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Many Infants and Toddlers who Participate in Part C Services Do Not Need Special Education by Elementary School

Part C

Part C, a provision of the Individuals with Disabilities Education Act (IDEA) was originally passed in 1975. Legislation articulated Part C's intent as:

"...[the minimization of] the later need for special education and institutionalization of infants and toddlers with developmental delays by enhancing the capacity of communities to serve these children and their families through early intervention services." (United States Department of Education, 2008)

Part C's commitment to family involvement is consistent with the theory and practice of effective early intervention programs noted by research on early intervention programs (Ou, 2005). In 2007 Minnesota broadened its Part C eligibility criteria and federal changes to CAPTA in 2003 are expected to expand the Part C service population.

Study Purpose

This exploratory study examined a set of outcomes related to children who received Part C early intervention services as infants and toddlers using differently constructed comparison groups. We used statewide administrative data from education and child welfare systems in Minnesota. The outcomes examined have child and public investment outcome implications as Part C services are in part intended to prevent more expensive use of public services later on. Because Part C is child and family-centered, there is the expectation that, in addition to eliminating or reducing the need for special education services once the child reaches elementary school, there is also the potential to help parents improve their ability to support their child's development. Helping families meet the unique needs of their children should reduce

family stress and prevent families from coming to the attention of child welfare – a system where children with disabilities and delays are overrepresented.

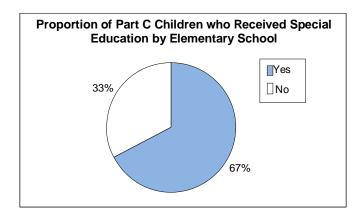
Study Data

Part C data for participation years 1996, 1997, and 1998 were selected for study from the Minnesota Department of Education. Since one main objective of the study was to examine Part C children later after they entered the public schools, these particular years were chosen to coincide with the Minn-LInK Project's available K-12 data sets for 2001-2004. Data from the child protection system in Minnesota (Social Services Information System, or SSIS) were also accessed in order to determine whether or not children had contacts with child welfare. The SSIS system was launched in 2000 when this population of Part C children was approximately 2-4 years old. Child records were matched across these multiple systems and three comparison groups were constructed based on different criteria (please see report for details of methodology).

Findings

Special Education Use

Among all children who received any Part C services, 33% of completors did not require special education by elementary school. While not all of this can be attributed to Part C, some portion is likely due to program receipt.



Special Education Setting Intensity

Although we expected to see variation in special education setting intensity between children who received Part C and comparison children, results were mixed. Part C children in some regions of the state had significantly lower setting intensities than non-Part



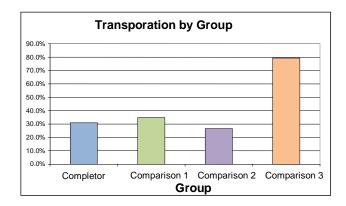
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C children for similar disabilities types, but this was inconsistent. We suspect this is due to a number of factors including variation in local identification practices that muddy statewide results; possible lack of comparability of comparison groups; the bluntness of special education setting intensity codes as indicators of actual intensity; and the highly restrictive nature of pre-2007 eligibility criteria for Part C in Minnesota which identified infants and toddlers with only the most severe disabilities and delays

Transportation

Part C children (completors) were less likely to need disability related transportation services but only when compared to a comparison group comprised of children with the same disability types. ($\chi^2 = 197.093$,4, p < .001).



Child Welfare Involvement

Part C children had lower rates of child welfare involvement than non-Part C children but differences disappeared when we controlled for poverty.

For references and the original full report, visit the CASCW web site at http://cascw.umn.edu and follow the link to Publications or Minn-Link.

The Center for Advanced Studies in Child Welfare (CASCW) is a resource for child welfare professionals, students, faculty, policy-makers, and other key stakeholders concerned about child welfare in Minnesota. Minn-LInK is a unique collaborative, university-based research environment with the express purpose of studying child and family well being in Minnesota using state administrative data from multiple agencies. For more information, contact Kristine Piescher at 612-625-8169 or email at kpiesche@umn.edu.

Limitations

- 1) Child protection data time frames for this study were limited (omitted infancy and toddlerhood) and involvement with child protection is a result of multiple factors
- 2) The special education instructional setting does not convey enough information about the actual level of intensity of services.
- 3) Parent perspectives on family functioning is not available.
- 4) The data and analysis are unable to reveal the exact proportion of Part C recipients who did not require special education due to receipt of Part C services.
- 5) Cost data was not available for Part C services for the time frame of this study.

Discussion Points

- There is some evidence that Part C has an impact on the later use of special education for infants and toddlers with delays and disabilities.
- Because Minnesota has recently expanded its eligibility criteria for Part C, the special education use of recipients should continue to be monitored (savings may be even greater over time).
- Transportation costs for Part C children may be lower than for children who do not receive Part C who have similar disabilities.
- Differences in special education instructional setting intensity may emerge in a replicated study of Part C under the newer, broader criteria.
- Child welfare staff should continue to refer infants and toddlers to Part C services to maximize the potential savings of this early intervention service.

References

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