Within a few months after launching a project to create more abundant, high quality learning opportunities for children in several of Allegheny County’s poorest neighborhoods, organizers realized that a particular group of children posed a far greater challenge than they had anticipated.

Both the population of young children identified as having special needs ranging from disruptive behaviors to complex mental illness, as well as the number of early care education providers and family support staff eager to learn how to better cope with these children and help them succeed, quickly exceeded expectations.

“Child care programs are serving a large number of children and families with significant needs, but there have not been good connections to community resources to meet those needs,” said Ray Firth, Behavioral Health Policy Director for the University of Pittsburgh Office of Child Development (OCD). “Those resources exist in Allegheny County, but child care programs and families don’t always know how to access them.”

OCD was the coordinator of the Strengthening Early Learning Supports (SELS) project, which helped to strengthen early learning opportunities in four Allegheny County communities. The project was funded by the U.S. Department of Health and Human Services and The Heinz Endowments.

At the completion of the 17-month-long project in March 2006, significantly more children than anticipated received services, more than 250 early care and education providers and family support staff were trained to better manage children with special needs, and no child was asked to leave a program because of challenging behaviors.

Improving early learning opportunities for special needs children was only one of the SELS objectives. Others included improving early literacy for all children in the neighborhoods, improving their overall development and learning readiness, and raising the quality of child care. (For more information about SELS, see background report 76).

The Need For Help

Studies suggest that many child care and early education programs are ill-equipped to adequately address the special needs of children with challenging behaviors and disabilities.

Too often, such shortcomings have troubling consequences. An OCD study found that 23% of Pittsburgh area providers offer no care at all for children with more limiting special needs. Across Pennsylvania, 71% of providers reported that they expelled or threatened to expel a child for aggressiveness in the past two years, according to a statewide survey.

In its first six months, SELS identified 43 young children with special needs in the four neighborhoods — more than twice the number anticipated at that point and greater than half of the total number of special needs children expected to be identified in the entire project.

About 40% of those children had some type of developmental delay and about 40% had behavioral issues ranging from serious disorders, such as autism, to kicking and biting and other less serious, yet disruptive, behavior. At least 10% of the children had experienced violence, such as domestic violence or having a family member who was a victim of violence in the community. And at least 23% of the parents of children identified as

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having special needs appeared to have behavioral health issues themselves.

Eager To Learn

Although publicly funded resources for these children already existed — such as early intervention and mental health systems — they were often underutilized. One reason was that many families, child care, and early education providers did not know how to access them.

Once SELS began, the number of child care, early education providers, and family support staff eager to learn how to better deal with challenging behaviors and who to turn to for help quickly surpassed expectations.

“We’d have the capacity for 25 at a training (session) and we would have 40 people show up,” Firth said. “The need for training was clearly there and they were hungry for support.”

A Strategy For Support

SELS focused on increasing the awareness and capacity of caregivers, parents, and early care and education providers to identify and support children with special needs. For example:

- The nonprofit Alliance For Infants and Toddlers was identified as a single point of contact for services for children with suspected developmental delays and/or challenging behaviors, and SELS spread the word to family support centers, providers, and parents.
- On-site consultation was provided by child development and mental health experts to fill the service gaps encountered by providers and parents of children with special needs who were not able or willing to use publicly funded services.
- Using a “train the trainer model,” Family Communications, Inc. trained trainers to use strategies for managing challenging behaviors and supporting children with special needs. The trainers, in turn, taught early care and education providers and family support staff.
- The same process was used to expose providers and family support staff to another curriculum that gave them strategies for dealing with children’s angry feelings and aggression.

Coaches employed by SELS emerged as key players in helping early care and education providers take advantage of the available supports and, in turn, better address children with special needs. “They are the first point of contact,” said Firth. “They build a rapport with the provider, treat them with respect, develop a relationship on the provider’s turf – and they have some tools in their bag, some very practical things that they can offer to help them.”

Sometimes, helping a family is as simple as connecting them with the right service. In one case, a woman whose husband had been murdered was found to be struggling with post-traumatic shock disorder, as were her children. Their needs were identified and they were put in touch with the appropriate support services.

In another case, a child care center was having difficulties with a child with autism, whose behavior had led him to be expelled from previous child care programs. The center was unaware the child was receiving early intervention services from the Pittsburgh Public Schools. As a result, the center’s child care staff did not fully understand the child’s disorder and did not know what help was being provided him. One phone call led the center and those providing the early intervention services to coordinate efforts to help the boy, and his behavior improved.

In 17 months, more than 100 children received services, about 20% more than had been projected. Some 47% of them received services for concerns about behavior, 31% for suspected developmental delays, 28% for possible mental health issues, and 5% for concerns about health issues.

In addition, 261 early care and education providers and family support staff were trained to better manage children with special needs. Nearly all reported an increase in their knowledge, skills, and comfort level in helping children manage their angry feelings and challenging behaviors. Most said they regularly applied what they learned to help the children in their care.

Perhaps most important, none of the children were excluded from an early care or education program while receiving the supports of the on-site consultant. A follow up survey found that only one child was subsequently expelled for behaviors that persisted despite treatment.

These experiences were shared with human service and education officials and have helped shape new initiatives and policy changes for improving support of children with special needs in Allegheny County, the Pittsburgh Public Schools, and across Pennsylvania, including a Department of Public Welfare pilot program that uses the on-site consultation model with child care providers in three regions.

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