

CHILD CARE PLUS+ RESEARCH REPORT #5

INCLUSIVE CHILD CARE IN MONTANA

Inclusion Resources and Supports: Importance vs Use



Background

A wide variety of supports are potentially available to assist child care providers in meeting the needs of children with disabilities. When Child Care plus+ asked 1,744 child care program owners and directors in Montana for their perspectives on caring for young children with disabilities, 609 individuals responded to the Child Care plus+ Provider Survey which included two lists of these potential sources of support. On the first list, participants rated the **importance** of each potential source of support and how **easy it is to use/find**. On the second list, participants rated their **knowledge of how to access** the support and its **use**. It will help put the results into context to know that of the 609 survey participants, 45% currently had a child with a disability enrolled.

Participants know the types of support for inclusion that are important to them.

On the questions about types of support important to them, such as parents and training, participants rated all the sources as at least moderately important, with a majority of the ratings as very important (see chart below). In contrast, virtually none of the supports were judged to be very easy to use or find. Five of the supports were rated by participants as difficult to access. Of these five, two supports on the list—"funding for modifications or adaptations" and "financial support for professional development"—were also rated as not just important but highly important. The chart below further illustrates these perceptions for programs that currently include children with disabilities. Perceptions about level of importance and ease of use for each type of support were very similar for participants with experience with children with disabilities and participants without experience.

Chart 1: Type of Support	Level of Importance (1 = very important; 5 = not at all important)	Ease of Use (1 = very easy; 5 = very difficult)
Child's parents	1.1	1.9
Professional development	1.5	2.5
Financial support for professional development*	1.6	3.6
Funding for modifications and accommodations*	1.6	3.9
Consultation for problem-solving about inclusion	1.7	2.7
Lending library for adapted toys and equipment	1.7	3.0
Contact list of local specialists and support agencies	1.8	2.4
Professional development focused on inclusion	1.8	2.8
Copy of IFSP/IEP	1.9	2.5
Written materials about inclusion	2.0	2.1
Helping plan the child's IFSP/IEP	2.0	2.8
Other child care providers with inclusion experience	2.0	3.1
Volunteers in program	2.2	3.7
Therapist/specialist consultation on site	2.2	3.4
Internet access	2.5	2.1

Participants are familiar with options to access funding and materials to support inclusion. On questions about knowing how to access outside resources, participants were most familiar with resources associated with child care in general. They were much less familiar with resources specific to children with disabilities. On the questions about the use of these same resources in the past three years, it is apparent that knowing how to access a resource may not always result in a high level of usage of the resource, as can be seen in the chart below.

Chart 2: Resource	Familiar	Use	Chart 2: Resource	Familiar	Use
Child care resource and referral	92%	78%	MT DPHHS Best Beginnings grants*	64%	28%
Child care licensors	90%	76%	Early intervention/special education professionals	57%	36%
Child's parents	84%	71%	PLUK (Parent's Let's Unite for Kids)	31%	10%
Public health nurse	83%	58%	MT Adaptive Equipment Program	12%	3%

*It must be noted that the types of support listed in chart 1 as being important but not easy to use/find could be supported by the resources identified in chart 2 on this page if programs are familiar with the resources and can use them. For example, types of support such as "financial support for professional development" and "funding for modifications and accommodations" are readily available through one of the resources on the list, Montana's Department of Public Health and Human Services (DPHHS) Best Beginnings Grants.

Participants participate in minimal training related to inclusion. Participation in education and training that addresses inclusion issues is an important ongoing support for successfully practicing inclusion in child care programs. On questions about training experiences, 55% of the participants reported participating in 15 or fewer hours of training in the previous year. Forty-four percent of the respondents participated in 16 to 120 hours of training.

**ACCESS TO QUALITY CHILD CARE IN MONTANA:
EXPLORING PARENT AND PROVIDER PERSPECTIVES
ON INCLUSION**

For information about this research, other topics related to inclusive child care, or copies of this report, contact:

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While participants are involved in ongoing training and professional development in varying amounts, only 26% of any of the training was reported to have "some" focus on working with children with disabilities. Seven percent of the training focused most or all on children with disabilities. A majority of the training (67%) was described as having little or no focus on disability issues.

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Our program has always handled inclusion on an individual child. If our program will meet the child's needs, we will make every effort to provide services for the child. I avoid taking children on a warehouse basis. That is I won't take the child if the program will not meet the child's needs. Cooperation of the parents is essential. If they are unavailable or overly defensive to staff/parent/children's questions & requests, it's difficult to make the inclusion work. The most frustrating part is being left out of all meetings and IEP/ISP plans. Montana Child Care Center

This project is awarded by the U.S. Department of Health and Human Services; Administration for Children and Families; Child Care Bureau (Award #90YE0013). Opinions expressed herein are those of the authors and do not necessarily represent the position of the U.S. Department of Health and Human Services.