

programming with rural preschool handicapped children

Phyllis A. Pirner

Terry now wears glasses. Cindy is in an infant stimulation program. Andy attends developmental preschool. What do these children have in common? They and their parents attended a preschool screening conducted by the Missouri Cooperative Extension Service.

One of every 10 preschool children need special educational planning and programming according to current studies.¹ Many communities have only limited or no services at all for preschool children. Children may be in elementary school before there's planning for their educational needs. In many instances, the help comes too late.

... Efforts directed toward providing opportunities for handicapped preschoolers to obtain the help they need are personally satisfying as well as consistent with the Extension home economist's mission of improving the quality of life for children and their families.

The Children's Therapy Center (CTC), a nonprofit corporation in Pettis County, Missouri, received funds in July, 1973, from the Bureau for the Educationally Handicapped (BEH) for a 3-year demonstration project. CTC is a community service program providing education and therapy for handicapped children in Pettis County and the surrounding area. It used the funds to demonstrate effective methods for the early identification of handicapped children and the provision of services for them.

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Extension Involvement

After the initial three years of the demonstration project, CTC received funding from BEH for an Outreach Project. CTC needed to share with others in the state the knowledge gained through the demonstration project. And they realized that as a small community-based agency, it would be impossible to have statewide impact. The most logical alternative was to use an already existing statewide network—the Missouri Cooperative Extension Service, which has been involved since the fall of 1976. One of the goals of the Outreach Project was to demonstrate that this was an appropriate and effective way of reaching the handicapped preschoolers and their families.

What role Extension in other states will assume with handicapped preschoolers and their families will depend on state legislation and its implementation. If handicapped preschool children are being adequately served, then Extension can cooperate with the agencies providing the services to improve and expand those services. If the handicapped preschool population isn't being adequately served, then Extension has the responsibility to provide leadership for those efforts and try to bring adequate services to them and their families.

Project Description

This project makes training and technical help available to communities to screen preschool children, locate high-risk children, and direct families to existing services or develop local community services for handicapped children and their families. It provides participating families with information on early childhood development and creates an awareness of the need for parents to monitor development.

The project strives to create an overall "community awareness" and commitment through meetings and media approaches. Trained volunteers help with the developmental screening phase. Other service organizations (health units, regional clinics, schools) help screen children for vision and hearing handicaps.

The children are tested individually and then conferences are held with parents to report findings. Referrals to other agencies are made if further diagnostic work is necessary or other resources are needed to help and support these families.

Missouri Cooperative Extension Service
University of Missouri & Lincoln University

Preschool Screening
All Children, Birth to School-Age
* FREE OF CHARGE *

Date: Time:
Location:
For appointments, call:

The model is applicable in areas where the preschool handicapped population is either unserved or underserved. Some states have legislation that mandates the provision of free appropriate education for all handicapped children from birth to 21 years of age. Or perhaps from 3 to 21 years of age.

Missouri legislation mandates that services begin at age five. Therefore, the model described in this article designates the Missouri Cooperative Extension Service as the leader in rural communities where no services are available for the preschool handicapped children.

Community Approach

This model illustrates the community approach. Extension home economists receive training and technical assistance on early identification of handicapped children and how to initiate services for them. Home economists in turn share their knowledge and skills in communities in which they work. This project identifies six steps a community goes through to improve its resources for preschool handicapped children and their families.

1. *Public awareness:* to stimulate, inform, and gather community support.
2. *Needs assessment:* to identify strengths of present services and determine needs.
3. *Screening preschoolers:* to identify children who need further in-depth diagnostic evaluation by using trained volunteers to administer a developmental test and coordinating with other service agencies.
4. *Comprehensive assessment:* to confirm diagnosis of handicapped children and identify families needing services by involving professionals in determining the nature of a possible handicap through further examination.
5. *Administration, organization, and funding:* to help communities form a group to help families and search for financial support to provide needed services for families and their children.
6. *Service program:* to initiate a program to meet the needs of the community.

Missouri Cooperative Extension Service has demonstrated that this model is effective. As of June 30, 1980, there had been 90 community screening efforts involving 8,300 children. More than 1,000 community members have received training to administer the development screening instrument. Missouri Cooperative Extension Service now has available a trained cadre of volunteers with considerable knowledge about children's growth and development.

Feedback from Extension home economists has been positive. The recurrent statement is that this work gives visibility for Extension in the communities. Also, home economists note the importance of helping rural communities reach their potential for determining what services and programs are needed and how to implement them.

Continuing Efforts

The termination of grant funds hasn't meant the termination of the Outreach Project effort. The Missouri Cooperative Extension Service has entered into memoranda of agreement with the Missouri Departments of Health and Mental Health and has a letter of understanding from the State Department of Elementary and Secondary Education. This has facilitated efforts and encouraged cooperation and coordination throughout the state.

Conclusion

Research results support the concept that the earlier a handicapped child is identified, the earlier help can begin. The earlier the help, the better the chances for remediating the child's handicapping condition or at least significantly lessening the debilitating effect on the child and the family.² Efforts directed toward providing opportunities for handicapped preschoolers to obtain the help they need are personally satisfying as well as consistent with the Extension home economist's mission of improving the quality of life for children and their families.

Footnotes

1. John Gliedman and William Roth, *The Unexpected Minority: Handicapped Children in America* (New York: Harcourt Brace Jovanovich, 1980).
2. George Sheperd, "The Early Education of Handicapped Children," *Focus on Exceptional Children*, III (March, 1971), 1-10 and Frances H. Hale and Diane R. Juster, *Early Educational Planning* (Cumberland-North Yarmouth, Maine: Project Maine Stream Outreach Project, 1977).