

12 Myths about IDEA for Preschoolers with Disabilities:
Recommendations for Policy and Practice
Brandy M. Locchetta

Introduction

Prior to the signing of the Education for All Handicapped Children Act (EHA) on November 29, 1975, children with disabilities were most likely to be found in institutions or in altogether separate settings within school buildings, when they were allowed to attend at all. This monumental day in 1975 came on the heels of decades of advocacy by families and a flurry of small legislative wins for children with disabilities in the 1950s and 60s. EHA required that children with disabilities were provided with a free appropriate public education (FAPE). It wasn't until reauthorization in 1986 (PL 99-457) that Part B, section 619 was instated; acknowledging the critical nature of the early years of development and providing access to FAPE in the least restrictive environment for preschool children 3-5 years old. EHA became known as IDEA in 1990 as a part of the second reauthorization. Two additional reauthorizations in 1997 and most recently in 2004, have further solidified the legal right e for infants and toddlers to receive early intervention and children and youth 3-21 years old with disabilities to receive FAPE alongside their non-disabled peers in inclusive environments.

Despite the legal protections afforded by IDEA, inequities persist for all children with disabilities. For example, children provided with the opportunity to receive special education services in high-quality inclusive settings outperform their counterparts in segregated settings in cognitive, communication, and social-emotional development.¹ However, the number of preschool children receiving services in inclusive environments has only increased by about 6% in more than 35 years.² Less than half of preschoolers with disabilities receive their services in inclusive settings today.³ Without access to high-quality inclusive environments, more than half of preschoolers with disabilities are starting their educational journey at a disadvantage.

These inequities increase and become disproportionate for children with disabilities who are Black, Latine, Indigenous, dual language learners, living in poverty and in rural geographical locations. For example, not only are Black children with disabilities disproportionately more likely to be excluded from general education environments, but Black children are also most likely to be suspended or expelled from school.^{9;11} Additionally, an overreliance on standardized assessments to determine eligibility for special education services is also more likely to result in the overidentification of Black and Latine children.⁴⁰ The

¹ Guralnick, M. J. (2001). A developmental systems model for early intervention. *Infants and Young Children*, 14(2), 1-18; National Professional Development Center on Inclusion. (2011). *Research synthesis points on quality inclusive practices*. Chapel Hill: The University of North Carolina, FPG Child Development Institute, Author; Strain, P. S., Bovey, E. H., Wilson, K., & Roybal, R. (2009). *LEAP preschool: Lessons learned over 28 years of inclusive services for young children with autism*. *Young Exceptional Children Monograph Series No. 11*, 49-68; Wolery, M., & Wilbers, J. S. (1994). Introduction to the inclusion of young children with special needs in early childhood programs. *Including children with special needs in early childhood programs*, 6, 1-22.

² Locchetta et al., 2022 (in prep)

³ Individuals with Disabilities Act, Section 618 Data Collection.
<https://www2.ed.gov/programs/osepidea/618-data/index.html>

inequities faced by children with disabilities may be traced back to misunderstandings about regulations or misapplications of policies and procedures.

The purpose of this policy brief is to introduce 12 common practical and procedural myths surrounding Part B, section 619 of the IDEA; better known as preschool special education. This brief will spotlight the inequities perpetuated by these myths, highlight the actual regulations and guidance from federal agencies, and emphasize the vital role of equity within and across these myths. The brief will conclude with recommendations for congressional, federal, and state policy action as well as program and classroom practice that center equity and promote quality in preschool special education.

Terminology Defined

- **Practitioners:** an umbrella term used to describe those serving young children with disabilities across a variety of settings. Examples include teachers, child care providers, administrators, special education coordinators, and service providers (e.g., physical therapists, speech language pathologists, etc.)
- **Individuals with Disabilities Education Act (IDEA):** a federal law that mandates the availability of a free appropriate public education to eligible children with disabilities and ensures special education and related services are provided to them.
 - **Section 619:** a section within Part B of IDEA that authorizes additional funding for States to make FAPE available for preschool children ages 3-5 years old with disabilities.
 - **Free Appropriate Public Education (FAPE):** this cornerstone of IDEA ensures that eligible children with disabilities receive an *individualized education* (provided within an Individualized Education Program) within the *public* school system at *no cost* to families.
 - **Individualized Education Program (IEP):** an individualized document created by a team designed to ensure a child with a disability (as young as 3 years old) receives a free appropriate public education. This document includes information about a child's strengths and areas of need, goals and objectives designed to ensure access to the general education curriculum and academic progress, and outlines accommodations, modifications, as well as supplementary aids and services.
 - **Least Restrictive Environment (LRE):** a requirement within IDEA that children receiving special education and related supports and services do so in an educational environment alongside peers without disabilities (i.e., general education). IDEA goes on to specify that children receiving these services only be removed from general education environments when education in this environment cannot be achieved with the use of supplementary aids and services.
 - **Procedural Safeguards:** sometimes also referred to as parental rights, these are a set of requirements across all laws and regulations within IDEA that protect the rights of children with disabilities and their families' access to FAPE.

- Title VI: within the Civil Rights Act, this protects individuals from discrimination based on race, color or national origin in programs or activities that receive Federal financial assistance (including IDEA).
- Equal Educational Opportunities Act (EEOA): a Federal act declaring that in the United States "*all children enrolled in public schools are entitled to equal educational opportunity without regard to race, color, sex, or national origin.*"
- Response to Intervention (RTI): a framework of strategies and tools designed to enable practitioners to target interventions to children's areas of specific need (academic and/or behavioral) as soon as those needs become apparent. This framework is also designed to reduce the over-identification of children that are better served with short-term, individualized interventions in general education.

Myth #1: Preschool children that require the most support (e.g., preschoolers with intellectual disabilities, emotional behavior disorder) cannot successfully receive IDEA services in general education classrooms.

This dangerous misperception held by many state, local, and community practitioners leads to the systematic exclusion of children with certain disabilities (e.g., intellectual disabilities, emotional behavior disorder) from the general education classroom and curriculum. This is especially concerning given racist history and grounding of education, *and therefore* special education, in structured power relationships designed to serve the dominant social, political, and economic classes and devalue Black people.⁴

According to IDEA, public agencies must ensure that children with disabilities are educated alongside children who are nondisabled and that special classes, separate schooling, or other removal of children with disabilities from regular educational environments only occurs if the use of supplementary aids and services within the regular early childhood environment cannot be achieved satisfactorily.⁵

Emphasis on Equity:

Black students are overrepresented across eligibility categories in special education.⁶ Evidence of this disproportionality is perhaps most apparent in the overrepresentation of Black boys identified as eligible for SPED under the category of emotional behavioral disorder (EBD).⁷ This eligibility is highly susceptible to bias as identification and eligibility as this category relies heavily on judgments and opinions of school professionals.⁸ An EBD eligibility also increases the likelihood that children are placed in a separate setting.⁹ Once placed in these settings, these children are less likely to have the opportunity to be in general education. In segregated settings they also face unfair, inhibiting experiences that place them at higher risk for school attendance, academic underperformance, higher rates of school drop-out, and imprisonment.¹⁰

Myth #2: Preschool children with disabilities can be suspended or expelled due to behaviors practitioners perceive to be challenging.

When practitioners perceive preschool children's behaviors to be challenging, they often resort to exclusionary discipline (i.e., suspensions and expulsions) as a solution.¹¹ Excluding preschool

⁴ Patton, 1998; Apple, 1981; Cherryholmes, 1988; Katz, 1971; Lipsky & Gartner, 1989; Skrtic, 1991

⁵ IDEA: 34 CFR §300.114

⁶ Lama, 2018; Maydosz, 2014; Skiba et al., 2016a, 2016b; Sullivan, 2011

⁷ Lama, 2018; Maydosz, 2014; McKenna, 2013

⁸ Ferguson, 2000; Kunesh & Noltemeyer, 2015; O'Connor & Fernandez, 2016

⁹ Grindal et al., 2019

¹⁰ Bell, 2016; Kincaid & Sullivan, 2019

¹¹ Gilliam, 2005

children from their educational placement increases the likelihood they will continue to be excluded and inherently decreases their access to instruction (i.e., FAPE). Additionally, a failure to provide behavior support across a continuum of placements (e.g., regular education settings) could also result in an inappropriately restrictive placement and a denial of placement in the LRE.¹²

According to IDEA, if a child with a disability demonstrates behavior that impedes the child's learning or that of others, it may be necessary to provide appropriate behavioral support to ensure that the child receives FAPE.¹³ The IEP Team must consider including or revising behavioral supports in the child's IEP when determined necessary for ensuring FAPE.¹⁴ Further under IDEA, behavioral supports should be supported by evidence.¹⁵ If a child's IEP already includes behavioral supports, and there continue to be incidents of behavioral or classroom disruption, the IEP Team may need to meet to consider whether behavioral supports are being implemented with consistency as required by the IEP or whether they are appropriate (i.e., need to be changed). It is critical that these IDEA provisions are implemented in order to avoid an overreliance on, or misuse of, exclusionary discipline in response to a child's behavior.

Emphasis on Equity:

Exclusionary discipline continues to be a problem across the United States. With states self-reporting 1.27 million cases of young children enrolled in public schools (Pre-K through elementary) being suspended or expelled in a single school year.¹⁶ A survey of families, indicates about 50,000 children under 5 were suspended and 17,000 were expelled in a single year.¹⁷ Children with intersecting identities (e.g., Black or Latine children with disabilities) experiencing exclusion at disproportionately higher rates than their white peers. Additionally, Black children receive more severe punishment than their peers for the same or similar behaviors and are subject to increased scrutiny starting as early as preschool. This is due to the

¹² U.S. Department of Education, Office of Special Education and Rehabilitative Services, A Response to Intervention Process Cannot be Used to Delay-Deny an Evaluation for Preschool Special Education Services under the Individuals with Disabilities Education Act, OSEP 16-07 (Apr. 29, 2016).

¹³

<https://sites.ed.gov/idea/files/ga-addressing-the-needs-of-children-with-disabilities-and-idea-discipline-provisions.pdf>

¹⁴ IDEA: 34 C.F.R. §§ 300.320(a)(4) and 300.324(a)(2)(i)

¹⁵ IDEA: (34 C.F.R. § 300.320(a)(4).11)

¹⁶ U.S Department of Education. (2016-2017). Civil Rights Data Collection.

<https://www2.ed.gov/about/offices/list/ocr/data.html>.

¹⁷ U.S. Department of Health and Human Services (2016). National Survey for Children's Health.

<https://www.childhealthdata.org/learn-about-the-nsch/NSCH>.

implicit bias of adults as they perceive Black children as less innocent than their peers, more culpable and aggressive, and more deserving of harsh punishment than white children.^{18;19;20;21}

Myth #3: Providing access to inclusive placements for preschoolers is more expensive and there is already insufficient funding for preschool special education.

State and local administrators and practitioners continually cite a lack of funding as a barrier to serving preschool children with disabilities in regular early childhood settings.²² However, inclusive placements are no more expensive than segregated placement options.²³ This misperception often leads to children being placed in unduly restrictive placements and can significantly limit the continuum of placements provided by local school districts for preschoolers with disabilities.

The public agency responsible for providing a free appropriate public education (FAPE) to a preschool child with a disability must make available the full continuum of alternative placements, including instruction in regular classes, special classes, special schools, home instruction, and instruction in hospitals and institutions, to meet the needs of all preschool children with disabilities for special education and related services.²⁴ If a child's IEP team decides an inclusive setting is needed, and a public program is not available, the district is responsible for providing the inclusive setting in the community at no cost to the family.²⁵

Emphasis on Equity:

Quality early childhood education has many long term benefits, especially for low income students. However, Black and Latine students often attend schools that are under-resourced due to state and localities allocate tax dollars.²⁶ This early advantage for white children continues and grows larger throughout primary, secondary, post secondary education, and even into employment with people of color earning less than their white counterparts.²⁶

¹⁸ Goff, P. A., Jackson, M. C., Di Leone, B. A. L., Culotta, C. M., & DiTomasso, N. A. (2014). The essence of innocence: consequences of dehumanizing Black children. *Journal of personality and social psychology*, 106(4), 526

¹⁹ Staats, C.(2014). Implicit racial bias and school discipline disparities. Retrieved from Columbus, OH: <http://kirwaninstitute.osu.edu/wp-content/uploads/2014/05/ki-ib-argument-piece03.Pdf>

²⁰ Todd, A. R., Thiem, K. C., & Neel, R. (2016). Does seeing faces of young Black boys facilitate the identification of threatening stimuli?. *Psychological science*, 27(3), 384-393

²¹ Todd, A. R., Simpson, A. J., Thiem, K. C., & Neel, R. (2016). The generalization of implicit racial bias to young Black boys: Automatic stereotyping or automatic prejudice?. *Social cognition*, 34(4), 306-323

²² Barton, E. E., & Smith, B. J. (2015). Advancing high-quality preschool inclusion: A discussion and recommendations for the field. *Topics in Early Childhood Special Education*, 35(2), 69-78.

²³ Odom, S. L., Hanson, M. J., Lieber, J., Marquart, J., Sandall, S., Wolery, R., ... & Chambers, J. (2001). The costs of preschool inclusion. *Topics in Early Childhood Special Education*, 21(1), 46-55.

²⁴ IDEA: 34 CFR §300.115

²⁵ https://sites.ed.gov/idea/files/policy_speced_guid_idea_memosdcltrs_preschool-lre-dcl-1-10-17.pdf

²⁶ https://itep.org/taxes-and-racial-equity/#_edn8

Braiding and blending funds is one way to increase equitable access to quality, inclusive early childhood education.

Myth #4: Transportation cannot be provided for preschoolers with disabilities.

State and local practitioners often mention an inability to provide transportation as a barrier to placing preschool children with disabilities in regular early childhood settings.²² This misperception can leave families in situations where they have to choose between being able to provide for their family and their child receiving special education services.

Transportation is a related service that must be provided to assist children with disabilities to benefit from special education services. This transportation includes (a) travel to and from school and between buildings, (b) travel in and around school buildings, and (c) specialized equipment such as adapted buses, lifts, and ramps, if required to provide special transportation for a child with a disability.²⁷ The Office of Special Education and Rehabilitative Services (OSERS) has also issued clarification that confirms that these regulations apply to preschool aged children with disabilities.¹²

Emphasis on Equity:

Black, Latine, and Indigenous people are more likely to depend on public transportation to sustain their livelihood (e.g., go to work, access healthcare).²⁸ Black, Latine, and Asian Americans are also disproportionately represented in the lowest paying vocations without access to paid personal or sick leave, or healthcare coverage.²⁸ With limited access to special education transportation, preschool children are likely to remain unidentified and without access to valuable early intervention services during critical developmental phases.

Myth #5: Practitioners in childcare settings do not have the expertise and cannot be trained to deliver special education related services to preschoolers with disabilities.

Local and state practitioners report concerns that private and community-based programs “don’t always have the expertise” to serve children with disabilities. Special educators report feeling they had been specifically trained to deal with the learning needs of children with disabilities, and it was difficult for some of them to approve of teachers who had not had equivalent training.²² These beliefs, and associated misperceptions about community practitioners can easily result in preschoolers being placed in unduly restrictive placements (to avoid community placement) and a reduced district capacity to provide a full continuum of placement options to preschoolers with disabilities (to include community placements).

²⁷ IDEA: 34 CFR §300.34(c)(16)

²⁸ Gracia, J. Nadine MD, MSCE. COVID-19's Disproportionate Impact on Communities of Color Spotlights the Nation's Systemic Inequities. *Journal of Public Health Management and Practice* 26(6):p 518-521, November/December 2020. | DOI: 10.1097/PHH.0000000000001212

With appropriate supervision and training, assistants and paraprofessionals can assist in the provision of special education and related services to preschoolers with disabilities.²⁹ Child Care Development Block Grant (CCDBG) funds provided to states from the federal government can be used to provide specialized training and support to childcare providers to promote the inclusion of children with disabilities.³⁰

Myth #6: Preschool children who do not meet eligibility criteria for special education services cannot receive individualized support.

The “in or out” misperception that preschool children are either (1) eligible for special education services, thus require individualized intervention, or (2) are not eligible and do not require individualized interventions creates a false dichotomy that readily contributes to both over and under identification of children for special education evaluation. In addition, children who are found ineligible for special education services, but require individualized intervention in an area are in danger of being left without those supports.

States must have policies and procedures to ensure that children with disabilities, regardless of the severity of their disability, who are in need of special education and related services are identified, located, and evaluated.³¹ Additionally, guidance issued by the Office of Special Education Programs (OSEP) indicates that children who are struggling academically and behaviorally are identified early and provided needed interventions in a timely and effective manner. This includes ensuring that children who are not eligible for special education services, but simply need intense short-term interventions are provided with those interventions.¹²

Emphasis on Equity:

The over-representation of children speaking languages other than English in special education has been a critical issue for many years. IDEA requires that assessments used to determine eligibility are unbiased, and that factors related to English proficiency, culture, and race are ruled out before determining whether a child has a disability. Therefore, to determine whether a bilingual child has a disability, IDEA requires that research-supported practices for bilingual assessment are implemented, such as assessing children in English and their home language (as appropriate), using interpreters as needed, and gathering multiple forms of information on children’s performance such as parent report, direct observation, and informal measures.

Myth #7: Child outcomes assessments need to be used to determine who is ready to be served in the regular early childhood classroom.

²⁹ IDEA: 34 CFR § 300.156(b)

³⁰ US Department of Health and Human Services, & Administration for Children and Families. (2021). Information memorandum ARP ACT CCDF discretionary supplemental funds. Washington, DC; Department of Health and Human Services.

³¹ IDEA: 34 CFR §300.111

Using results from outcome assessments to determine a child's "readiness" to be included in an educational environment alongside their peers without disabilities creates an arbitrary gating process in which children must meet subjective criteria before being afforded access to regular early childhood classrooms. These types of gating procedures include many vulnerable decision points making them uniquely prone to racial, gender, and ableist biases that perpetuate systems of oppression in which access to inclusive education environments is less likely to be afforded to marginalized subpopulations.^{32;33}

Each state must develop a State Performance Plan/Annual Performance Report (SPP/APR), which evaluates the state's efforts to implement the requirements and purposes of the IDEA, and describes how the state will improve its implementation of the law.³⁴ As a part of the SPP/APR, states must report the progress of preschoolers with disabilities compared to their same aged peers for each of three outcomes: (1) positive social emotional skills, (2) acquisition and use of knowledge and skills, and (3) use of appropriate behaviors to meet needs (indicator B7). These, and other, outcomes assessments should not be used for the purposes of identifying a child's LRE. There are no "readiness" criteria written into IDEA that support the use of these and other outcome assessments in determining the extent to which a child can be served in a general education environment with non-disabled peers (i.e., LRE). In a Dear Colleague letter (2016), OSERS responded to questions from states regarding the applicability of LRE to preschoolers with disabilities. The clarification stated that each child's placement decision must be based on the child's individualized education program (IEP) and must include an explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular class.³⁵

Myth #9: Providing families with a copy of procedural safeguards meets the district's responsibility to families.

In many instances a family's involvement in their preschooler's special education programming is limited to receiving a copy of procedural safeguards across the table at their child's annual IEP meeting. This is most likely the common scenario for families whose reading skills or preferred communication modalities do not align with the language in the safeguards. This perpetuates the marginalization of Black, Latine, Indigenous, and other historically underserved families (e.g., those living in poverty, rural communities) and usurps their right to meaningful participation in their child's IEP and prevents them from meaningfully contributing to IEP decisions as co-creators and the expert on their child.

³² Schifter, L. A., Grindal, T., Schwartz, G., & Hehir, T. (2019). Students from low-income families and special education.

³³ Smolkowski, K., Girvan, E. J., Mcintosh, K., Nese, R. N. T., & Horner, R. H. (2016). Vulnerable Decision Points for Disproportionate Office Discipline Referrals: Comparisons of Discipline for African American and White Elementary School Students. *Behavioral Disorders*, 41(4), 178–195. <https://doi.org/10.17988/bedi-41-04-178-195.1>

³⁴ IDEA: 20 U.S.C. §1416(b)(1), 20 U.S.C. §1442

³⁵ IDEA: 34 CFR §300.320(a)(5)

While districts are required to provide families with a copy of procedural safeguards at least once per year, districts must also ensure that the copy is in an understandable language.³⁶ Additionally, districts must take whatever action is necessary to ensure that families understand the proceedings of IEP Team meetings. This includes arranging for an interpreter for families whose native language is other than English. OSEP has also issued additional guidance indicating that state educational agencies and school districts have responsibilities to provide families of children with disabilities who speak a language other than English at home meaningful access through timely and complete translation and oral interpretation.¹²

Myth #10: Emergent bilingual preschoolers should be given time and exposure to English language instruction before being evaluated for special education services.

The “wait and see” approach is often recommended for emergent bilingual children as a strategy to prevent disproportionate identification. However, this approach is likely to result in the underidentification of bilingual learners with language delays and missed opportunity for intervention during a critical window of development (i.e., 90% of brain development is complete by age 5).³⁷ Prioritizing exposure to English as a way to mitigate the concern of a potential language delay for bilingual children not only devalues their home language, but further perpetuates systemic biases that English is more valuable, and thus, the superior language.

While Part B, Subpart D of IDEA denotes children should not be determined to have a disability due to “limited English proficiency,” provisions related to child find in the law also stipulate that children suspected of having a delay or disability are evaluated without delay.³⁸ When a child is referred for suspected delay or disability, districts must seek parental consent within a reasonable period of time and cannot use RTI to delay or deny evaluation procedures.³⁹ Of importance to note, “wait and see” is not a “scientific, research-based intervention” within an RTI framework and should not be considered as such with regard to the referral or evaluation of emergent bilingual children.

Myth #11: Preschool children with disabilities are included when they receive 80% or more of their services in the regular early childhood program.

The misperception that preschoolers are included simply because they are receiving 80% or more of their services in the regular early childhood program dangerously distills inclusion down to mere access to a physical space. When a child with a disability enters a regular early

³⁶ IDEA: §300.503(c); 34 CFR §§ 300.504; 300.322

³⁷ Kohnert, K. (2010). Bilingual children with primary language impairment: Issues, evidence and implications for clinical actions. *Journal of communication disorders*, 43(6), 456-473.

³⁸ IDEA: §300.111; 612(a)(3)

³⁹ <https://sites.ed.gov/idea/idea-files/osep-memo-11-07-response-to-intervention-rti-memo/>

childhood program without the support needed by the child, family, and teacher to maximize the child's participation and success, they are in fact, less included than if they received services in a separate special education class.

There are three indicators within the SPP/APR that are specific to preschool children with disabilities, one of which is early childhood environments (B6). Specifically, indicator B6-A, requires states to report the percent of children 3 through 5 with IEPs attending regular early childhood programs and receiving the majority of special education and related services in the regular early childhood program. While these data are one indicator of where preschoolers with disabilities are spending their time (i.e., access), they are not, of themselves, representative of whether or not these children are meaningfully participating in routines and instruction or whether necessary local- and state-level supports are provided to underpin a child's access and meaningful participation.⁴⁰

Myth #12: Standardized assessments must be used when determining eligibility for special education services.

This myth is particularly menacing given the flagrantly racist origins and well-documented biases associated with standardized assessments.⁴¹ While districts may elect to rely on a battery of standardized assessments when evaluating a child's eligibility for special education services for convenience or perceived efficiency or effectiveness. However, in fact, it is highly likely that relying on standardized assessments to determine eligibility will result in an increased likelihood of over-identification of Latine and Black children.⁴²

IDEA does not mandate the use of standardized assessments to determine eligibility for or continuation of special education support or services. Rather, in Part B, Subpart D, IDEA specifies that assessments used need to be *"selected and administered so as not to be discriminatory on a racial or cultural basis;"* and that they be *"provided and administered in the child's native language or other mode of communication most likely to yield accurate information and what the child knows...unless is clearly not feasible to provide or administer."* This section goes on further to indicate that the purposes for which assessments are used must be valid and reliable. Given that most standardized assessments are normed on white, middle-class, non-disabled, and/or monolingual children, yet used to assess all children referred for evaluation regardless of identities, it is likely that results obtained from these assessments are neither valid nor reliable.

⁴⁰ Division for Early Childhood/National Association for the Education of Young Children. (2009). Early childhood inclusion: A joint position statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC).

⁴¹ Rosales, J. and Walker, T. (2021). The racist beginnings of standardized assessments. NEA News. National Education Association. Washington, DC.

⁴² Grindal, T., Schifter, L. A., Schwartz, G., & Hehir, T. (2019). Racial differences in special education identification and placement: Evidence across three states. *Harvard Educational Review*, 89(4), 525-553.

Emphasis on Equity:

Standardized assessments originated in the 1920's as a part of the eugenics movement and amid concerns about the "promiscuous intermingling" of non-whites in the gene pool and non-white children entering American public schools.⁴¹ Standardized tests of intelligence were also used to place 1.5 million soldiers in units segregated by race. These same tests (i.e., Stanford Binet) are used today across the United States as measures of intelligence to determine special education eligibility even as Black children continue to be overrepresented in special education. Similarly, emergent bilingual children are often assessed using standardized assessments normed on monolingual children, even when developed in languages other than English.⁴³ The use of these assessments on bilingual children creates bias and is likely to lead to misdiagnosis. When a standardized assessment is normed on bilingual children, it tests languages in isolation and is not representative of a bilingual child's language or communication abilities. Assessment bias leads to linguistic discrimination, interpretation bias, and misdiagnosis or identification of bilingual children suspected of having delays or disabilities.

⁴³ Bedore, L. M., & Peña, E. D. (2008). Assessment of bilingual children for identification of language impairment: Current findings and implications for practice. *International Journal of Bilingual Education and Bilingualism*, 11(1), 1-29.

Policy Recommendations

Congress should:

- Fully fund IDEA, including Part B Section 619.⁴⁴
- Increase funding for Part D of IDEA to increase monitoring and accountability related to preschool placement and the provision of the least restrictive environment.⁴⁴
- Increase funding for the Child Care Development Block Grant to increase technical assistance and professional development available to child care providers on topics of equity and inclusion of children with disabilities.

Federal Agencies should:

- Require the reporting of all early childhood data be disaggregated by system for Part B 619 so that Kindergarten data can be analyzed separately from preschool data.⁴⁴
- Ensure that data can be cross tabbed to promote examination of the intersections within and across age (3, 4, 5), eligibility category, race, ethnicity, home language, and geographical location.
- Monitor disproportionality in all early childhood data by conducting and reporting and making publicly available the results of annual intersectional analyses to state education agencies.
- Require States complete and make publicly available equity action plans for each data indicator where disproportionality is present or imminent given data analyses.
- Leverage existing ED technical assistance centers to provide additional training, to include regional training on personnel and funding models that promote inclusion.⁴⁴
- ED should submit an annual report to Congress, states, and the public on implementation of the Equity in IDEA regulation including state status and progress on racial disproportionality related to the identification, placement, and discipline of children with disabilities.⁴⁴
- Require states/tribes to report their use of suspension, expulsion, seclusion, corporal punishment, and inappropriate restraint disaggregated by race, gender, disability, and language in all ECE programs that receive public funding, to include child care.⁴⁵

States and Tribes should:

- Monitor district adherence to the least restrictive environment provision of IDEA in preschool and in K-12, and develop accountability structures connected to funding, to include the provision of technical assistance to remediate deficiencies.⁴⁴
- Review and confirm that all written early childhood state policies prioritize the inclusion of children with disabilities throughout, including quality rating improvement systems, early learning guidelines, Pre-K standards, state child care subsidy policy, early care and education licensing standards, and early childhood personnel standards and credentialing/certification.⁴⁴

⁴⁴

<https://childandfamilysuccess.asu.edu/sites/default/files/2020-07/CEP-disabilities-inclusion-pullout-070620-FINAL.pdf>

⁴⁵ <https://childandfamilysuccess.asu.edu/sites/default/files/2021-12/14-priorities-equity-121621.pdf>

- Use federal funding (e.g., Title I, child care quality funds) to increase access to inclusive environments across systems by transitioning self-contained classrooms to inclusive classrooms.⁴⁴
- Identify segregated preschool special education programs and invest in meaningful structural reforms to expand high-quality inclusion. Including, but not limited to, working with local communities and districts to adjust budgets and staffing structures; promoting co-training and coaching with early educators, special educators, and early interventionists with an explicit focus on equity and the intersection between disability and race; investing in itinerant teaching and other co-teaching models; and facilitating formal partnerships between local education agencies and community-based early childhood programs to expand the number of inclusive slots available to young children with disabilities and their families.⁴⁵
- Track and address racial, income, disability, and language background disparities related to access to services, identification, inclusive placements, and discipline for young children with disabilities. Use data to deploy technical assistance and infuse intensive support to districts/communities with the largest disparities.⁴⁵

Recommendations for Practice

Program practitioners should

- Develop and support a continuum of placements that is dynamic, iterative, and resilient such that every child can receive least restrictive supports and services regardless of placement. Do not determine children's LRE based on diagnosis, eligibility, or vocal-verbal language repertoire.
- Identify and invest resources to support the implementation and scale-up of empirically-supported early childhood positive behavior support (i.e., Pyramid Model) and aligning this model, when part of an elementary school, to existing school-wide PBIS efforts.
- Develop a plan for the on-going monitoring and analyses of data related to all early childhood indicators and establish equity alerts to identify potential or existing equity issues surrounding discipline, placements, and eligibility. Use this information to deploy technical assistance, coaching, and/or professional development proactively.
- Provide classroom practitioners with time, space, and resources to plan developmentally appropriate lessons to include differentiation for all learners. Allocate resources to coaching and mentoring that can support each classroom practitioner's unique needs, experiences, and background in this area.
- Develop a transparent process for evaluating children to determine initial or continued eligibility that utilizes informal assessment, work samples, notes, language samples, informal family and teacher questionnaires, etc. to supplement or replace standardized assessment to ensure a holistic picture of a child's strengths and areas of need.

Classroom practitioners should

- Advocate to ensure that all children on your caseload (or in your classroom) are receiving services and support in their least restrictive environment by asking questions about accommodations, modifications, supplementary aids and services that can be implemented and ensure that all selected supports are implemented with fidelity to inform whether a change in support is needed rather than a change in placement.
- Anchor lesson planning in empirically-supported developmental learning standards and plan for differentiation that considers the strengths and needs of all children.
- Stay curious about the families of children in your care and value the differences in perspectives, priorities, experiences, and desires for their children. Use this information to infuse your classroom with experiences, artifacts, and opportunities for children to build confidence and curiosity about their own identities as well as their peers'. The classroom should reflect and empower the community of learners within it.