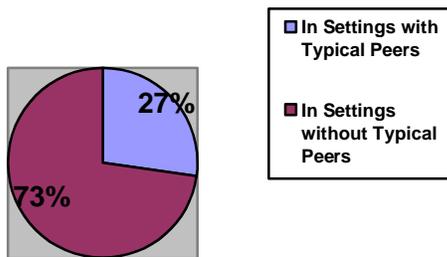
38% of these children to be eligible for special education programs at school age, Missouri is one of only three states which require a minimum of a 50 percent delay in one developmental area to be eligible for early intervention services. Other states, like Kansas, qualify children with a 25% delay in one or more areas. In Missouri, fewer children qualify for early intervention, and more of these children (56%) still require special education at school age.¹³

The First Steps program appears to be caught in a battleground of competing philosophies of effective early intervention. The program underwent a redesign in 2004; however, the redesign had problems with provider misunderstanding and failure to embrace the new philosophy. The new philosophy is one of building family capacity to understand and address issues within daily routines, as opposed to a treatment-based model.

Early Childhood Special Education:

While enrollment in Missouri public preschools has more than doubled in the last five years,¹⁴ the percent of ECSE students who receive their special education services in settings with typically developing peers has only averaged 27% since 2003.¹⁵

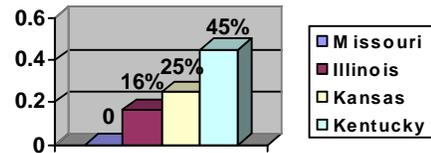
Place of Special Education Service Delivery¹⁶



Missouri schools will soon be required to report the extent to which students in ECSE are participating in regular education, including participation in educational services not paid for by districts. Currently, schools only report on where children receive special education services.¹⁷

Funding. In Missouri there is still a great need for a continuous and reliable source of public funding for early learning.¹⁸ Missouri's lack of financial commitment to early childhood programming can be seen in the fact that Missouri was one of only a handful of states with pre-K programs who did not increase pre-K funding for FY 2007, as illustrated in the following chart. This lack of state financial commitment only hurts children with special needs.

Percent Increase in Pre-K Funding FY2007¹⁹



What We Recommend

These recommendations are offered to supplement that which has already been implemented with the redesign of First Steps.

“If they take First Steps away we will have a lot of kids with problems not getting help.”

“Parents as Teachers program...can usually detect if the child is not at the level they should be and can refer you to places to receive help.”²⁰

- A dramatic shift is needed towards providing options for early childhood special education within inclusive environments, just as the First Steps philosophy has shifted towards addressing the child within their natural environment. Segregated classrooms are not natural, except in being “naturally” unequal. When self-contained classrooms are required to meet student needs, primary focus should be placed on transitioning towards more natural, inclusive environments as quickly as possible.
- Continue to develop efforts to achieve a uniform philosophy across First Steps providers. Training efforts should be focused on increasing provider skill set in consultative, strengths-based, family-focused therapy. Presence of this skill set should not be assumed as most providers were trained in traditional therapy approaches.
- Ensure that all young children from birth to age five have access to high-quality care and learning opportunities at home and in other settings. Offer incentives for child care providers to increase high-quality, inclusive child care services for children from birth to age three, as this is a natural environment for many children.
- As recommended by the Missouri auditor, a cost-benefit analysis should be conducted, which would allow DESE to determine the feasibility of broadening eligibility criteria for the First Steps program, possibly reducing usage and costs of the ECSE program.
- Outcomes for First Steps families, and quality assurance indicators, should be carefully measured following the implementation of the redesign philosophy, to ensure that the quality of services remains consistent and to identify areas of need for further redesign and provider training.

EARLY INTERVENTION ENDNOTES

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² "Missouri Planning Council for Developmental Disabilities Mission Statement." Retrieved 1/07 from www.mpcdd.com

³ Guralnick, M. (2005). An overview of the developmental systems model for early intervention. In Guralnick, M. (Ed.), *The Developmental Systems Approach to Early Intervention* (pp. 3-28). Baltimore: Paul H. Brookes Publishing Company.

⁴ Guralnick, M. (2005), pg. 7.

⁵ Rolnick, A. & Grunewald, R. (March, 2003). Early Childhood Development: Economic development with a High Public Return. *Fedgazette*. Federal Reserve Bank of Minneapolis. Retrieved on 9/6/06 from <http://minneapolisfed.org/pubs/fedgaz/03-03/earlychild.cfm>

⁶ Barnett, W.S. (2000). Economics of Early Childhood Intervention. In J. Shonkoff & S. Meisels (Eds.), *Handbook of Early Childhood Intervention*, 2nd Ed. New York: Cambridge University Press.

⁷ Ibid.

⁸ Barnett, S., Hustedt, J, Robin, K., Schulman, K. (Amended 2006). *The State of Preschool: 2005 State Preschool Yearbook*. New Brunswick, NJ: The National Institute for Early Education Research, Rutgers, The State University of New Jersey, pg. 11. Retrieved on 1/26/07 from <http://nieer.org/yearbook/pdf/yearbook.pdf#page=12>

⁹ Rinck, C., Graybill, T., Berg, R., Horn, W. (2006). "The Missouri Planning Council for Developmental Disabilities Statewide Needs Assessment".

¹⁰ Sources: "2004-2005 Report of the Public Schools of Missouri", Table 38B. (2006). Missouri Department of Elementary and Secondary Education. Retrieved on 1/22/07 from <http://dese.mo.gov/schooldata/AnRept05.pdf>; www.dese.mo.gov/divspeced/FirstSteps/dec1childcount.html; Wiese, K. (1/23/07). "Audit says Missouri's First Steps program could do better". www.stltoday.com.; "Missouri Department of Elementary and Secondary Education Special Education State Profile". (December 2006). Retrieved on 1/27/07 from <http://www.dese.mo.gov/divspeced/PDF/MOProfile.pdf>

¹¹ "SPOE Director Training: First Steps Philosophy". (2004). Missouri Department of Elementary and Secondary Education, Division of Special Education, First Steps. http://dese.mo.gov/divspeced/FirstSteps/SPOEDirTgn_files/frame.html

¹² Montee, S. (2007). *Elementary and Secondary Education: First Steps Program Audit*. Report no. 2007-01. Retrieved on 1/23/07 from <http://www.auditor.mo.gov/press/2007-01.pdf>

¹³ Ibid.

¹⁴ "Missouri Public School Accountability Report: 2005-06 School Year". Missouri Department of Elementary and Secondary Education. Retrieved on 1/22/07 from <http://dese.mo.gov/commissioner/statereportcard/src.pdf>

¹⁵ "State Performance Plan Targets and District Status". Missouri Department of Elementary and Secondary Education Special Education State Profile. (December 2006). Retrieved on 1/19/07 from <http://dese.mo.gov/divspeced/PDF/MOProfile.pdf>

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¹⁹ "Policy Highlights". (11/21/06). St. Louis, MO: Citizens for Missouri's Children. Retrieved on 12/8/06 from www.mokids.org

²⁰ Rinck, C., Graybill, T., Berg, R., Horn, W. (2006).