

The University of Maine

DigitalCommons@UMaine

Student and Trainee Scholarship

Center for Community Inclusion and Disability
Studies

4-2021

Barriers to Accessing Early Intervention and Early Childhood Special Education: Professionals' Perspectives

Tracey Miller

Follow this and additional works at: https://digitalcommons.library.umaine.edu/ccids_studentpub



Part of the [Early Childhood Education Commons](#)

This Poster is brought to you for free and open access by DigitalCommons@UMaine. It has been accepted for inclusion in Student and Trainee Scholarship by an authorized administrator of DigitalCommons@UMaine. For more information, please contact um.library.technical.services@maine.edu.

Barriers to Accessing Early Intervention and Early Childhood Special Education: Professionals' Perspectives

Tracey Miller, M.Ed., Early Childhood Special Educator, 2020-21 NH-ME LEND Community Trainee



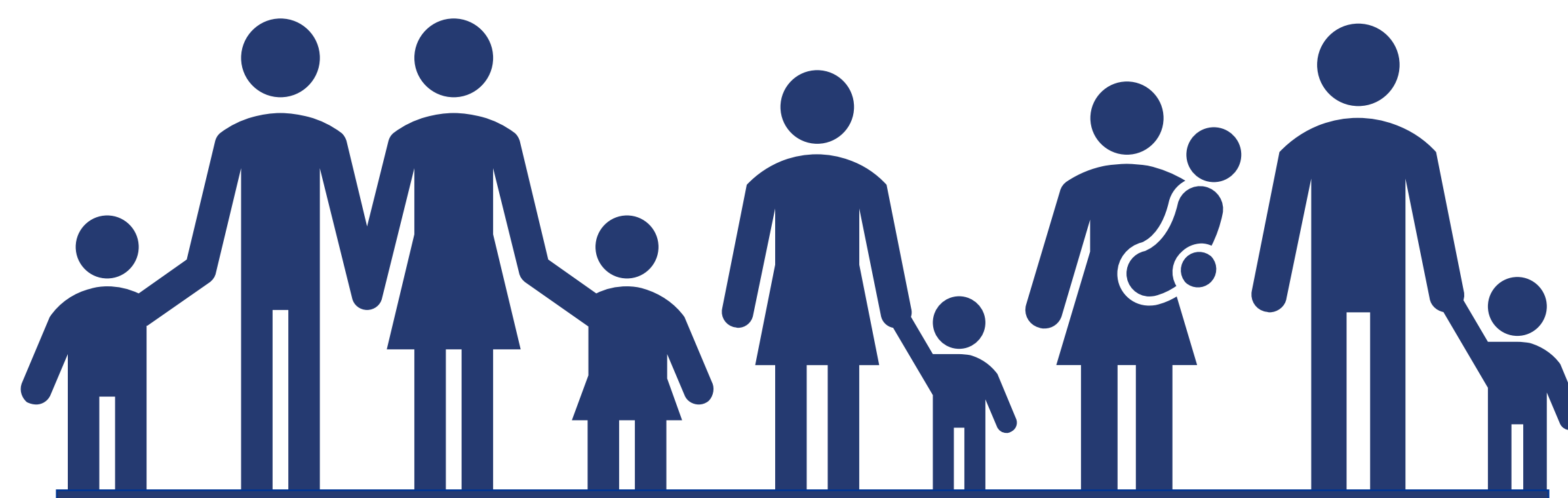
NH-ME LEND
PROGRAM

Introduction

Partnering organization: Child Development Services

Supervised by the Maine Department of Education, Child Development Services (CDS) provides Early Intervention (EI) for children from birth through age 2 and Early Childhood Special Education (ECSE) for children ages 3-5 through a network of regional sites.

Access to EI and ECSE services educates and empowers families to understand and respond to their children's developmental needs and supports improved cognition, language, communication, social-emotional skills, and school readiness. These early gains can lead to better outcomes later in childhood and into adulthood.



Unfortunately, data reflect that CDS is "losing" a significant number of families. Of all referrals to CDS statewide in FY2019, **22%** in Part B and **34%** in Part C were declined by the family or CDS staff were unable to establish or maintain contact.*

Objective

To identify barriers to families' participation in EI / ECSE, from the perspective of CDS providers.

* Maine Department of Health and Human Services (2020). Report: Resolve, to improve access to early and periodic screening, diagnostic, and treatment services for children. <https://www.maine.gov/dhhs/sites/maine.gov/dhhs/files/documents/Early-Periodic-Screening-Diagnostic-Tx-Svs-for-Children-Birth-to-8-Years-LD-1635-Report-01-2020.pdf>

Methods

Survey Focus group	Participants: Staff including special educators, case managers, administrators, and related service providers (SLP, OT) in Part C & Part B at one CDS site	95% Female 5% Male 100% White
		Age 35%: 21-40 53%: 41-60 12%: over 60
		Degree 50%: Bachelor's 44%: Master's 6% Associate's
		Years of Experience 37%: 5-10 42%: 11-20 21%: >20

Key Findings

Barriers

When families opt out of EI/ECSE, it is most often upon initial referral, both for Part C and Part B.

"If we can get [families] through that initial stage, we're usually good."

Families sometimes conflate CDS with DHHS / Child Protective Services or are otherwise confused about the organization's role.

"Having that '.gov' email address can incite fear in a lot of people."

Respondents reported that families only *occasionally* or *sometimes* understand their rights under IDEA and the process of determining eligibility for EI/ECSE.

Families occasionally opt out of evaluations and services due to cultural differences in perceptions of disability and beliefs about the value of EI/ECSE.

CDS offers evaluations and IEP meetings during limited hours, and only on weekdays, which can be a barrier for working parents.

"Parents want to participate. We need to be flexible...if we really want to have an impact."

Local pediatric offices are among CDS's largest referral sources, but families sometimes are unaware of these referrals and/or do not understand their purpose.

Respondents reported that families only *occasionally* or *sometimes* understand their rights under IDEA and the process of determining eligibility for EI/ECSE. This is compounded for families whose primary language is not English. Only one of CDS's documents is currently available in translation. Interpreters with both cultural familiarity and knowledge of special education are difficult to find.

Strengths

A shift to remote technologies during the COVID-19 pandemic was a barrier for some. However, CDS's increased use of technology in its work has:

- significantly increased families' ability to participate in IEP meetings (via Zoom and Microsoft Teams)
- allowed providers to administer some observations and assessments online, freeing up time to serve more children
- improved families' ability to return required paperwork to meet required timelines

87% of respondents felt that families *frequently or usually*:

- trust and feel welcomed by CDS
- are interested in pursuing evaluations for their children
- want to be active members of the IFSP/IEP team

"I try to make sure they know that I'm on their side...that we're going to do what's right and what's best."

Limitations and Future Research

This project focused only on the perspectives of a demographically homogeneous group of professionals working in a single CDS site.

Future research should:

- ▶ include the views of families with diverse cultural and linguistic backgrounds
- ▶ seek the perspectives of families who have declined participation in EI/ECSE
- ▶ include professionals in other regional CDS sites

Discussion

The professionals with CDS feel confident that they are connecting families with the services they need, but results indicate some challenges. Confusion about CDS's role among families *and* referral sources, and differing cultural views on typical child development, can affect whether children with suspected developmental delays or disabilities ever reach the initial stages of assessment. Once engaged, families sometimes do not fully understand the process or their rights within it. Without access to translated documentation or knowledgeable interpreters, families that read or speak limited English are at a particular disadvantage in navigating the system. Working families, particularly those in hourly positions without schedule flexibility, experience difficulty joining IEP meetings and evaluations during weekday hours.

Addressing these barriers is key to ensuring two important principles of IDEA: that young children with disabilities are identified, and that their families are full partners in decisions about their education.

Recommendations

Improve communication with local healthcare and educational partners to increase understanding of CDS services and streamline the referral process.

Strengthen ties with local organizations serving children, including immigrant and refugee groups, to share information on benefits of EI / ECSE.

Provide "family friendly" documentation in multiple languages with standard notices and forms.

Examine occasional evening and weekend hours to accommodate working families.

Explore how technology can continue to support families' access and participation.