School Readiness for Young Children with Disabilities
What Do We Know? What Do We Need to Know?

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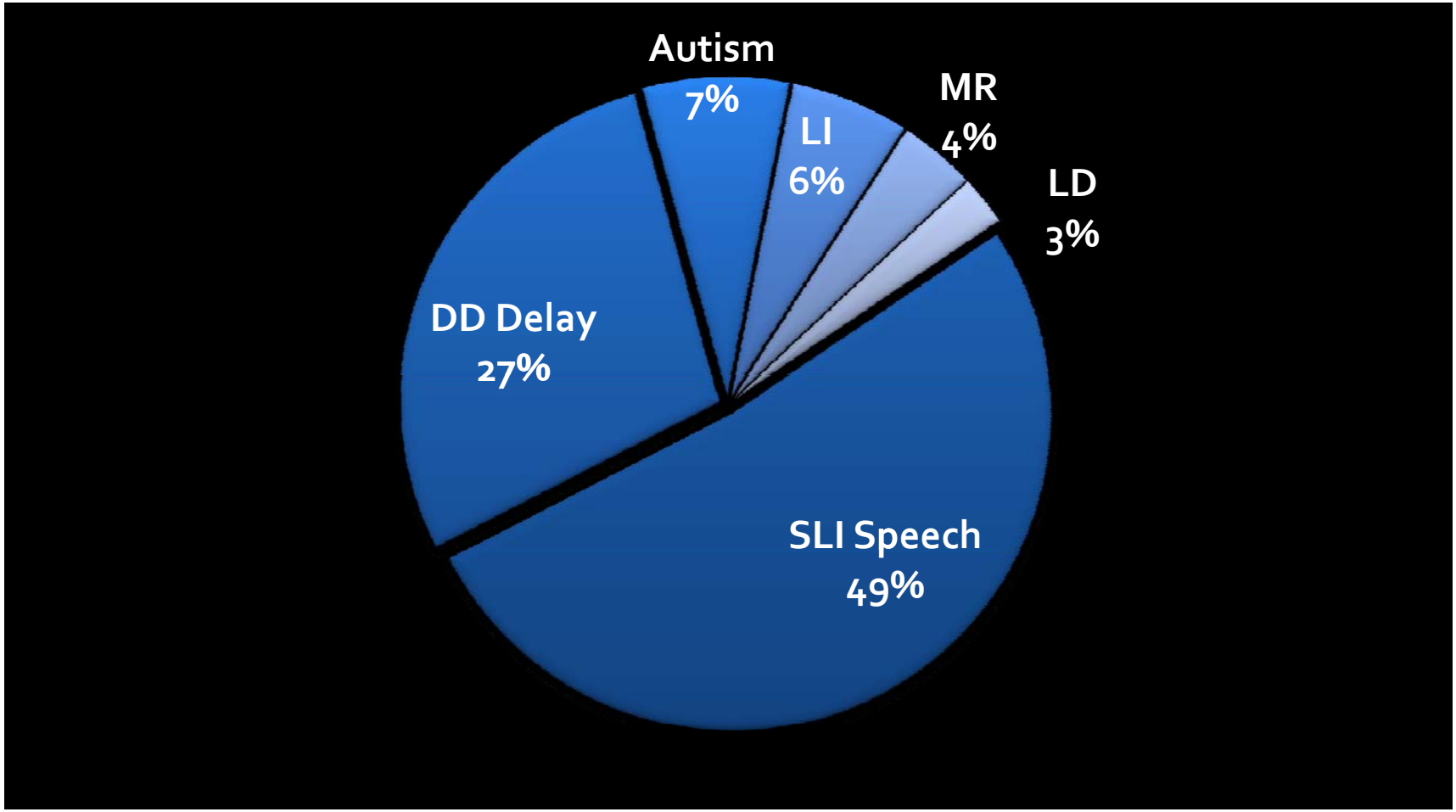
Some Quick Numbers about Children with Disabilities

- In 2007, over 1 million children between birth and 5 years receiving Early Intervention or Early Childhood Special Education
- In 2007, 65% of 3-5 year olds who received ECSE spent part of the day in a regular classroom
- Head Start requirement to serve at least 10% of children with disabilities
- In 2010, over 112,000 children with disabilities under 5 were served through EHS and Head Start

Pre-Elementary Education Longitudinal Study

- Nationally representative study of 3104 3-5 year old children receiving special education services
- Accelerated longitudinal study-studied 3 cohorts of children from preschool into kindergarten
- Funded by IES-National Center for Special Education Research
- Carried out by WESTAT (www.peels.org)

Percentage of Children in Disability Categories in Total PEELS Sample



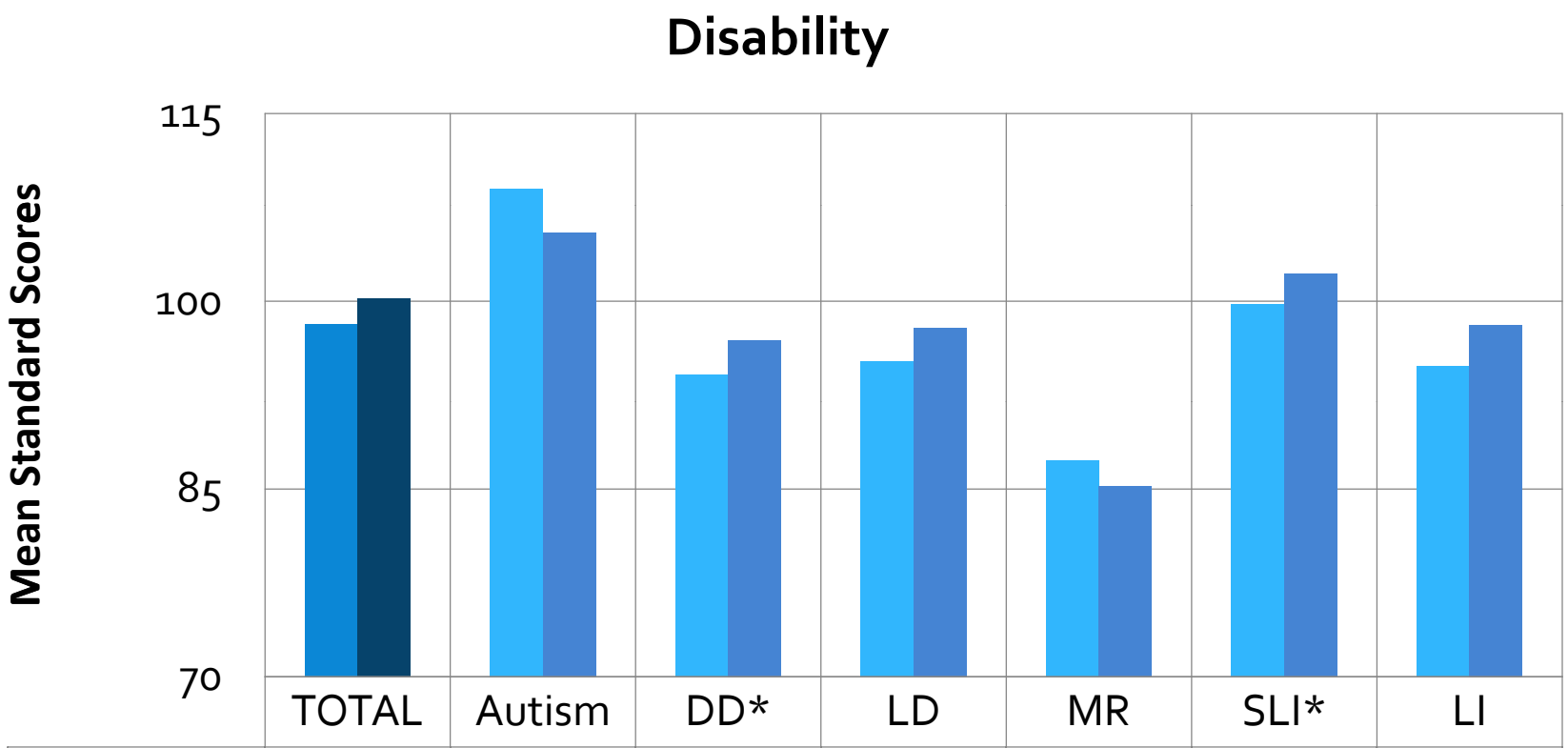
Sample of Findings from PEELS

- Overall trend--Children with disabilities are functioning below the population mean but within one standard deviation on many measures.
- Overall, children with disabilities are performing closest to the population mean in emergent literacy and are most distant from population mean in vocabulary.
- Children with disabilities as a group are holding their own and in general demonstrating a normative rates of growth.

Trends in Performance Over Time

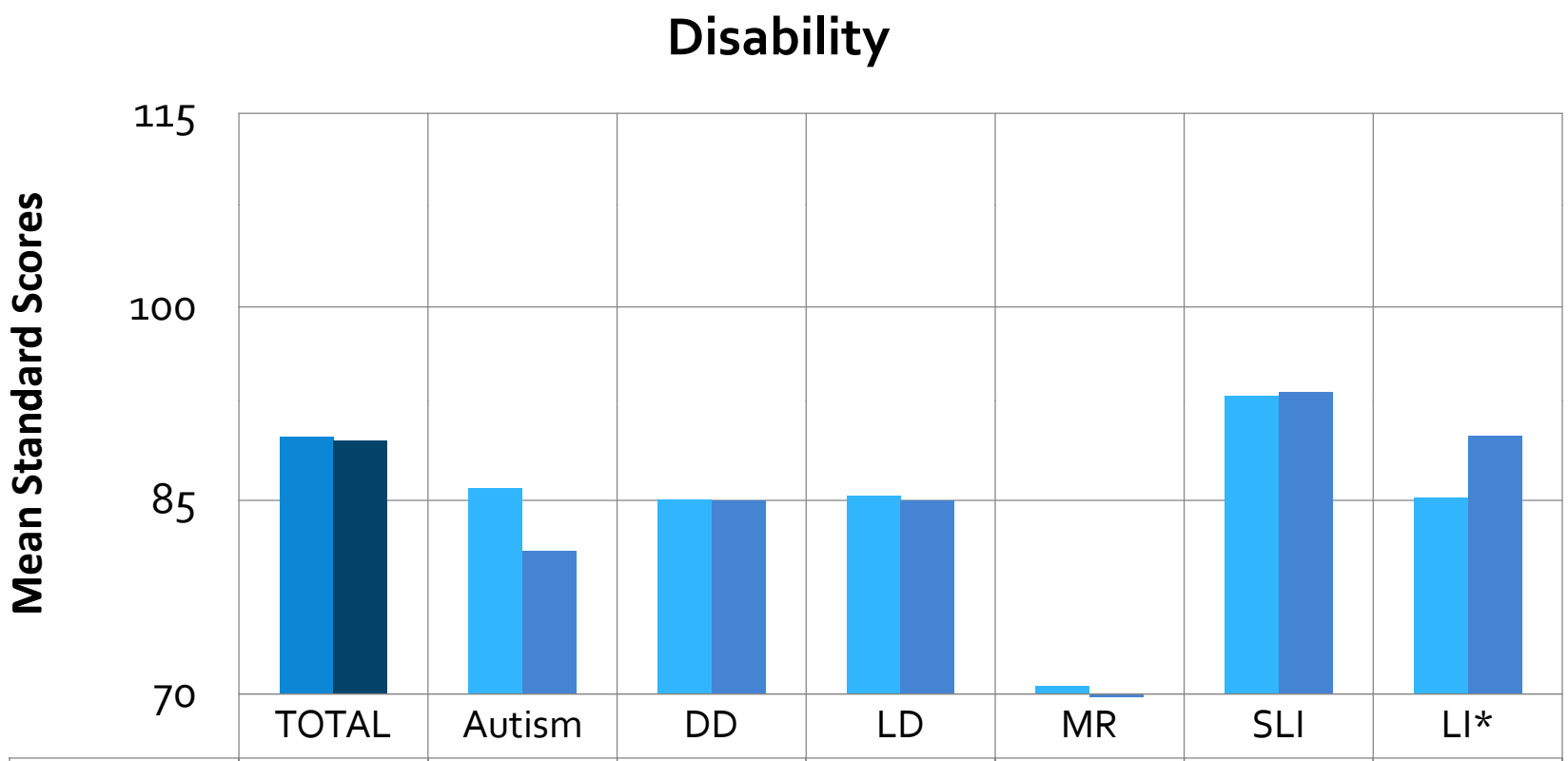
- **Within and across outcome areas, there is a great deal of variability by type of disability.**
- Yearly gains across areas:
  - Overall, children with disabilities showed significant change over time in literacy, applied problems and social skills; <u>not</u> vocabulary.
  - Children with Developmental Delay (DD) and SLI (Speech and Language Impairments) showed the greatest gains over time.

PEELS: Emergent Literacy (Woodcock-Johnson III: Letter Word Identification) for Total Sample and Disability Type



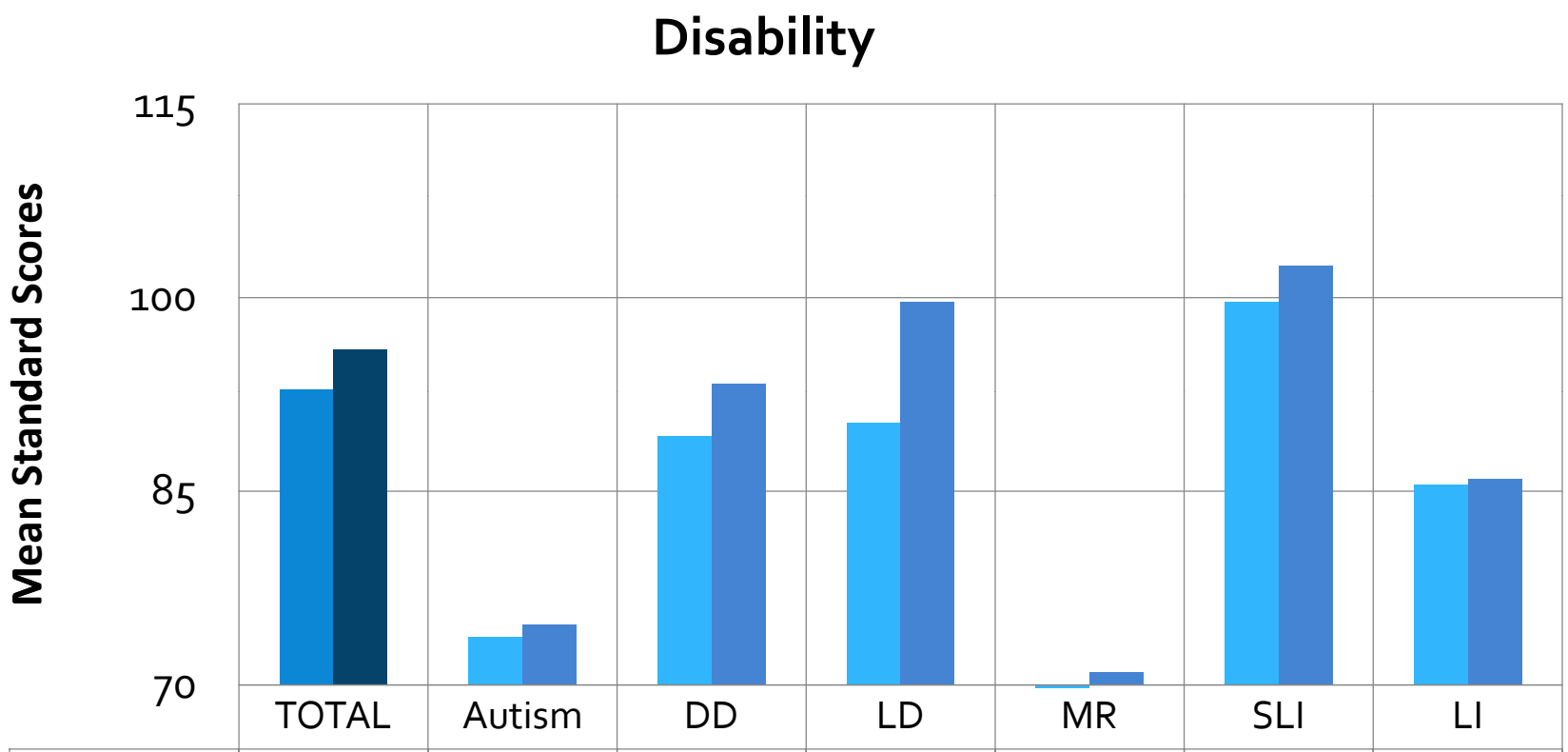
	TOTAL	Autism	DD*	LD	MR	SLI*	LI
2003-2004	98.2	109	94.1	95.2	87.3	99.8	94.8
2004-2005	100.2	105.5	96.9	97.9	85.2	102.2	98.1

PEELS: Vocabulary (PPVT) for Total Sample and Disability Type



	TOTAL	Autism	DD	LD	MR	SLI	LI*
2003-2004	89.9	86	85.1	85.4	70.6	93.1	85.2
2004-2005	89.6	81.1	85	85	66.5	93.4	90

PEELS: Social Skills (Preschool and Kindergarten Behavior Scales- 2) for Total Sample and Disability Type



	TOTAL	Autism	DD	LD	MR	SLI	LI
2003-2004	92.9	73.7	89.3	90.3	69.2	99.7	85.5
2004-2005	96	74.7	93.3	99.7	71	102.5	86

Important points

- Large variation across disability categories
- Children with disabilities performance relative to typical development varies by domain and category
- Children's change over time varies by domain and category
- Considerable variability within category

What is the best way to address the variability associated with disability?

- Recommended practice is <u>not</u> to design instructional practices specific to disability category.
- There are many evidence-based practices for improving performance in language, social, cognitive development and self-regulation that work for a wide range of children.
- Recommended practice is to individualize practice to the child (family) and not the disability category.

The Puzzle of How to Make Individualization a More Explicit and Transparent Process

How do we get evidence based practices associated with individualization implemented with fidelity at scale ?

And in a culturally informed way?

What does this mean for the Head Start teacher on Monday morning?

- Need for quicker more efficient ways to identify children who are slipping away from a typical developmental trajectory
  - Train teachers and home visitors to do easy screeners so they can do them more often
- Need for more training on evidence-based instructional strategies to meet children's individual learning needs
- Need for tools teachers can use to monitor growth to see if instruction is making a difference
- Need for professional development on using data to make instructional decisions—help teachers and home visitors learn they are "Agents of Change"

Evidence-based strategies that help teachers individualize for children with disabilities will help them individualize and address the needs of *all* learners.