

**Child Care for Children with Special Needs:
A Description of Current Issues
Facing Milwaukee County**



June, 1999

Prepared for:

4C - Community Coordinated Child Care, Inc.

Prepared by:

Lisa Larson, Ph.D.
Louise Lapine, Ph.D.
Ann Schmitter, M.S.W.
Susan Tragesser, B.A.
Ann Leichtfuss, M.S.W.

Executive Summary

As part of a demonstration project called Mobilizing Partners, the federal Department of Health and Human Services' Administration for Developmental Disabilities is engaging communities in a consideration of their state of readiness for inclusive child care. The Wisconsin Child Care Improvement Project is coordinating the state effort in five Wisconsin counties. Locally, 4C - Community Coordinated Child Care, Inc. (4C) is taking the lead in addressing the barriers encountered by families looking for child care for children with special needs.

The position statement of the Division for Early Childhood Council for Exceptional Children asserts that inclusion supports the right of all children to participate in natural settings within their communities. Inclusion assumes that all children should be served in the same programs they would have attended if they did not have special needs. Inclusion has an underlying philosophy that all children belong together. For children with special needs, this means that they can attend the child care program that their parents want them to attend. According to the U.S. Department of Justice, inclusion means providing children with special needs an equal opportunity to participate in a child care provider's programs and services.

Purpose and Methodology

The Planning Council for Health and Human Services, Inc. was asked by 4C to examine the extent to which child care providers in Milwaukee County are prepared to engage in full community-wide inclusion. The study gathered data from multiple sources, using several different methods:

- A postcard survey of all licensed and certified child care providers.
- A questionnaire survey of providers.
- Analysis of the child care provider resource and referral data base maintained by 4C.
- Focus groups with child care providers.
- Structured interviews with specialists in the Birth to Three community.
- Group discussions and individual interviews with parents of children with special needs.

From this information, the study developed a description of:

- The distribution of children with special needs in the present child care system.
- The experience child care providers report related to children with special needs.
- The degree to which child care providers are prepared for children with special needs and the resources providers need to be responsive to children with special needs.
- The challenges and potentials for partnership related to inclusive care, as experienced by parents, Birth to Three specialists, and the informal system of child care providers.

Definition of Special Needs

A wide range of definitions related to children with special needs exists in the literature. One set of definitions focuses on the category of special need or the limitations that a child is experiencing. Another set of definitions emphasizes the services or care that a child needs to support his or her development. Any discussion of inclusion needs to take into account this definitional complexity, as well as the diverse set of children that are included under the construct of special needs.

For the purposes of the present study, two methods of approaching the definition of special needs were used:

- The first method (used in the postcard survey) asked child care providers to decide on a child-by-child basis whether the child had a special need, with no definitional guidance. This method may reflect the working definition that providers use when a parent approaches them for enrollment.
- The second method (used in the questionnaire survey) asked providers to identify the number of children in each category of special need, using the impairment approach of listing categories of special needs.

Inclusiveness in the Present Child Care System

Inclusion assumes that all children should be served in the same programs they would have attended if they did not have special needs. This assumption leads to the expectations that children with special needs will be represented in all types of child care and that children with a given category of special need will not be heavily concentrated in any one type of child care.

Child care providers in Milwaukee County were asked to report their enrollment as of the week of February 1st, 1999. Providers were also requested to report the number of these children they considered to have special needs.

A postcard survey was mailed to all 773 group and family child care providers in Milwaukee County who were licensed by the state as of January 25th, 1999, and to all 1589 certified and provisional child care providers in Milwaukee County who were registered with 4C as of January 28th, 1999. The overall return rate for the postcard survey was 48.3%.

The results from the postcard survey indicate that approximately 6% of all children enrolled in child care are considered by providers to have special needs. The results also suggest that children with special needs in Milwaukee County are being cared for in a variety of settings.

- Licensed group centers report the highest number of children enrolled, and therefore the highest number of children with special needs.
 - 75% of children with special needs are being cared for in group centers.
 - 25% of children with special needs are being cared for in family homes.
- However, proportionally, group centers report the lowest proportion of their enrollment (5.5%) as being children with special needs.
- Family providers (including licensed and certified/provisional homes) report that 7–8% of their enrollment in a given week are children who have special needs.

The results from the questionnaire survey indicate that some special needs are more common than others in child care settings.

- Providers describing children with special needs in their care most often report chronic health problems (e.g., asthma and diabetes), formally diagnosed speech and language problems, children with behavioral/emotional problems, and children who have experienced high-risk family environments.

Children with these and most other special needs are highly concentrated in licensed group centers.

- Providers describing children with special needs in their care least often report children who are medically involved (e.g., use a ventilator or a g-tube) and children who have orthopedic impairments (e.g., use a wheelchair).

The few children who have medically involved conditions and orthopedic impairments are being cared for in group centers and in licensed family homes.

A Description of Child Care Providers Registered with 4C

Child care providers who register with 4C answer a standard set of questions about their services, training, and experience in order to inform parents about their program. In responding to this standard set of questions, some providers identified themselves as having experience related to the specific special needs surveyed by 4C. Their experience could have included educational training, child care experience with children having that particular need, and/or life experiences related to that need. Information about specialized provider training is also based on the self-report of providers. For group centers, the self-report describes specialized training achieved among the staff at the time of the questionnaire.

A total of 2025 Milwaukee County child care providers were included in the analysis. This number represents those providers who were registered with 4C as of January 6th, 1999 and were accepting new referrals.

The analysis of the 4C data base indicates that fewer than 50% of all child care providers report having experience related to any given category of special needs. The analysis also suggests that parents' likelihood of locating a child care provider with experience related to the special need of their child fluctuates greatly with the type of disorder. For example, 42% of providers report that they had experience related to asthma, while only 6% of providers report experience related to HIV/AIDS.

Factors that may contribute to parents' decision-making regarding child care vary by the type of child care provider.

- Parents are more likely to find a provider with experience related to their child's special need or to find wheelchair accessibility in a licensed group center.
- Parents who prefer providers who have specialized training are more likely to find this training among licensed group centers and licensed family providers.
- However, group centers generally offer less flexible scheduling options, are less likely to provide part-time infant care, and are less likely to offer payment assistance options than family homes.
- As a result, parents who prefer home-based care, require flexible scheduling options, or need assistance with payment may have difficulty finding a provider who has experience related to their child's need or who has specialized training.

Child care providers who register with 4C as having an inclusive care focus offer a potential starting point for parents looking for care for a child with special needs.

- A total of 249 child care sites (12% of all 4C providers) identify themselves as having an inclusive care focus. These sites include licensed group centers, as well as a range family providers.
- Providers with an inclusive care focus are more likely to report experience related to specific special needs and specialized training than other providers.
- However, parents who prefer a provider with an inclusive care focus may encounter some limitations with respect to scheduling, special services, and payment assistance.

How Prepared are Child Care Providers for Children with Special Needs?

Providers cannot be expected to know about or be fully prepared to care for every potential condition and factor that can have negative effects on children's learning and development. However, for full inclusion to be possible, there needs to be a community-wide readiness among child care providers to be responsive to children with special needs. According to the National Association for the Education of Young Children (NAEYC), many of the potential benefits of inclusion will not occur without purposeful and careful supports to promote them.

To explore what supports child care providers already have in place and what resources they may need to provide safe, quality care for children with special needs, a questionnaire survey was developed.

Questionnaires were mailed to all 773 licensed group and family providers and to all 744 certified and provisional providers who returned the postcard survey. Questionnaires were returned by 155 group centers and licensed family homes (20.1% of all licensed providers) as well as by 170 certified/provisional child care providers (22.8% of those certified/provisional providers surveyed).

The questionnaires asked child care providers:

- What it would mean for their facility if a child needed a number of different caretaking activities and supportive caretaking environments.
- If they would need to plan for and make changes at their facility in order to provide a particular caretaking activity or environment.
- If they would need additional money, staff, or other resources to offer these services.
- What types of training and consultation they would need to provide safe, quality care given different special needs categories (asked of licensed providers only).

The questionnaire results suggest that there is considerable variation in the number of providers who are presently offering caretaking activities and environments that may be helpful for children with special needs.

- Child care providers are most likely to be prepared to provide supervision of food intake and to meet regularly with parents.
- Providers are least likely to be prepared to accommodate the use of a wheelchair and administer drugs and injections.
- For most activities, group centers are more prepared than are family providers.

The number of providers who need planning and/or resources to offer a particular caretaking activity varies depending on the activity, the type of provider, and the current preparedness of the provider. Providers who report they are prepared and providers who report they are not yet prepared to provide a particular caretaking activity or environment were considered separately.

The results of the questionnaire indicate that relatively few providers who are already prepared to offer a particular caretaking activity need more planning or additional resources. However, more than 50% of providers who are not yet prepared have a need for planning or resources.

- The areas that providers who are not yet prepared identify as having the greatest planning needs include: meeting regularly with parents, adapting routines and activities to fully include all children, and supervising food intake.
- The areas that providers who are not yet prepared identify as having the greatest resource needs include adapting play and learning materials, and accommodating the use of a wheelchair.

The questionnaire results also suggest that licensed providers are willing and eager to engage in training and consultation relationships to assist them in caring for children with special needs.

- Providers are in agreement that they need training and consultation for three categories of special needs: children with medically involved needs, children with serious cognitive impairments, and children with severe developmental disorders.
- Licensed group providers experience definite training and consultation needs for children with the above-mentioned needs. However, they are in less agreement with respect to other categories of special needs such as chronic health problems and hearing and visual impairments.

- Licensed family providers are in agreement that they need training and consultation for all categories of special needs. They are looking for assistance from multiple sources for almost all special needs.

Challenges, Partnerships, and Resources in Inclusive Care

In addition to perceptions of their preparedness and resource needs, child care providers have opinions, and experiences related to caring for children with special needs. Their thoughts about child care settings in which children with and without special needs are cared for together were explored through the questionnaire survey. The questionnaires for licensed and certified providers included statements addressing the legal responsibilities of child care providers, issues related to inclusive care, and the benefits and challenges of inclusive care.

The questionnaire results suggest that:

- The legal responsibilities child care providers have with respect to children with special needs are a potential area for education and clarification. This is true for group centers, licensed family homes, and certified/provisional providers.
- Providers see inclusive care as achievable and desirable for most children. Few providers believe that inclusive care is rarely a good idea.
- However, providers view inclusive care as inappropriate for some children.

The results indicate that all types of child care providers perceive there to be advantages and challenges in an inclusive care setting.

- The benefits providers most often endorse include: developing the sensitivity and awareness of children without special needs, and improving the emotional and social adjustment of children with special needs.
- The challenge providers most often identify is that children whose behavior is disruptive or disturbing may be very stressful for staff.
- When considering an inclusive care setting, providers are also concerned (at least some of the time) about: 1) having time taken away from other children, 2) other parents objecting to the inclusion of children with special needs, 3) other children teasing or avoiding children with special needs, and 4) staff worrying about doing something wrong that may hurt a child with special needs.

In addition to the questionnaire data, a context for understanding the issue of inclusive child care in Milwaukee County was developed through structured interviews with each of the potential partners in the endeavor of inclusive care: child care providers, Birth to Three specialists, and parents of children with special needs.

Child care providers who participated in the focus groups:

- Expressed a willingness to include children with special needs and a strong commitment to the children with special needs who were in their care.
- Viewed themselves as partnering with parents to care for children with special needs.
- Reported experiencing an increased demand for them to play a larger role in the community, particularly with respect to special needs. Providers viewed this as an opportunity to demonstrate their professionalism and to open up avenues for advancement within their profession.
- Expressed a concern for the best interest of the child.

Birth to Three agencies who were interviewed:

- Expressed a willingness to partner with child care providers regarding the inclusion of children with special needs.
- Were sensitive to the challenges that child care providers face in caring for children with special needs.
- Were struggling to build models of partnership with child care providers.
- Voiced a strong commitment to the best interest of the child.

Parents of children with special needs who participated in interviews or group discussions:

- Wanted many of the same things from child care providers that any parent wants (e.g., a safe environment, loving staff that are comfortable with children, good communication between providers and parents, evidence of certification or licensure, flexible schedules, and choice of type of care).
- Felt it was important that providers be able to see the child as a person first, integrate him/her with other children, and encourage the child to learn at his/her own pace. Parents were not comfortable having their children cared for by providers who were required to take children they were not willing to embrace.
- Were looking for child care providers who had experience and training that prepared them to care well for the particular type of special need their child was experiencing.
- Were concerned about environmental safety in a child care setting and speedy access to medical care.
- Wanted their child's therapeutic needs to be attended to in a child care setting. Therapy and education were not seen as separate activities, but as part of the inclusive environment.
- Expressed a strong need for respite care.