Equity in IDEA Part C

Diana Lucia Abarca - August 2023

Florida State University, Arizona State University
Introduction

Effective early care and education for infants and toddlers with disabilities is critical and closely tied to their future success and quality of life. While the United States offers a systematic process to provide Early Intervention for families of children with disabilities through Part C of the Individuals with Disabilities Education Act (IDEA)\(^1\), it is riddled with deficiencies that disproportionately affect families of color more so than White families. Historical and contemporary forms of systemic racism are heavily present within Part C services and poorly influence the access, experiences, and outcomes of families of color related to their young children’s early learning and development. Actionable steps must be taken within Early Intervention services to enhance young children’s and families’ access, experiences, and outcomes.

Nearly half of children and families who received Part C services under IDEA in 2021 are of a historically and contemporarily marginalized racial or ethnic background\(^2\). This includes Hispanic, American Indian/Alaska Native, Asian, Black/African American, Hawaiian/Pacific Islander, and multiracial families. Children and families of these backgrounds are simultaneously under- and overserved through Part C. That is, Hispanic/Latino and Native Hawaiian or Other Pacific Islander had risk ratios of 1.1 and 1.3 respectively, indicating that they had higher rates of receiving Part C services as families of all other races combined in 2019\(^3\). On the other hand, Black/African American, American Indian or Alaska Native, Asian, and multiracial families had risk ratios ranging from 0.8-0.9, indicating they were less likely than families of all other races to receive Part C services. Additionally, research has found significant impacts of race on various areas of Early Intervention including referrals, time of program entry, outcomes, and length of time in the program, especially for Black families\(^4\). Yet, without clearer data from state- and federal-level annual reports, it is impossible to determine the effects of these inequities. There is potential that some families of color are being over-identified for services and other families of color are being under-identified for services due to discrimination and biases based on their race and the languages they speak. Some families may be discharged from services sooner than called for due to gaps in providing support to access and continue services as needed. Other families’ care may be hindered by lack of culturally and linguistically responsive services. This nuanced inequality of access to and receipt of services may indicate difficulty in serving families of historically and contemporarily marginalized racial or ethnic background in an equitable and culturally responsive manner. Despite frequent examination of racial and ethnic disparities in the identification and receipt of Part C services, what happens to families once they begin services is understudied. Thus, in this policy brief, we focus on the potential disparities in exiting rates for marginalized families.

One element of the Part C system that may contribute to disparities in the maintenance of services (and potential disparate exiting rates) for marginalized families is the appropriate training and support of the service providers who interact with families on a daily basis. The vast majority of Early Intervention providers and specialized licensed professionals who provide Part C services are White, English-speaking women. The mismatched representation of races and ethnicities between professionals and the families whom they serve is further aggravated by

---

\(^3\) Assessing inequities in early childhood intervention (n.d.). https://research.impact.iu.edu/key-areas/social-sciences/race-ethnicity/first-steps-programs.html
inadequate training. Most states only require licensed professionals, such as speech language pathologists, occupational therapists, and physical therapists, to complete introductory general training for work with infants and toddlers. Further, the pre-service education and training of these professionals reputedly lacks strong training on cultural responsiveness for work with marginalized individuals. While Early Intervention providers, including infant toddler development specialists and service coordinators, may be more thoroughly and explicitly trained on working with young children through pre-service and continuing education, there is still a major lack of training on culturally responsive service provision.

Through analysis of data publicly available by IDEA Section 618, we found disparities in exiting rates from Early Intervention programs by families of color when compared to White families. States report data to the Department of Education annually per racial group, which are categorized into ten different exit reasons including: (a) Part B eligible, exiting Part C; (b) Part B eligible, continuing in Part C; (c) not eligible for Part B, exit with referrals to other programs; (d) not eligible for Part B, exit with no referrals; (e) Part B eligibility not determined; (f) no longer eligible for Part C prior to reaching age 3; (g) deceased; (h) moved out of state; (i) withdrawal by guardian; and (j) attempts to contact unsuccessful. Particularly, the exiting categories for no longer being eligible for Part C prior to reaching age 3, withdrawal by a guardian, and unsuccessful attempts to contact were examined because it was hypothesized that there may be systemic inequities that contribute to disparities in exiting rates. For example, families of color may be harder to reach through typical modes of communication due to living in poverty, unreliable access to phone service or internet; guardians of color may withdraw their children from services because they were unsatisfied with service delivery; children of color may be less likely to achieve their Individualized Family Service Plan prior to their third birth due to ineffective and inequitable service delivery.

To examine potential disparities between families of color and White families across the nation, we made the following calculations for each exit category:

<table>
<thead>
<tr>
<th>Percentage of families exited per racial/ethnic group</th>
<th>(# of families exited for a racial/ethnic group in 1 state) ÷ (total # of families exited for that state)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage difference of families exited per racial/ethnic group</td>
<td>(% families exited for a racial/ethnic group in an exit category) - (TOTAL % families exited for a racial/ethnic group) *cutoff for potentially indicative of a discrepancy: 1%</td>
</tr>
<tr>
<td>Disparity rates</td>
<td>(% families of color exited) ÷ (% White families exited) *cutoff for potentially indicative of a discrepancy: 1.5</td>
</tr>
</tbody>
</table>

*Families of color include families of Hispanic, American Indian/Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, Black/African American, and Two or more races backgrounds
Findings

MAIN FINDINGS

- Disparities in exiting rates due to unsuccessful attempts to contact families for families of color were prevalent across the most states, followed by exiting rates due to completion of the IFSP prior to age 3.
- Disparities in exiting rates were most common for Black and Hispanic families.

National Exiting Rates

Across the United States, a total of 405,511 families were exited from Early Intervention programs in 2020. Of these, 49.69% identified as White, 27.55% identified as Hispanic or Latino, 12.66% as Black or African American, 4.64% as Asian, 4.49% as two or more races, 0.69% as American Indian or Alaska Native, and 0.27% as Native Hawaiian or Pacific Islander (see Figure 1). These proportions almost exactly mirror the percentages of families enrolled in Early Intervention per race/ethnicity category.

Exiting Rates Across the United States

<table>
<thead>
<tr>
<th>Category</th>
<th>White</th>
<th>Hispanic or Latino</th>
<th>Black or African American</th>
<th>Asian</th>
<th>Two or More Races</th>
<th>American Indian or Alaska Native</th>
<th>Native Hawaiian or Other Pacific Islander</th>
<th>Black or African American</th>
</tr>
</thead>
<tbody>
<tr>
<td>Withdrawal by parent</td>
<td>20%</td>
<td>40%</td>
<td>30%</td>
<td>10%</td>
<td>5%</td>
<td>20%</td>
<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>Attempts to contact unsuccessful</td>
<td>20%</td>
<td>40%</td>
<td>30%</td>
<td>10%</td>
<td>5%</td>
<td>20%</td>
<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>Completion of IFSP prior to max age</td>
<td>20%</td>
<td>40%</td>
<td>30%</td>
<td>10%</td>
<td>5%</td>
<td>20%</td>
<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>Total Families Exited</td>
<td>20%</td>
<td>40%</td>
<td>30%</td>
<td>10%</td>
<td>5%</td>
<td>20%</td>
<td>30%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Figure 1.

Exiting Due to Unsuccessful Attempts to Contact Families

A total of 29,728 families were exited from Early Intervention programs across the United States in 2020 due to unsuccessful attempts to contact them. Of these, 38.37% identified as White, 30.85% as Hispanic or Latino, 21.90% as Black or African American, 4.73% as two or more races, 2.65% as Asian, 1.19% as American Indian or Alaska Native, and 0.30% as Native Hawaiian or Pacific Islander (see Figure 1). When comparing these percentages to those of the
national total exiting rates, some disparities are seen. The percentage of White families who are exited due to unsuccessful attempts to contact them is much lower (a difference of 11.31%) than the total percentage of White families who were exited. The percentage of Black or African American families who exited due to this reason was 9.24% higher than the percent of all Black or African American families who exited. Similarly, the percentage of Hispanic families who exited due to unsuccessful contact was slightly higher than the percentage of all Hispanic or Latino families who exited.

Many states experienced higher exit rates in this category than the national total exit rates for specific racial/ethnic categories. For example, 21 states had higher exit rates due to unsuccessful contact than the national exit rate for Black families, and individual state rates ranged from 22.10% in New Jersey to 82.01% in D.C. 14 states had higher exit rates due to unsuccessful contact than the national exit rate for Hispanic families, and individual state rates ranged from 30.22% in Washington to 74.45% in New Mexico.

This means that families of color were exited more often than White families due to an inability to get in contact with them when compared to the total exit rate for these races/ethnicities. This may be due to systemic inequities for families of color including limited access to reliable phone and internet service. Information on contact efforts from Early Intervention programs is unclear.

Exiting due to Completion of the IFSP Before Age 3

A total of 43,182 families were exited from Early Intervention programs across the United States in 2020 due to their completion of the IFSP before age 3. Of these, 64.08% identified as White, 18.02% as Hispanic or Latino, 8.53% as Black or African American, 5.29% as Asian 4.77% as two or more races, 0.63% as American Indian or Alaska Native, and 0.34% as Native Hawaiian or Pacific Islander (see Figure 1). When comparing these percentages to those of the national total exiting rates, slight disparities are seen. The percentage of White families who are exited due to their completion of the IFSP before age 3is slightly higher (difference of 3.66%) than the percentage of White families who were exited in total. The percentage of Hispanic families who exited due to their completion of the IFSP before age 3 was slightly lower (difference of 2.38%) than the percentage of all Hispanic or Latino families who exited. The percentage of Black or African American families who exited due to this reason was 2.21% lower than the percent of all Black or African American families who exited.

Many states experienced higher exit rates in this category than the national exit rate for each racial/ethnic category. For example, 40 states had higher exit rates due to their completion of the IFSP before age 3 than the national exit rate for Hispanic families, and individual state rates ranged from 0.74% in New Hampshire to 17.12% in Delaware. 27 states had higher exit rates due to their completion of the IFSP before age 3 than the national exit rate for Black families, and individual state rates ranged from 22.10% in New Jersey to 8.071% in Texas.

This means that families of color were completing their IFSPs before age 3 at lower rates than White families when compared to the national total exiting rates per racial/ethnic category. This may be due to ineffective service delivery practices that do not support their success in the Early Intervention programs, especially because commonly implemented practices are based on research-evidence that centers the White, English-speaking, middle-class family.

Exiting due to Withdrawal by Guardian

A total of 57,773 families were exited from Early Intervention programs across the United States in 2020 due to withdrawal by a guardian. Of these, 53.35% identified as White, 25.16% as
Hispanic or Latino, 10.44% as Black or African American, 4.77% as two or more races, 3.45% as Asian, 0.41% as American Indian or Alaska Native, and 0.14% as Native Hawaiian or Pacific Islander (see Figure 1). When comparing these percentages to those of the national total exiting rates per racial/ethnic categories, some disparities are seen. The percentage of White families who are exited due to guardian withdrawal is much higher (14.39%) than the percentage of White families who were exited in total. The percentage of Hispanic families who exited due to guardian withdrawal was lower (difference of 9.52%) than the percentage of all Hispanic or Latino families who exited. The percentage of Black or African American families who exited due to this reason was 4.13% lower than the percent of all Black or African American families who exited.

**Reasons explaining why families may withdraw from Early Intervention services are unreported. Further information is needed to understand the role of systemic inequities for families of color.**

**Federal Recommendations**

**Congress**

**Recommendation 1:**

**Congress and state legislatures should fully fund the Individuals with Disabilities Education Act (IDEA) part C and part d.**

In 2017, the IDEA state grant program was only funded to cover 14.6% of costs related to providing Early Intervention for children with disabilities, compared to the 40% that was promised when IDEA was passed. Limitations in funding in turn limit state initiatives to address issues of equity related to Part C programs. Congress must fully fund IDEA during the law’s next reauthorization period, and must account for inflation, need, and historical marginalization within their funding plan. Congress should increase funding for Part D to support state-wide monitoring, technical assistance, and professional preparation and development, especially for efforts related to addressing systemic inequities in Part C.

**Recommendation 2:**

**At reauthorization of IDEA, congress should add the implementation of culturally responsive and sustaining programming within Part C regulations.**

Access to and retention in Early Intervention programs for families of color can be supported by policies, procedures, and clinical practices that address systemic inequities through an evidence-based culturally responsive and sustaining lens. To hold state programs accountable, congress must pass federal legislation to require the development and implementation of such programming nation-wide. Such legislation should require a) an exploration into the states’ current state of culturally responsive/sustaining programming; b) partnership with consulting agencies (universities, researchers, subject matter experts) to develop a state-wide plan, and c) professional development to train Early Intervention personnel. Additionally, legislation should also authorize monitoring and accountability measures for programming to ensure states’ progress.

**Federal Agencies**

**Recommendation 1:**

**OSEP should increase the funds granted for state part C programming through the state determination process.**
Currently, the majority of funds provided to states via state determination process are allocated towards Part B programs. This is due to incomplete funding of IDEA. Once IDEA is fully funded, OSEP must provide adequate funds for Part C state programs. These funds can thus be used to fund statewide initiatives to improve culturally responsive policies and procedures.

Recommendation 2:
OSEP should require the disaggregation of state-reported data for indicators 1-11 on state annual performance reports (APRs). In addition, OSEP should require exiting rate data to be included in APRs.

Currently, states report data related to child and family indicators across the entire child and family population in their state. By requiring states to disaggregate data by race/ethnicity and gender, states and the public have the opportunity to further analyze for data for evidence of disproportionality across those indicators. Additionally, states currently do not report exiting data within their APRs, but this information is important to understand states’ quality of performance, especially when focusing on the exiting categories that were highlighted in this policy brief. This information, especially when disaggregated, will offer additional insight into racial and ethnic disparities based on families who are being exited from Part C programming.

State Recommendations

State-level
Recommendation 1:
States should enhance existing infrastructure, such as Interagency Coordinating Councils (ICC) and other advocacy and advisory committees to center issues of equity and disproportionality.

Many states do not have centralized efforts focused on issues of equity and disproportionality in their Annual Performance Records. To plan and implement efforts on these issues, states must (a) recruit and retain the involvement of caregivers and community members who are representative of marginalized families in that state to participate in advisory boards and committees; (b) identify issues of equity unique to their state in regards to family access of, receipt of, and retention in Part C programs; and (c) plan initiatives to directly address the identified issues.
Recommendation 2:
**STATE BOARDS OF EDUCATION SHOULD REVISE PERSONNEL STANDARDS AND LICENSING REQUIREMENTS TO REQUIRE KNOWLEDGE AND DEMONSTRATED COMPETENCIES RELATED TO CULTURAL RESPONSIVENESS AND SUSTAINMENT.**

Early Intervention personnel are not currently held accountable for enhancing their knowledge on cultural responsiveness and sustainment. That is, current personnel standards allow for licensed healthcare professionals, service coordinators, and Early Interventionists to be hired as long as individuals have a college degree and are licensed by their national licensing board. States must revise standards for the hiring and retention of personnel. This should include: (a) at the time of hiring, require all Early Intervention personnel to receive training on the theories of cultural responsiveness and sustainment, and how to translate that knowledge into practice and (b) require annual completion of Continuing Education Units on equity-related topics for continued licensing.

Recommendation 3:
**STATES SHOULD ALLOCATE STATE FUNDS TO DEVELOP PERSONNEL DEVELOPMENT PROGRAMS FOCUSED ON EQUITY-RELATED TOPICS.**

To address the limited training of Early Intervention personnel on equity-related topics and the identified equity-based issues, states should design a personnel development program that can support their learning of topics including: cultural responsiveness and sustainment, positionality and reflexivity, implicit bias, theories related to equity, and skills for working with families from
marginalized background. States should partner with researchers in universities or other institutions to guide their development and testing of this programming so that it is well informed and evidence-based.

**STATE SPOTLIGHT: ALABAMA**
In 2020, Alabama added a diversity training to the 2021 Comprehensive System of Personnel Development plan, to include training families from diverse families, gaining input, and providing culturally awareness services. They will also offer seminars on diversity, equity, and inclusion via a consulting firm to their Part C personnel.

**STATE SPOTLIGHT: INDIANA**
Indiana has partnered with Indiana University to investigate equities in early childhood intervention. Preliminary findings indicate that race, especially for Black families, impacts several areas of Early Intervention. Continued research efforts involve interviewing families who have dropped out of the program and providers who work with Black families. Indiana plans to use the data to inform action steps they take to address the identified inequities.
Local programs in Indiana have set up lending libraries so families are able to check out technology as needed to access virtual Early Intervention services.

**STATE SPOTLIGHT: MAINE**
Maine has many initiatives focused on addressing issues of equity. These include partnering with a cultural broker to increase engagement within the Somali community, establishing a community of practice that focused on supporting diverse families, adding video-based interpretation software to their resource system for Part C personnel, and including the translation of materials, as well as professional development efforts, into their American Rescue Plan budget. Professional development opportunities that Maine will offer include training on cultural competency, implicit bias, and working with families living in poverty and immigrant families.

**Conclusion**

Racial disparities exist for families who receive Early Intervention in regards to their access of, receipt of, and retention in services. Children of color are less likely to receive developmental screening\(^4\)\(^,\)\(^5\) and to receive services for developmental delays than White children. These disparities ultimately impact children and family outcomes—children of color show less growth and make less progress even when receiving services\(^\text{iii,y}^\). We found that these disparities hold true when examining the rates at which families of color across the nation are exited from Part C services across various exiting categories. Importantly, we found that families of color were disproportionately exited from Part C services due to unsuccessful attempts to contact, completion of the IFSP prior to age 3, and withdrawal by guardians. Specifically, disparity rates for Black and Hispanic families were present in the highest number of states. Federal and state

---


policy need to address these issues in equity for families of color. Policy changes must target increasing funding for Part C services, supporting the development of personnel development for culturally responsive and sustaining programming, and reporting unaggregated and transparent data.