



Protecting the rights of disabled learners and their families to quality, inclusive early childhood education



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Introduction

Protecting the rights of every child to a quality, inclusive early childhood education (ECE) presents many opportunities and challenges for teachers, families, communities, policy makers and funders. The most significant barriers disabled children and people experience in education and society are based, not on their impairments, but on negative attitudes towards difference. The dominance and acceptance of deficit views regarding disability compromise the opportunities and lived experiences of many disabled children and adults in Aotearoa New Zealand (Ministry of Health, 2001). Deficit-based thinking and approaches get in the way of good teaching and influence many of the systems currently in place for ECE. They work in ways that deny some disabled-labelled children equal access to a *Te Whāriki*-based curriculum and relationships. In this article, I will address three current barriers to disabled children and their families' full participation in quality, inclusive ECE. These barriers are related to: structural and process quality factors in ECE and their impacts on the learning and participation of disabled-labelled children; restricted understandings about what participation in ECE means for disabled-labelled children; and the ways provisions for disabled-labelled children are currently identified and responded to through targeted funding arrangements in ECE.

Quality

Early childhood teaching in Aotearoa New Zealand is clearly based on principles and values that are guided by a holistic and competent view of children and learning (Ministry of Education, 1993, 1996). Well qualified early childhood teachers have the knowledge and skills required to understand and meet the needs of diverse learners and their families, including disabled or labelled children. Participation in good quality, inclusive ECE benefits every child, family, community and wider society. In teacher-led early childhood services, structural factors essential to the provision of quality ECE include funding directed towards high levels of qualified teachers, high teacher:child ratios, small group sizes, regular teacher non-contact time and professional development for teachers, and good remuneration and

working conditions. Structural factors directly influence the capacity of teachers (and centre management) to work to the best of their abilities in response to the rights and needs of every learner and family. Factors such as qualifications, group size and teacher:child ratios influence the quality and nature of leadership and collaborative relationships within a centre, a culture of respectful and responsive interactions and relationships with children and families, clarity around the centre's values, and vision and teacher's ability to critically reflect on and enact the principles and pedagogy of *Te Whāriki* (Education Review Office, 2010). The impacts of less than ideal numbers of qualified teachers, particularly on children whose learning and inclusion requires careful consideration and on-going positive relationships with families and other professionals, are significant. Where teachers are not properly supported by structural factors to carry out their roles and responsibilities, they will work less well as a team and find it difficult to develop intimate relationships with every child, family and other services involved in a child's education.

Participation

Early childhood education in Aotearoa New Zealand has a long history of disabled children attending regular services. However, it is important to recognise that each child attending an education and care setting does not experience the curriculum in the same ways by virtue of sharing the same physical space. That is, being physically present does constitute experiencing equal opportunities to learn and participate (Mackey & Lockie, 2012). Even at the level of understanding participation as 'physical presence', there is evidence of early childhood centres making different rules regarding disabled children's attendance. Disabled children's presence can become conditional on available funding and/or whether teachers view the child as being their responsibility or someone else's. Current rules making attendance conditional include: centres restricting the number of hours a child can attend to those offered by an Early Intervention Service (EIS) to fund an Education Support Worker (ESW); early intervention services removing ESW funding for the 12 weeks of school holidays per year when many centres remain open 48 weeks of the year; centres refusing a child's attendance when their ESW is away on sick leave; requiring parents to pay for or top up ESW hours; and/or requiring a parent or whānau member attend alongside their child at the centre. There is also evidence of early childhood centres refusing to allow and/



or discouraging families to enrol disabled children in their service (Macartney, 2011; Purdue, 2004). This situation highlights problems with disabled children's and family's rights to equal participation in early childhood education alongside their non-disabled peers. It also demonstrates a troublesome relationship between targeted funding and exclusion.

In Aotearoa New Zealand, both early intervention (EI) and early childhood care and education services are responsible for supporting the care and education of disabled-labelled children. There can be tensions and contradictions in the theoretical and philosophical underpinnings and practices between early intervention services and early childhood centres (Dunn, 2004). These tensions can work in ways that impact negatively on a labelled child's experience of quality ECE. Traditional approaches to early intervention have emphasised the individual in isolation and their perceived deficits as the focus of planning, assessment and intervention. Like all citizens, early childhood teachers are not immune to the circulating effects of deficit views toward disability (Ministry of Health, 2001). In centres that have difficulty recognising and responding positively to disability and difference and/or don't have adequate structural conditions to support quality curriculum, a disabled-labelled child is likely to experience more limited access to a *Te Whāriki*-based curriculum (Gordon-Burns, Purdue, Rarare-Brigs, Stark, & Turnock, 2010). Rather than pathologising differences, to be inclusive the curriculum needs to be responsive to each child and family's rights to be respected, heard, belong, experience meaningful relationships, to be viewed as competent and able to learn and have their unique contributions valued (Ministry of Education, 1996).

Funding

Every child in ECE has a right to have their needs to learn, participate and belong met and for this to form the basis of support from every person involved in their education. Funding arrangements need to be directed to this end. How to deploy resources so that we can be confident in saying that every child is assured equal opportunity to benefit from a good quality, inclusive education is not so straightforward.



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Diagnosis and labeling linked funding

While there can be benefits, there are also negative outcomes associated with receiving a diagnosis or label and this makes the links between labeling and funding provision problematic. Should children be required to receive a deficit label in order for their centre to access funding directed at ensuring that the child and family experience the relationships, education and environment they have a legal and ethical right to? The over-use of special education labels, with their tendency to pathologise children and their behaviour, has become a widespread problem in Western-based education systems (Bishop, Mazawi, & Shields, 2005). Labeling is a subjective, culturally biased process. The over-representation of marginalized groups in special education figures (worldwide) demonstrates that labeling is neither objective nor benign. A child who is Maori, Pasifika, from a migrant family, male and/or poor

is more likely than a child from the dominant culture to be designated as having 'special education needs' (SENs). An ever increasing plethora of labels have and continue to be created to describe particular groups of children, their circumstances and/or behaviour. Some of the more recent descriptors, such as 'global developmental delay', 'mild-moderate-severe intellectual disability', 'emotional behavioural disturbance/disorder' (EBD) and 'attention deficit hyperactivity disorder' (ADHD), are very non-specific, but extremely powerful in terms of their effects on those who receive them. Being labelled makes it more likely a child will be perceived and treated primarily in terms of 'deficit' or impairment. 'Early identification' and labelling should also be approached with great caution because infants, toddlers and young children are diverse in the pace and nature of their learning and development.

Current application criteria, and the provision of additional resources to disabled children in ECE are deficit focussed. Criteria for decision making about additional resources are based on assessments of what a child is unable to do in comparison to expectations for 'normal' behaviour and development. Therefore it is necessary to describe a child in deficit terms in order to have a chance of receiving funding. Families in particular often find the application, diagnosis, and labelling process upsetting and stressful. A child may be discernibly different from many other children in terms of the pace and nature of their development, how they behave, their ways of being or kinds of needs. They may need additional support to access the curriculum. But perhaps we need to be asking the question: 'Is it helpful, necessary or fair to categorise and understand particular children in deficit terms in order for their early childhood centre to access the resources they need to support the child's learning, participation and contributions?'

Funding use and allocation

The deployment and use of Education Support Workers, alongside the provision of therapies, is one of the most common responses to funding additional support for disabled learners in ECE. There are problems with the ways the ESW role is currently used and interpreted. ESWs are usually untrained in ECE and receive low wages for their work. They are supposed to provide support to centre teaching staff. However, without strong leadership and guidance from within a centre, ESWs can and do work in ways that isolate labelled

children from their peers and limit their access to the curriculum. ESWs being funded and employed through an early intervention service can contribute to confusion about who is/should be responsible for supervising and mentoring their work within the early childhood centre and how their role is perceived. Combine this lack of clarity with centres who have large group sizes, low teacher:ratios and some unqualified teaching staff and it is perhaps not surprising that teachers sometimes abdicate responsibility for a disabled-labelled child to an ESW, early intervention (EI) teachers and specialists and/or the child's family.



Artwork by McCartney family

Conclusion

Deficit responses to disability and difference underpin many barriers to the equal participation of disabled children and their families in ECE. Quality, inclusive education and teacher capacity is also supported or constrained by key structural factors such as levels of qualified teaching staff, small group sizes and high teacher:child ratios. When centres and teachers neglect to accept primary responsibility for developing responsive relationships with and planning for labelled children in their care, children's learning, participation and equity of access to the curriculum and environment are restricted (MacArthur, Purdue, & Ballard, 2003; Macartney, 2011; Purdue, 2004; Rutherford, 2009). Problems within the current ECE and early intervention funding systems need to be acknowledged and addressed by the Ministry of Education and those working in the sector, in consultation with families. The discussion needs to focus on evaluating the extent to which funding arrangements and services are supporting disabled children's learning and participation through access to a Te Whāriki -based curriculum.



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