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The purpose of this study was to explore the relationship between teacher education experience and child-focused practices implemented in quality early childhood inclusive environments, the following research questions focused the study: what child-focused effective practices were implemented in quality early childhood inclusive environments and, how did early childhood teachers learn about these practices? To answer these questions, a qualitative descriptive multiple case study approach was used to examine effective child-focused practices used in two Head Start classrooms, two public Pre-K classrooms and two childcare centers with children with special educational needs. The teachers were videotape recorded implementing practices in the context of the classroom, then interviewed regarding the practices used. The teachers were also asked questions about education and experienced that informed their implementation of the practices. Using a modified phenomenological three step analytic process, themes emerged. The themes were analyzed and reduced a cross settings to determine specific practices implemented and the connection to their educational experiences.

Results revealed that teachers implemented primarily explicit child focused practices. These practices included guidance and redirection with clear limits, using rote, recall and response during routines and activities and embedding IEP goals into the routines and practices. These practices seemed directly connected to the number of children with disabilities in the classroom and the severity of the disability. This study

suggested that specific college coursework influenced implementation of practice. Coursework with field experience and internship provided opportunities to rehearse practices. Also relationships developed within the home and at work influenced practice. Additional results suggest implicit practices were used primarily with typical children in inclusive settings. Further research should explore the type and extent of the disability and the ratio between typical and atypical children in an inclusive setting. Also, the role of relationships within work and family should be examined. Limitations include number of participants and researcher bias as an experienced early childhood professional.

EXPLORING THE RELATIONSHIP BETWEEN TEACHER EDUCATION  
EXPERIENCE AND CHILD-FOCUSED PRACTICES  
IMPLEMENTED IN QUALITY EARLY  
CHILDHOOD INCLUSIVE  
ENVIRONMENTS

by

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Approved by

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This study is dedicated to my family and teachers who knew that someday I would make a difference in the life of a child. All children have a right to learn and belong.

APPROVAL PAGE

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## CHAPTER I

### INTRODUCTION

#### Overview and Rationale

Young children with special education needs (birth thru age five) are frequently served in early childhood education community centers, Head Start, and public Pre-K inclusive environments. According to Early et al. (2006), early childhood teachers are unprepared to implement evidenced- based effective practices for children with disabilities in early childhood inclusive environments, even those considered high quality. The research on implementation of evidenced- based practices and strategies used by early childhood teachers in quality inclusive settings is limited since most of the research focuses on early interventionists and early childhood special educators implementing the practices (Winton, McCollum, & Catlett, 2008). With this gap in the research on implementation of specific child-focused practices by the early childhood teacher, it is crucial to begin to gather evidence on the actual implementation of child-focused practices in inclusive settings. Additionally, it is important to examine the teachers' educational experiences that prepared them to implement effective child-focused practices. This study explored the relationship between teacher preparation and the implementation of child-focused practices in quality early childhood inclusive environments.

## **Theoretical Framework**

The design of this study followed a Unified Systems Theoretical approach presented by Odom and Wolery (2003). This model supported inclusive practices connecting three theoretical models: Social Systems Theory, Behaviorism, and Constructivism. The interrelationship within an inclusive ecological framework informs practice, creating a Unified Systems Theory of Practice. The child is the foci of this model and his/her special educational needs determined the specific child-focused practice implemented (Odom & Wolery, 2003). Furthermore, Odom and Wolery suggested any practice must be evidence based and are necessary to improve child outcomes in any setting (Dunst & Trivette, 2009). To ensure fidelity in this study, evidenced-based practices were used as codes to help frame the themes. The coded practices (Appendix J) were based on Division for Early Childhood (DEC) Recommended Practices (Sandall, Hemmeter, Smith, & Mclean, 2005), Developmentally Appropriate Practices (DAP) (Copple & Bredekamp, 2009), and National Professional Development Center (NPDC) on Autism Spectrum Disorder (ASD) (NPDC on ASD, FPG Child Development Institute, M.I.N.D. Institute & Waisman Center, 2010). This allowed the researcher to differentiate implicit constructivist practices (DAP) and behaviorist explicit direct instruction practices (DEC and NPDC on ASD) and to follow a Unified System Theory of Practice as the framework for the study of effective practices.

## **Methods and Results**

In order to explore the relationship between teacher education experience and child-focused practices implemented in quality early childhood inclusive environments,



the following research questions were used: (a) What child-focused effective practices were implemented in quality early childhood inclusive environments?; and (b) How did early childhood teachers learn about these practices?

To answer these questions it was important to understand the relationship through eyes and voice of the early childhood teacher. A qualitative descriptive methodology was used to examine effective child-focused practices implemented in classrooms with children who have disabilities. Denzin and Lincoln (2000) suggested qualitative researchers who study things in their natural setting, can best explore the phenomena of interest. According to Sandall, Smith, Mclean, and Ramsey (2002), “qualitative research has the potential to increase our understanding of children with special needs, their families, and those who work for and with them” (p. 130).

An instrumental case study approach was used to illuminate the issue of teaching practices and the connection to educational experiences. However, one case would not reveal new understandings of the relationship between teacher educational experiences and implementation of child-focused practices in high-quality inclusive settings. Therefore, different high quality inclusive settings were explored using multiple cases across three different types of settings, (2) Head Start, (2) public Pre-K, and (2) community childcare from two counties, Forsyth and Davie, in North Carolina. This allowed the researcher to consider the voice and perspective of the individual teacher, examine emergent themes within the bounded system, and then connect themes across multiple settings. Exploring perceptions and themes across multiple contexts allows

further exploration to connect meanings and examine the possibility of new phenomena (Telis, 1997).

A modified phenomenological approach was used to examine relationships using a three-step analysis. First, a survey was sent to the participants exploring their demographics prior to video recording observations. Next, a questionnaire was sent to the participants asking them to provide demographic information on their education and experiences implementing practices. The video transcriptions were analyzed looking for categories codes and themes. Based on this first analysis four categories were formed, context, implicit child-focused practices, explicit child-focused practices, and educational experiences. The interview confirmed practices and both transcriptions (video and interview) were transcribed, coded and analyzed for themes for each case. The second level analysis entailed analyzing themes for consistency within setting pairs looking for confirmation. The last level of analysis was analyzing themes across all cases. Several themes were confirmed for implementing child-focused practices and connecting them to education and experiences.

Analysis of the data across cases revealed several consistent themes, some explicit and other implicit. Explicit child-focused practices were: (a) direct guidance and redirection with clear expectations to use manners, (b) using rote, recall, and response with prompts to build knowledge, and (c) embedding IEP goals during routines and activities. Implicit child focused practices were: (a) integrating learning concepts and content during play, (b) using socio-contextual conversations to enhance development and learning. Both of the implicit themes were not as strong as the explicit themes. When

connecting them to contextual themes, results suggested explicit practices were used more frequently with children with special needs. Also, the type and severity of the disability as well as the ratio between typical and atypical children influenced practices.

When connecting child-focused practices and educational experience, themes that emerged from the data were: (a) college coursework with specific curriculum on practices and opportunities to implement practices in field placements; and (b) family and professional relationships provide experiences that informed implementation of practices. This ? suggested college coursework was important, specifically field placements and relationships at home and work. Also, both themes revealed teachers need practice to implement specific child focused practices.

Recommendations for future study include making a clearer connection between implementing practices and the type and severity of the disability as well as ratio between typical and atypical children in the classroom. Also, future study should consider examining relationships, specifically the role of in the family (mother) and the role of the supervisor in implementing practices. The phenomenon of teacher education and experience connecting to implementation of child-focused practices in quality settings has implications for teacher preparation practices.

## **CHAPTER II**

### **REVIEW OF THE LITERATURE**

#### **Introduction**

There is an urgent need for quality early childhood inclusive environments. With the new regulation and performance standards under IDEA Part C, and section 619 of Part B, children with disabilities attend natural environments such as homes and community early childhood education settings (IDEA, 2004). Extensive research documents the multiple benefits of inclusive educational programs in natural environments for children with and without disabilities. Teachers, early education professionals, and parents report multiple gains for children with special education needs educated in natural environments (Baker-Ericzén, Mueggenborg, & Shea, 2009). Children with developmental delays attending inclusive programs make more progress in cognitive, language development, and motor skills than their peers attending separate special education educational settings (Hunt, Soto, Maier, Liboiron, & Bae, 2004; DeVore, & Russell, 2007). However, limited empirical evidence exists on specific effective child-focused practices that improve development and learning for the child with special education needs in natural inclusive environments (Sandall et al., 2002). The Division for Early Childhood (DEC) identified recommended practices for inclusive settings that serve young children with special education needs. Yet, scientific documentation of specific recommended practices implemented by the early childhood

teacher has not emerged (Dunst & Trivette, 2009; Odom et al., 2005). Research needs to explore and examine issues relating to implementing effective practices to improve learning in inclusive settings (Burchinal et al., 2009; Buysse & Hollingsworth, 2009).

Upon review of the research, an issue connected to improving development and learning for young children was the teacher's educational experiences (Cassidy, Hestenes, Hegde, Hestenes, & Mims, 2005; Essa et al., 2008; Gallagher & Lambert, 2006; McCurry, 2007; Mullvihill, Shearer & Van Horn, 2002). However, a gap remains in connecting the relationship between teacher educational experience and implementation of effective child-focused practices in quality inclusive early childhood environments.

## **Conceptual Framework**

### **Defining Inclusion**

To begin this exploration, inclusion and inclusive practices needs description from several perspectives. Guralnick (2001) defines inclusion as full participation of a young child with disabilities in a typical early childhood setting such as a preschool or early childhood education. Abraham, Morris, and Wald (1993) describe inclusion as a place where children with and without disabilities play and learn together. According to Smith, Miller, and Bredekamp (1998) inclusion was a place, a responsive environment to promote the development of the needs of every child. Hence, inclusion was a place, a responsive environment for all children to learn and play together. The above definitions seem too generic since it was more than a place for all. The definition must consider both the concept of inclusion and the construct of effective practice. According to the National

Association for the Education of Young Children (NAEYC) and Division for Early Childhood (DEC), the “lack of a shared definition has contributed to misunderstandings about inclusion” (DEC/NAEYC, 2009 p.1).

DEC and NAEYC organizations published a joint position statement on inclusion. Together they established a conceptual framework as a guide for high-quality inclusive practices and programs. The intent of this position statement was to have shared vision for including children and families across all settings. Inclusive programs must be of high quality and provide access, participation, and supports for the child, the family, and the practitioners (DEC/NAEYC, 2009). A high quality early childhood environment encourages and supports the growth and development of children in all developmental areas (Helburn et al., 1995). It should be developmentally, individually, and culturally appropriate (Bredekamp & Copple, 1997; Copple & Bredekamp, 2009). Access suggests a broad range of learning opportunities following universal design principles and practices to insure that all children can take part in activities. Participation means the teachers and adults promote belonging and engagement through both implicit and explicit learning experiences. In addition, inclusive program must have systems level of support and a range of service for children and families. The principles of access, participation, and support were the basis for a systems level theoretical framework.

### **Theoretical Basis for Inclusion**

The ecological framework of Bronfenbrenner (Guralnick, 2001; Odom, Favazza, Brown, & Horn, 2000) was the foundation for inclusive practice. This theory views the child developing amidst interrelated levels or systems. Each system was the context that

influences and promotes the growth and development of the child. The child, family, teacher, childcare setting, were all within the microsystem, the inner most layer (Bronfenbrenner, 1995). Interactions and experiences within the level were supporting the child and building a foundation for learning. These interactions, identified as proximal processes, create a ripple into the next system closest to the child, the mesosystem (home, quality of childcare, schools, religion). This contextual level includes the relationships between home, school, childcare and their stability as change naturally happens over time. For example, the quality of the childcare or early education experience can influence the growing child. Therefore consistent with the DEC/NAEYC Joint Position Statement on Inclusion, an inclusive environment must be of high quality. Although the child was not part of the mesosystem, the child's development was influenced by the evolving reciprocal relationships, processes, between the microsystem and mesosystem over time (Bronfenbrenner & Morris, 1998).

The next level, exosystem was the broader context of environmental influences, the neighborhoods, family networks, work places, governments, social welfare, and school boards. Again, the child may not be within this layer, the people making the decisions influence the child's development and learning. For example, the policies, rules and regulations that determine the structural and process indicators of quality environments or creating opportunities to access inclusive settings influence the developing child (Copple & Bredekamp, 2009). The outer layer, the macrosystem includes culture, values, laws, and ideologies. All components in the macrosystem interconnect and this determines the value placed on children and families in society.

These interrelated systems evolve and change as the child grows within the context of the family and community. Nothing remains static and time influences systems change (Bronfenbrenner & Morris, 1998).

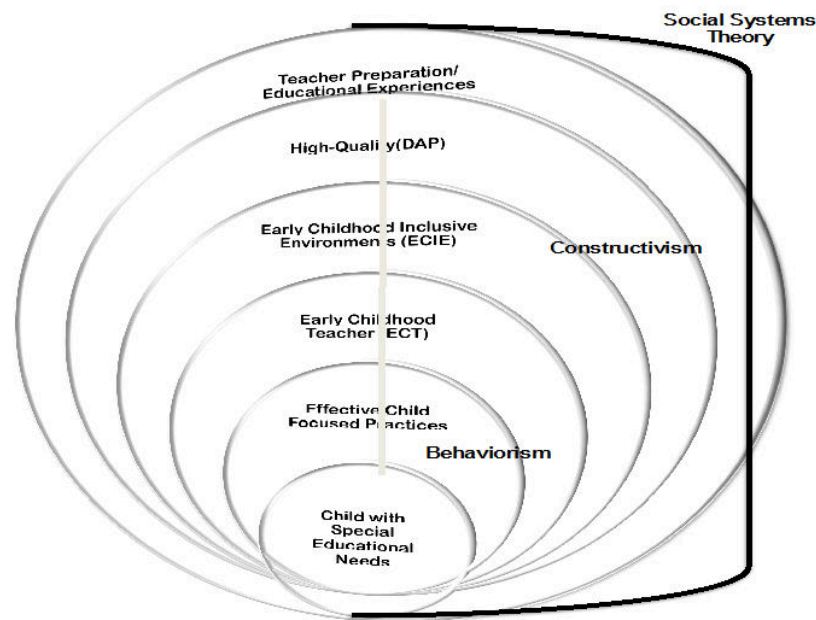
Odom and Wolery (2003) support ecological systems theory and its contribution to understanding the important relationships that influence each child's growth and development. Bronfenbrenner's ecological systems theory may be the overarching basis for inclusive environments, however a closer look can determine the theoretical approach within each system, specifically, the relationship between theoretical approach and effective practices. One single theoretical approach may not guide our knowledge and understanding of all that can and should take place in an inclusive environment. Odom and Wolery (2003) suggest a unified systems theoretical approach to understanding inclusive practices.

### **Unified Systems Theory**

In a systems perspective, inclusive practice was viewed from the outer layer focusing in towards the child. However, the child transforms the system based on unique individual needs. The child's special education needs create a wave or ripple through the multi-layers of the system and can cause interplay between perspectives and effective inclusive practices. A unified theory approach attempts to connect the differing views on best practices to promote engagement, learning, and participation. According to Odom and Wolery (2003), what does emerge is an understanding of child-focused practices. Therefore, early childhood teachers must have knowledge of a multiple theoretical perspective and determine the most effective child focused practices for inclusive early



childhood settings (Figure 1). However, practices occur best in the context of in a high-quality developmentally appropriate environment (Bredekamp & Copple, 1997; Copple & Bredekamp, 2009). Therefore, a unified systems theory approach connects social systems theory, constructivist theory, and behaviorist theory.



**Figure 1. Conceptual Framework: Unified Systems Theory**

Constructivist theory is the foundation of developmentally appropriate practice (Odom & Wolery, 2003). The child constructs knowledge as he/she acts in an on the environment. The child engages with materials and people creating reciprocal learning. The early childhood teacher prepares the environment for the child to interact and initiate learning facilitates active engagement across all domains (Bredekamp & Copple, 1997; Copple & Bredekamp, 2009). The early childhood teacher plans activities for the group as well as for each individual child. It involves both implicit (naturalistic strategies that

are child initiated) and explicit (teacher initiated) teaching strategies. Teachers act as mediators of children learning and scaffold with intentional teaching (Winter, 2007). However, according to Odom (2009) and Van Horn, Karlin, Ramey, Aldridge, and Snyder (2005) a developmentally appropriate environment was not enough to meet the needs of all children. Research on the effects of developmentally appropriate practice was limited and empirical research on specific effective practices for children with special needs was missing (Van Horn et al., 2005). A constructivist theoretical approach may be insufficient to meet the developmental and learning needs of all children. A more explicit behaviorist theoretical approach may be necessary.

Traditionally, early intervention (EI) and early childhood special education (ECSE) specialists disagree with constructivist theory and use a behaviorist theoretical approach (Dunst & Trivette, 2009; Odom & Wolery, 2003). According to Dunst and Trivette (2009). A behaviorist approach relies on data based decisions to implement specific effective strategies. The primary focus is the child, not the environment. EI/ECSE specialists provide direct instruction in separate exceptional children preschool classes or itinerant direct instruction services in early childhood settings such as childcare or Head Start (Dinnebell, McInerney, & Hale, 2006). Instruction was usually in a separate area at the inclusive site and sometimes (infrequently) in the classroom. In some cases, itinerant teachers provide consultation and training to the early childhood teacher (Kaderavek, 2009). The itinerant uses a behaviorist theoretical approach with the child in the context of a developmentally appropriate environment to improve the child's capacity in a specific skill area. A high-quality early childhood inclusive environments was

developmentally and individually appropriate following constructivist theory, yet instruction for some children requires a behaviorist approach. Therefore, three distinct theoretical models interplay as the early childhood teacher implements effective child focus practices, ecological systems theory, constructivism, and behaviorism.

With three strong intertwined theoretical approaches to effective practices, it was not surprising to find a practitioner, early childhood teacher, confused by the research and unsure as to the best or most effective child-focused practices to implement in an inclusive setting. According to Copple and Bredekamp (2009) an early childhood teacher may implement practices “superficially” not knowing when and how to implement effective practices to meet the individual needs of all children. They further encourage teachers to not take an “either/or” way of thinking but use a “both/and” theoretical approach to practices (p. 49). A multiple theoretical perspective therefore, unifies to create an “implicit theory of practice” (Odom & Wolery, 2003, p. 7). With this unification, a theme emerges; a practice must be child-focused. The child was the focus of the practice and it was specific to the special educational and developmental needs of the child. Therefore, early childhood inclusive environments must be high quality and incorporate theoretically based effective child focused practices.

### **Quality Inclusive Early Childhood Environments**

The quality of the early childhood education program was considered in placement decisions for children with special education needs yet teachers, parents, and service coordinators were often unfamiliar with indicators of quality in inclusive settings (Burton et al., 2002; Essa et al., 2008; Odom et al., 2000). Furthermore, according to

Early et al. (2007), inequalities exist over access to high-quality early childhood education for children with special education needs. This was interesting since including children with disabilities in community settings was not new. For example, Head Start has included young children with disabilities in their classrooms since 1972 when Congress mandated that 10% of the children served have a diagnosed disability (Odom et al., 2000). Head Start is a federal program and complies with mandates such as using an evidenced- based curriculum. Research in early childhood education includes Head Start and publicly supported programs since funding was available for ongoing evaluation of programs and assessment of children (Gallagher & Lambert, 2006). However, according to Harbin, Rouse, and McLean (2004) limited studies exist on quality inclusive early childhood education in childcare. Therefore, to understand quality inclusive environments, this review explores the structural and process indicators in public and community based inclusive environments.

### **Quality Structural Indicators**

Several comparative studies of inclusive and non-inclusive environments for young children examine the notion of different quality indicators for inclusive and non-inclusive settings. Buysse, Wesley, Bryant, and Gardner (1999) completed an analysis of 180 inclusive and non-inclusive programs in North Carolina using the Early Childhood Environmental Rating Scale (ECERS). The inclusive programs scored a higher overall rating on three indicators: teacher education, professional experiences, and teacher knowledge of skills. Limitations to this study include the validation of ECERS in

inclusive settings. The authors further cautioned that quality standards for children who were typical were insufficient for children with special education needs.

This was the case in the study by Gallagher and Lambert (2006) on quality inclusive environments and effective practices in Head Start classrooms. The measure of quality for this study used the *Assessment Profile for Early Childhood Programs: Research Edition II*, in 96 classrooms. Although the researchers discuss the limitations of only using Head Start classes, the results regarding inclusive practices improving development and learning and quality were interesting. Typical children in high-quality non-inclusive classrooms scored higher on measures of language, and social skills than typical children in high-quality inclusive classrooms. Children with special education needs showed improvement on measures of language and social skills in both low and high-quality environments. This may suggest a weak connection between high-quality early childhood education and improving development and learning. However, Gallagher and Lambert reported the limitations to their study when using the same quality measure for inclusive and noninclusive classrooms. Also noted in this study was the importance in recognizing the types of and severity of the disabilities of the children, percent of children with disabilities in the classroom, the specific practices implemented, and the teacher qualifications, can influence quality in inclusive classrooms.

A study by Buysse, Goldman, and Skinner (2002) looked at the structural quality indicator of teacher-child ratios and its influence on social interaction in inclusive and non-inclusive environments. Ratios in either typical or inclusive settings did not appear to have a negative effect on the interaction and socialization of children with disabilities.

The investigators in this study reemphasized the need for different quality measures for inclusive and non-inclusive settings. They also encourages future research explore process indicators as teacher child interactions, not just ratios. Process indicators may have a greater influence on quality and development and learning in an early childhood inclusive environments than structural indicators.

### **Quality Process Indicators**

Structural quality indicators were important in inclusive settings, yet teacher interactions and their use of effective practices were more meaningful in inclusive pre-k classrooms (Buysse et al., 2002). For example, when children engage in complex activities with materials and teachers interact using child-focused practices, all children show improvement. Furthermore, it was not the physical quality of the environment, but focusing on how and what children learn (Buysse et al., 2002). Effective practices implemented by teachers were meaningful indicators of quality in both inclusive and non-inclusive environments (LaParo, Pianta, & Stuhlman, 2004; LaParo, Sexton, & Snyder, 1998). Therefore, it was important to explore the research on specific effective practices implemented by the teacher in inclusive settings.

### **Effective Practices Early Childhood Inclusive Environments**

Connecting the research to actual specific practices was an ongoing issue in the fields of early childhood and special education (Dunst, Trivette, & Cutspec, 2002; Groark, Mehaffie, McCall, & Greenberg, 2006; Odom et al., 2000; Shonkoff & Phillips, 2000). Minimal research was available regarding the use of specific child-focused practices to improve development and learning in inclusive settings. Studies focus on

high-quality structural indicators that improve child-learning outcomes (Zellman, Perlman, Vi-Nhuan, & Messan, 2008). Yet, teaching strategies and practices were crucial in inclusive early childhood education settings.

The goal for all early childhood settings was providing successful learning experiences for all children including those with special educational needs. Effective practices were the particular strategies teachers use to enhance children's development. Practices were about how to teach, what to teach (Wishard, Shivers, Howes, & Ritchie, 2003). For the young child with disabilities, it was crucial to intentionally implement practices and specific strategies consistent with an Individualized Educational Program (IEP) or Individual Family Service Plan (IFSP) to increase skills of the child. Research exists on effective strategies that enhance learning, yet few were specific to young children in inclusive community settings (Odom et al., 2000). According to Odom (2009), a "distance" exists between knowing the research and actual implementation of effective practices in early childhood inclusive environments. The early childhood teacher may become aware of specific strategies (e.g. embedded instruction) yet acknowledges actual implementation of practices was inconsistent. Some teachers may not know what a practice was and why it was used (Lay-Dopyera & Dopyera, 1992). According to Buysse and Wesley (2006), and Wolery and McWilliam (1998), research was lacking on the early childhood teacher applying and implementing specific child-focused practices in early childhood inclusive environments.

The early childhood teacher sees the implementation of specific child-focused practices in the inclusive classroom the role and responsibility of the EI/ECSE specialist

(Odom, 2009). The early childhood teacher often takes a “hands-off” approach to implementing specific child-focused practices to improve a target skill for a child with special education needs. It becomes confusing as to who was responsible for implementing specific child-focused practices in early childhood inclusive environments. Odom suggests the early childhood teacher was missing guidance (or education) on how to teach children in inclusive settings. Early childhood teachers may have exposure to specific child-focused practices in their professional preparation, yet may lack experience in implementation (Buysse & Wesley, 2006; Winton et al., 2008). Implementation of a specific child-focused practice was frequently dependent on the EI/ECSE to teach the early childhood teacher (Odom, 2009). Then it becomes the decision of the early childhood teacher to determine when and how to implement the practice. This was complicated further by the teacher’s knowledge of theoretical approach and basic teaching stance (Leiber et al., 2000; Odom, 2009). A theoretical belief system, experiences, and professional preparation influences practices (Shonkoff & Phillips, 2000). Research suggests the early childhood teacher was unable to identify and embrace a particular theoretical perspective causing the inconsistency in implementing specific child-focused practices (Odom, 2009; Buysse & Wesley, 2006). Furthermore, teachers were not aware of specific child focused practices to implement in an inclusive classroom.

### **Child Focused Practices (CFP)**

Using a unified theory of practice framework can assist early childhood teachers to use specific evidenced based child-focused practice in inclusive settings. Child focused



practices were both implicit and explicit and promote learning for all children in inclusive settings (Wolery, 2005). This includes specific research based strategies for the specialist, itinerant teacher, and the early childhood teacher. The early childhood teacher needs clear, straightforward, simplistic child-focused practices to implement in the context of a quality developmentally appropriate classroom (Dunst & Trivette, 2009; Knoche, Peterson, Edwards, & Jeon, 2006; Odom, 2009; Odom & Wolery, 2003). Research based contingency learning opportunities must be carefully designed with the teacher and EI/ECSE (Dunst & Trivette, 2009; Sandall et al., 2005).

Yet, the research on implementation of evidenced based practices and strategies used by early childhood teachers in inclusive settings was limited since most of the research focuses on early interventionists and early childhood special educators implementing specific practices (Winton et al., 2008). Too often, the itinerant teacher or specialist use strategies outside the classroom that the teacher can implement within the natural setting. Therefore, it was important to keep intervention practices and strategies, practical, observable, and measureable (Dunst & Trivette, 2009; Fleming, Brook-Sawyer, & Campbell, 2010; Odom, 2009; Woods, Kashinath, & Goldstein, 2004). Dinnebell et al. (2006) suggest the role of the early interventionist, early childhood special educator, and itinerant specialists was to train and prepare the early childhood teacher to implement evidenced based child-focused practices in inclusive settings. In some situations and settings, special educators model, train, and assist teachers in implementing child-focused practices (Wolery, 2005). Since limited research was available on early childhood teachers implementing these practices, it was unclear as to the type of support provided

or needed for the early childhood teacher to implement child-focused practices. Johnson, McDonnell, Holzwarth, and Hunter (2004) emphasizes the early childhood teacher needs to assume a greater role in “teaching” the young child with disabilities yet the early childhood teacher may not be adequately prepared. The early childhood teacher must know the child’s special education need and in collaboration with the specialist, plan effective child-focused practices. However, do early childhood teachers have the education and experience to implement research-based practices? Odom (2009) strongly suggests the “tie that binds” the implementation effective child-focused practices were the teacher’s educational experiences. Teachers need to know how, what and when to teach children with special education needs. Therefore, the relationship between teacher educational experiences and implementation needs further exploration.

### **Teacher Education Experiences**

The early childhood teacher needs knowledge of effective strategies to assume a direct teaching role in early childhood inclusive environments (Johnson et al., 2004). Knoche et al. (2006) completed a large-scale study of early childhood educator’s role in inclusive settings and non-inclusive settings. This study used a telephone survey of 2022 randomly selected early childhood education providers, 32% from inclusive settings. Knoche et al. (2006) concluded the education of the early childhood teacher influences the quality in an inclusive classroom. In addition, the early childhood teacher’s perception of inclusive practices influences their educational experiences. This study further emphasized the early childhood teacher personnel preparation include knowledge of child development, children with exceptionalities, and effective practices. A

connection was beginning to emerge between implementing child-focused practices and a teacher's educational preparation.

### **Teacher Preparation**

An early childhood teacher must be adequately prepared to implement effective child-focused practices in any setting. According to unified systems theory, the outer layer personnel preparation, influences the teacher and the quality of the environment to implement effective practices. Essa et al. (2008) explored personnel preparation practices and the qualifications of teachers in inclusive environments. In this study child care directors, teachers and family early childhood education providers from Nevada responded to a questionnaire regarding their education level, specific education opportunities related to understandings types of disabilities, and quality structural indicators as classroom and center capacity, and teacher-child ratio. One predictor of successful inclusive practice was the education of the early childhood provider, and specifically coursework on disabilities. This was similar to findings by Mulvihill, Shearer, and Van Horn (2002) and Buysse, Skinner, and Grant (2001) since both studies found the early childhood teacher's basic knowledge of developmental patterns of all children prepared them to implement appropriate practices. Experience in addition to coursework was also important according to Hadadian and Hargrove (2001). In this study, early childhood teachers with previous experience with young children with special education needs were more accepting and willing to work with children in an inclusive setting. Surprisingly, Essa et al. (2008) did not find a close relationship between early childhood teacher's experience and effective inclusive practices. However, Proctor

and Niemeyer (2001), and Leatherman and Niemeyer (2005) found previous experiences in inclusive programs did affect teacher's attitudes and beliefs regarding inclusive practices. Therefore, education, experiences, attitudes and beliefs influence implementing effective practices in inclusive settings.

### **Teacher Attitudes and Beliefs**

A study by Buysse and Hollingsworth (2009) explore teacher educational preparation and teacher's perceptions and attitudes. This study suggests a teachers meaning and perception of developmentally appropriate practice and inclusive practices was an important part of the teacher preparation experience. Therefore, educational preparation of teachers for inclusive settings should address dispositions in addition to knowledge and skills (Buysse et al., 1999; Lieber et al., 2000; Smith et al., 1998).

Another issue becomes the confidence level of the early childhood teacher. According to Early et al., (2006), the early childhood teacher feels less confident with children with special education needs since coursework may not be sufficient for all teachers.

Perception of their ability to teach children with special education needs influences the implementation of effective practices.

Early et al. (2007) and McCurry (2007) investigated early childhood teacher's perception of their education and preparation for inclusive early childhood education. Both studies used observation and interviews to determine beliefs about teacher preparation and experience in early childhood inclusive environments. The results suggest a need for education that was more specialized to work with children with special education needs. Early childhood teachers and directors feel positive mentoring

experiences and specific coursework in collaborative practices should be a part of teacher preparation.

Perception of educational experience and an attitude of acceptance were important for implementing effective practice according to Leatherman and Niemeyer (2005). This qualitative study explored in-service teacher's attitudes towards inclusion in a pre-k setting. Results suggest teacher's perception of inclusive practice and knowledge of children's disability influence implementation of effective practices. Developing knowledge and skills was as important as developing a positive attitude of acceptance of the child with disabilities during teacher preparation. Proctor and Niemeyer (2001) also examined the beliefs of pre-service teachers completing their student teaching experience in an inclusive setting. This qualitative study indicated teachers with prior positive experience in early childhood inclusive environments influence their perception and their practices. Creating a positive belief in inclusive practices was part of personnel preparation but can be difficult to achieve. As noted in this study a negative personal experience described by one teacher, influenced her views of inclusion. Her initial concerns were that typical children did not benefit from inclusion. However, after experiencing a positive inclusive environment, her negativity diminished. Therefore, early childhood teacher's prior beliefs can influence practices.

The beliefs of the early childhood teacher were also the focus of study by Mulvihill et al. (2002). This qualitative study explored early childhood teacher's perception and beliefs on their training and experience implementing effective practices in inclusive settings. This study suggested a relationship exists between training and

experiences in inclusive settings. Training on effective practices and having experiences to implement practices improved their confidence level. However, this study noted the limitations of quantifying belief systems. Self-report surveys may not be an appropriate methodology when exploring teacher education practices. In self-report surveys, participants respond by telling only what they want you to know. Beliefs can change by restating the questions. Participant and researcher bias can influence results (Creswell, 2005). This study suggests further research to explore how teacher education may influence practices in early childhood inclusive environments. In addition, all of the studies address the specific qualification for teaching in early childhood inclusive environments. Should teachers have the same qualifications in addition to similar education and coursework?

### **Teacher Qualifications across Settings**

Teacher qualifications and educational experiences were very different between public (school based) and private early childhood inclusive environments (Early et al., 2007). In exploring teacher preparation of early childhood teacher for inclusive practices, research turned to the community college systems. The community college has an important role in preparing teachers for early childhood community-based settings such as childcare and Head Start (Early et al., 2006; Maxwell, Lim, & Early, 2006; Shelton-Colangelo, 2006). Early childhood associate degree programs provide a foundation of knowledge, skills, and practices meeting high personnel preparation standards through national accreditation (Early & Winton, 2001; Herzenberg, Price, & Bradley, 2005; Hyson, 2004). Yet according to a study by Chang, Early, and Winton (2005), few

community college programs were accredited or offer more than one course on exceptional children. The community college has a major role in the professional development of the early childhood teacher yet no research on training or courses specific to child-focused practices appears at the community college level.

An associate degree or Child Development Associate was also the minimum requirement to be a lead teacher in Head Start. Recently, new federal legislation requires 50% of lead teachers in a Head Start center have a bachelor's degree (bachelors) and assistants have an associate degree. By September 30, 2013 at least 50% of Head Start teachers nation-wide must have a bachelors or advanced degree in early childhood education or a baccalaureate or advanced degree in any subject, and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children (Head Start Act, 42 USC 9801). This was a result of the research on the connections between education and qualifications of early childhood teacher and the quality of children's experiences (Bogard, Traylor, & Takanishi, 2008; Herzenberg et al., 2005). However, the latest research does not support the need for a bachelor degree to improve learning for children (Bogard et al., 2008; Early et al., 2007). Yet, it was doubtful that minimally educated teachers (less than a bachelor's degree) will be prepared to connect new scientific research about early education and effective child-focused practices (Bogard et al., 2008). Since Head Start has a mandated 10% of its children with special needs be included in their programs, there was a need for additional education and professional development for the teacher to implement effective child-focused practices. Office of Head Start, Department of Health and Human Services recently initiated Head

Start Center for Inclusion. The goal of the center was to increase the confidence and competence of teachers, families, and administrators who were involved in inclusive Head Start programs by providing training and professional development (HSCI, n.d.). However, limited information was available on training for implementing specific child-focused practices. In review of the modules, training appears generic and training on specific child-focused practices and strategies for children with special educational needs was missing. The training may be inadequate to prepare the early childhood teacher to implement effective child-focused practices in Head Start classrooms.

In public pre-k classrooms, the early childhood teacher must hold bachelors degree and be highly qualified in the area of teaching (Chang, Early & Winton, 2005; Early et al., 2007). The area can be in Early Childhood Education, Child Development, Preschool Education, Birth-Kindergarten or Early Childhood Special Education (Maxwell et al., 2006). Yet, according to Chang et al. (2005), only 40% of bachelors program require a course in working with children in inclusive settings. Therefore, 70% of public school teachers felt unprepared for the challenges in implementing effective practices with children with disabilities. It was unclear if colleges and universities were providing coursework or practice in implementing effective child-focused practices across early childhood inclusive environments. DEC recommends specific standards for personnel preparation for inclusive early childhood environments, yet evidence was not available on the use of these recommendations by colleges and universities.

An early childhood teacher requires preparation, opportunities, and ongoing professional development to implement effective, scientifically based practices to address



the needs of all children (Essa et al., 2008; Baker-Ericzén et al., 2009; Bruder & Dunst, 2005; Proctor & Niemeyer, 2001). Yet, little empirical evidence has emerged on use of DEC recommendations on personnel preparation for inclusive settings (Early & Winton, 2001; Hyson, 2004; Scott-Little, Kagan, & Frelow, 2003). Research was limited on the early childhood teacher preparation to implement effective evidenced based practices in inclusive settings. Without adequate preparation, and knowledge of implementation of effective child-focused practices, can the early childhood teacher develop the skills of the child with special education needs in inclusive environments?

### **Summary**

In framing this discussion, it was important to explore how teacher educational experiences influence the implementation of effective child-focused practices. The teacher's use of effective practices improves a child with disabilities learning and development in an inclusive setting (Buysse & Hollingsworth, 2009; Chang et al., 2005; Shelton-Colangelo, 2006). High quality environments provide a natural setting for developmentally appropriate and individually appropriate programs. However, the early childhood teacher needs additional preparation to implement effective child-focused practices. The early childhood teacher must be adequately prepared aligned with standards such as NAEYC and DEC, and exposed to positive inclusive experiences. Teacher preparation must include experiential learning opportunities to prepare the early childhood teacher for implementing effective child-focused practices. The early childhood teacher can benefit from embracing a unified theoretical stance, having a

disposition of acceptance of all children, and educational experience that connects research to practice.

Additional research needs to explore the relationship between implementing effective child-focused practices and the early childhood teacher's educational experience in inclusive settings. Lay-Dopyera and Dopyera (1992) suggest teachers often use practices and strategies spontaneously and were unable to describe what and why they do something. To improve learning and development for the child with special education needs in inclusive settings, the early childhood teacher should become consciously aware of strategies used and able to document and evaluate the effectiveness of strategies. Gathering information on the early childhood teacher's perception of how they learned to implement effective child focused practices in inclusive environments can inform the teacher preparation experience. Therefore, to explore the relationship between teachers' education experience and the child-focused practices implemented in quality early childhood inclusive environments, the following questions focus the study.

1. What child-focused effective practices were implemented in quality early childhood inclusive environments?
2. How did early childhood teachers learn about these practices?

## **CHAPTER III**

### **METHODOLOGY**

#### **Design**

A qualitative descriptive methodology was used to examine effective child-focused practices used in classrooms with children with disabilities. Denzin and Lincoln (2000) suggest qualitative researchers who study things in their natural setting, can best explore the phenomena of interest. According to Sandall et al. (2002), “qualitative research has the potential to increase our understanding of children with special needs, their families, and those who work for and with them” (p. 130). The context of using everyday naturally occurring events can best reveal the meaning of the relationship between practices and teacher educational experiences. Using a qualitative descriptive method such as observation and interviews, allows the researcher to observe the actual events, describe them in rich detail, and add field notes within the context of a natural environment (Jackson, 2006).

A qualitative approach most suited to explore the relationship between teaching educational experiences and implementation of child-focused practices was an instrumental multiple case study method. An instrumental case study illuminates a particular issue such as teaching practices (Creswell, 2005). The case study method was frequently used to explore relationships between phenomena of study and frames naturally occurring events for a specific moment in time (Schram, 2006). Case study

“bounds” the phenomena for study. According to Shank (2006), a case study allows the researcher to see the world from multiple perspectives. Both the researcher and the participant can determine meaning of events such as actual teaching practices implemented. According to Stake (1995), a heuristic case study approach brings new meaning and confirms what was already known. Yin (1994) concludes a key strength of the case study method involves using multiple sources and techniques in the data gathering process. The researcher determines what evidence needs to be collected and what analytic techniques can best answer the questions for study. Tools of the case study include surveys, questionnaires, interviews, documentation review, and observation. This study used questionnaires, videotape recordings, and interviews.

Therefore, to explore the proposed research questions, a case study design was used to best illuminate the issue (Creswell, 2005). However, one case alone cannot reveal new understandings of the relationship between teacher educational experiences and implementation of child-focused practices in high-quality inclusive settings. Therefore, different high quality inclusive settings were explored and examined to reveal if any patterns or themes exist across settings. Using multiple case studies allowed the researcher to consider the voice and perspective of the individual teacher, examine emergent themes within the bounded system, and then cross connect themes across multiple settings. Exploring perceptions and themes across multiple contexts allowed further exploration to connect meanings and examine the possibility of new phenomena (Telis, 1997). Consistent with Telis, this method of cross case study analysis allowed

triangulation of the data within and across case studies to explore the central phenomena of relationship between teacher education and implementation of practices.

### **Research Sites**

For this research, multiple cases were selected from different settings to have a better understanding of the influence of teacher educational experiences and implementation of practices. This study explored six high-quality early childhood inclusive environments: two Head Start sites, two childcare centers; and two public pre-k classrooms from Forsyth and Davie counties in North Carolina. In North Carolina (NC), the Department of Health and Human Services (DHHS) oversees the Division of Child Development (DCD), which has established licensure requirements for public and private early childhood education programs. DCD has specific standards and guidelines for quality early childhood environments. These guidelines establish indicators for program standards and educational requirements. Each licensed program was given a quality star rating. Facilities were evaluated on “compliance history” as a minimum standard. Then to earn higher star ratings, “quality points” were awarded for enhanced standards in staff education and program standards. Program standard points were based on an evaluation of the daily environment that includes sufficient space for activities, variety of play materials, clean and comfortable play area, number of staff per child in addition to interactions between adults and children, children with other children, and children with activities and materials (NC Division of Child Development). Programs applying for the highest level (five star rating) were assessed using an environment rating scale.

The sites selected were inclusive and rated high quality (five stars). Head Start has included young children with disabilities in their classrooms since 1972. In addition, Head Start offered continuous professional development opportunities. This allowed the researcher to examine the connection between implementation of practices and educational experiences. The educational requirements differ for each Head Start classroom. All lead teachers must have at least an Associate in Applied Science (AAS) Degree with the goal for all lead teachers to have completed a Bachelors degree by 2013. Two Head Start classrooms were chosen in order to maintain anonymity of setting for the participants. The same executive director oversees both Head Start classrooms serving Forsyth, Stokes, Davidson and Davie County. One Head Start class was located at the Head Start office center, and the other was located at a public elementary school.

Two public pre-k inclusive sites were also selected from the same county. These classrooms were located in a school building for preschool exceptional children's programs. There were four inclusive classrooms at this site. The Itinerant Specialists, Physical Therapist (PT), Occupational Therapist (OT), Speech Language Therapist (SLT), have offices and rooms dedicated to providing therapy at this site. The public Pre-K programs were chosen to provide insight in their inclusive practices. Lead teachers were required to have at least a Bachelors degree and Birth-Kindergarten (B-K) Certification.

In selecting the childcare centers to participate, both classrooms were selected from the same center. This community-based center was NAEYC accredited and has several (three) inclusive classrooms. Teacher qualifications and educational requirements

were inconsistent in childcare settings since there were no requirements for educational qualifications to teach young children with special educational needs in inclusive environment. By selecting pairs, two inclusive classrooms or cases from each site, this reveals new insight within cases and across cases to explore practices and relationships to educational experiences.

### **Participants**

Six early childhood lead teachers who teach in high-quality (5 star) inclusive classrooms in suburban North Carolina acted as participants. These teachers were selected based on the following criteria. Each teacher served at least one (1) child diagnosed with developmental delays or identified disabilities such as speech and language, and have an Individualized Educational Program (IEP). The child with developmental delays was in the classroom for more than 50% of the day and the child must attend more than three (3) days a week and enrolled for at least six weeks. Six-weeks were the minimum period it takes for a young child and teacher to get to know each other (Winter, 2007). This allows a relationship to develop and provides an opportunity to observe the teacher-to-child interactions (see Appendix A).

Each teacher was named fictitiously for this study. “Isabelle” teaches in a Head Start classroom. She had earned her MAT and B-K licensure was teaching in both public and private early childhood settings for over 18 years. “Nancy” also was a Head Start teacher with 16 years of experience as a teacher with Head Start. She earned her AAS degree in Early Childhood Education. “Mikell” and “Jenny” teach in public Pre-K settings. “Mikell” earned her B-K Licensure that was “grandfathered” by the department

of public instruction in NC. She had over 15 years teaching Pre-K children, primarily children with disabilities. “Jenny” earned her MAT and B-K licensure and had over 30 years experience working with young children, specifically those with disabilities.

“Miranda” was a teacher in a childcare center, with 15 years working with preschoolers and three of those with children with disabilities in an inclusive setting. She earned her BS degree in a non-related field and has earned over 50 credits toward her AAS degree in early childhood. “Mariah” was the teacher at the same childcare center. She earned her BS in Human Development and B-K licensure. This was her second year teaching. All participants showed genuine interest in the study.

### **Procedure**

This study used a qualitative research approach to generate the data needed for an instrumental multiple case study design. A case study views the subject, in this case the early childhood teacher, interconnected within the context of the inclusive environment. This interconnectedness creates interdependency within the phenomena that can reveal meaning and understanding. This meaning was determined through an interview and observation process (Kvale, 1996; Merriam, 2002). The video observation was the primary method of data collection to examine the implementation of child-focused practices. The interview confirmed and clarified the frequency and contextual use of the practices by the early childhood teacher and explored the relationship of educational experiences (higher education courses, trainings, mentoring, experiences) that influenced implementation of the practices. The following procedure was followed.



**Recruitment**

Upon receiving approval from the Institutional Review Board (IRB) of University of North Carolina at Greensboro, the electronic recruitment letter (Appendix B) was sent to supervisors of five-star centers, Head Starts, and public pre-k programs from Forsyth, Davidson, Davie, and Stokes County in North Carolina (approximately 150 programs). Region 13 Resource and Referral Agency, Work Family Resource Center, provided an electronic email list. After one week and no responses, an additional letter was sent. The researcher received a response from the Executive Director of Head Start, Forsyth County More at Four Coordinator, Preschool Director of Davie County, Preschool Director of Forsyth County and four childcare centers. The supervisors sent letters of support for the project and provided email addresses of teachers who may be willing to participate.

**Questionnaire**

The proposed participants (18) were sent an electronic intent to participate questionnaire that outlined the proposed research (Appendix C) and an electronic consent to participate form. Only 10 responded to the survey. Of those 10, only 8 participants met the criteria for participation since not all participants served a child with special education needs. The researcher sent an email requesting a meeting to discuss the project, provide consent forms for the parents of the children in their classroom and answer any additional questions (see Appendixes D and E). Also, a hard copy of the consent form was signed in addition to the participant having their electronic copy. From the eight (8)

selected, six (6) teachers responded (a pair from each category) and a meeting was set up to pursue the study through video observation and interviews.

### **Video Observation**

Videotaping ensures descriptive trustworthiness and can stimulate recall and reflection from the perspective of the teacher (Maxwell, 2005). The video observations took place at different time intervals for a cumulative total of over 60 minutes in each classroom (see Appendix F). An experienced videographer recorded the teacher's implementation of practices during group or circle time, small group time, transitions, routines and free play. Since each setting was different, the researcher attempted to be consistent on the observed activities. The researcher and videographer acted as non-participant observers to avoid influencing the flow of the classroom for the teachers and the children. Initially children seemed distracted by the camera, however they seemed to forget about our being there after a few minutes.

The researcher made a sketch of each classroom as a frame of reference to observe the interaction in the context of the environment to assist with the video recordings. The field notes, video recordings, and classroom drawings were descriptive and concrete capturing events and dialogue within the classroom (Schensul, Schensul, & LeCompte, 1999). Field notes included reflective memos. Each teacher (case) was assigned a code and a "name" and with no information regarding setting, teacher, or child. Children were coded B1 (boy) or G1 (girl) for each case. Children with disabilities were coded the same. The researcher transcribed the video observations.

## **Interviews**

After all video observations were completed and transcribed for each classroom, the researcher scheduled an interview with each teacher. Prior to the interview, the teacher completed a demographic questionnaire (see Appendix G) regarding education and professional development specific to inclusive practices. The teacher shared the information with the researcher as part of the interview. A semi-structured interview protocol was followed to collect data (see Appendix H) as the teacher and researcher reviewed the video recording. The videotape encouraged dialogue about the specific practices implemented. Each interview lasted between 60-90 minutes and recorded using a digital audiotape. The interview protocol consisted of questions and probes to determine the teachers meaning and use of child-focused practices. In addition, the interviewer asked specific contextual questions such as educational qualifications, experience and teacher preparation and/or personnel preparation for implementing the observed practices. The interview protocol (see Appendix H) followed guidelines as described by Creswell (2005) and Kvale (1996). The researcher transcribed the interviews using HyperResearch Software. Both the video observations and interview provided detailed descriptive evidence of implementing child-focused practices in a five star quality inclusive setting. Field notes included reflective, analytic and theoretical memos to minimize researcher distractions and bias.

## **Methods of Data Analysis**

To analyze the data, an interpretative analysis approach was used for each case as recommended by Smith (2004). It was an inductive and interrogative approach to allow



currently working in the field of early childhood and pursuing her Bachelor of Science (BS) degree in Early Childhood. During the transcription process, the researcher developed frequent analytic memos to understand the practices. During this analytic process, the bracketing of child-focused practices began. In this bracketing and reduction, categories of practice appeared to be on a continuum of implicit (indirect, child initiated and least intrusive) to explicit (direct and deliberate using reinforcement). The Division for Early Childhood (DEC) National Professional Development Center (NPDC) on Autism Spectrum Disorder (ASD), and Developmentally Appropriate Practice (DAP) recommend specific practices to use in inclusive settings. These practices should be evidenced based, meaning interventions that were based on research and proven to be effective (Odom, 2009). Based on the research and recommendations of DEC, DAP and NPDC on ASD, a list of possible practices was generated as initial codes for analysis (see Appendix I). Each video transcription was then coded (see Appendix I) using the agreed definitions (see Appendix J). If during the transcription a new code emerged, it was added to the list. Both the researcher and research assistant coded the transcription. When the researcher and research assistant reached 80% consensus on 34 codes (see Appendix I), the initial phase of video transcription was completed. A chart was developed to look at possible emerging themes (see Appendix K).

The next step in this process was the transcription of the audio interviews. The researcher transcribed all interviews. When the interview transcription was completed, it was sent via email to the participant to comment and make any changes. In addition, the researcher sought clarification when needed. When the participants returned the interview

transcription (member checking), they were ready for analysis. Only practices identified and confirmed by the participant during the interview were coded. The researcher and the assistant coded the interviews using the same definitions of practice based on the observation. New categories or codes were added specific to educational experience. The categories were bracketed and reduced to college coursework, training and workshops, mentors or supervisors, observation lab experience, practice trial and error, and, collaboration.

Analytic memos, reflective memos and theoretical memos were developed for each case based on the interviews and the video observations. The memos revealed specific meanings of child-focused practices for each case. Also, separate analytic memos revealed the connection to educational experience. Themes began to emerge for each case on the next analytic phase.

**Delineating units of meaning.** The next step was to begin to create new meanings and themes for each case looking for frequency and redundancies. To assist with this process, HyperResearch was used to delineate meaning and create themes. Each case was named and a descriptive context emerged for each case. Outliers did emerge during this process suggesting further exploration (for example, no systematic procedures used for practices). Additionally, the analytic memos and field notes of educational experiences and teacher preparation were analyzed during this process looking for consistency or patterns within each case. New themes emerged for each case on approaches to learning in the context of the inclusive classroom. Additionally a

connection was beginning to form between practices and educational experiences. Next, each setting was paired looking for emergent themes for Head Start, pre-k, and childcare.

### **Level Two: Clustering Unit Pairs to Form Themes**

The next step was cluster meanings by pairing the units (Head Start, Pre-K, Childcare) looking for new themes and patterns. By pairing the units of practices by the setting and separately clustering the educational experience, dual themes emerged within each pair. In this phase, clustering and re-clustering took place looking for patterns or consistency. When no pattern was found in a pair, this became a theme as well. These new themes were then analyzed. The relationship between educational experiences and child-focused practices began to emerge as a phenomenon of study. The next step was to begin to triangulate the meanings and themes for each setting unit beginning a cross-case analysis (Stake, 1995).

### **Level Three: Cross-case Clustering to Form Themes**

During this phase each case was clustered and re-clustered looking for patterns and connections. Cases were clustered by demographic context such as years of experience, then clustered by implementation of practices, and clustered by educational experience revealing new themes or patterns. In this final analysis, new questions emerged for further explorations. Analytic memos continued during this re-clustering process to minimize bias and promote a greater understanding of implementing practices in inclusive settings.

### **Making a Composite Summary**

Finally, a composite summary of the process was completed demonstrating the relationship between implementing effective child-focused practices and teacher educational experience using the themes and analytic memos. This prepared the researcher for the final stage, interpretation of the data.

### **Trustworthiness**

For this study to gain credibility and demonstrate integrity, trustworthiness must be established. This includes practical and ethical considerations regarding performance as a researcher in the field and relationships with the participants (Maxwell, 2005; Schram, 2006). According to Schram (2006) practical considerations, include consequences of the researcher's role and presence, selectivity in attending to detail, and subjectivity.

### **Practical Considerations**

**Researcher's role.** The researcher did disclose her role and relationship to the study. As department chair of early childhood education from a local community college for the past ten years, responsibilities include teaching and overseeing the Early Childhood Education/ School-Age Education Associate in Applied Science Degree programs. This includes coordinating the education and instruction for early childhood teachers. As an early childhood educator and consumer, this researcher has observed successful and unsuccessful inclusive practices across settings. When informally questioning teachers about using specific practices, they were unclear as to what actual practices they used.



Disclosing the researcher's connection to this study establishes credibility and perspective. However, my presence may cause "reactivity" or potentially "contaminate" relationships (Maxwell, 2005). To prevent this, the researcher was identified as a student researcher pursuing a PhD in Specialized Education Service through University of North Carolina at Greensboro (UNCG) under the direction of Dr. Niemeyer. To avoid deception, any professional association or connection with the community college was shared when asked by the participant. Some participants had "heard" of me and asked questions about my relationship to the college. The researcher shared that the information gathered was for research purposes only under the guidance of UNCG and not connected to the college in which I am employed.

During this study, the participants, the setting and the children were not identified. The researcher followed protocol by initiating contact with the teacher to collect signed consent forms and respond to any questions about the study. Upon consent, appointments for video observations of the classrooms were made at times and days convenient for the participants. Acting as a non-participant observer and video recording practices may have influenced participants and children's performances. Therefore, reflective journals and field notes were reviewed to determine any bias during the observation. By collaborating with the participant and sustaining a presence over a four to five week period, the researcher became sensitive to the emerging events that occur in a classroom.

**Selectivity.** According to Schram (2006) researchers acting as fieldworkers, frequently note some things as significant and possibly ignoring others potentially

missing important events. To address the issue of selective attending, video observations were timed at different intervals, such as transitions, routines, group time, and free-play. The focus remained on the purpose of the study by gathering evidenced on child-focused practices used by the teacher in the classroom. Reflective narratives and memos during the observation were descriptive and accurate. To minimize selective viewing, the videotapes were reviewed several times. In addition, circumstantial events were noted and included in reflective memos to guard against reflecting expectations as opposed to actual events. Selective experiences can lead to subjectivity, another practical consideration.

**Subjectivity.** During fieldwork, the mere presence of the researcher and videographer means choices have to be made. The choices made during video observation and interviewing can lead to subjectivity. The researcher attempted to use efficient data gathering protocols that were clear and purposeful to minimize subjectivity. Therefore, feelings and emotional responses were notated in reflective memos. Peshkin (2000) recommended the researcher look for paradox and contradictions in memos. Therefore, memos included interrogation-asking questions such as, “What am I not seeing?” “Where am I not going?” “What questions am I not asking?” The intention was to narrow the field of vision as hidden agendas may rise to the surface when viewing a practice the researcher may not agree with.

To minimize subjectivity during the categorization and coding process, a research assistant separately categorize themes and codes. This should demonstrate dependability and trustworthiness of the analytic process.

## **Ethical Considerations**

**Confidentiality and deception.** Participants were not deceived in any way by this study. They were clearly informed of the purpose of the study and the role of the student researcher. The participants have access to video observation data and frequently asked questions about the research. Most participants wanted the researcher to come back and video record again as they “enjoyed” the experience. After the interview, the participants were asked to confirm the wording when they were transcribed.

The researcher obtained signed consent forms from participants (Appendix D). These consent forms were approved by the Institutional Review Board of the University of North Carolina at Greensboro (UNCG) and, along with the digital audio and video files, will be kept in a secure location in accordance with the IRB requirements. Transcriptions and analyses of the data will be stored on a password-protected computer, in accordance with the IRB requirements. By using two Head Start settings, two childcare settings, and two public-pre-k settings, participants had anonymity.

**Risks.** This study poses minimal risk to the participants since they were not identified by name or setting. There was no risk to the child since observation was of the specific teaching practices not the child.

**Benefits to participants.** There were indirect benefits to participants in this study since participants had an opportunity to view themselves implementing child-focused practices and “see their children.” Upon conclusion of the study, each participating teacher received a \$35.00 certificate to Barnes and Noble.

**Benefits to society.** The purpose of this study was to explore the implementation of child-focused effective practices used with young children with disabilities in a high-quality inclusive classroom. The exploration revealed the use of practices in selective settings and the influence of the teacher educational experience from the viewpoint of the teacher. This can add to the research on personnel preparation needed for teachers working in inclusive early childhood settings.

## **CHAPTER IV**

### **RESULTS**

#### **Overview**

The purpose of this study was to explore the relationship between teacher education experience and child-focused practices implemented in quality early childhood inclusive environments. Using a multiple case study approach, the following questions focus the study:

1. What child-focused effective practices were implemented in quality early childhood inclusive environments?
2. How did early childhood teachers learn about these practices?

Six teacher cases provided insight for this exploration revealing their practices and educational experiences through questionnaires, observations, and interviews. The demographic context included information about their classroom, how many children and how many children with special educational needs were included in their classroom. They also provided information on the curriculum implemented in their classroom. Their years of education, years of experience or training provided contextual data for analysis (see Appendix A). The video-observations and interviews were another source of rich description giving meaning to child focused practices implemented in the classroom. When the teacher viewed the practice, they added confirmation of the practice and related the practice to their educational experiences.

Each case presents its own story and provides opportunities for analysis using a modified phenomenological approach to code, cluster by combining codes, and bracket the data to create themes (see Appendix I and Appendix J for codes and definitions). The first step of the analysis was individual case analysis. Based on the video-observations and interviews, four categories emerged, demographic context, implicit practices, explicit practices and educational experiences. In this phase, units of meaning and themes based on analytic memos and coding transcriptions emerged. This was a clustering and re-clustering process using Hyper Research Software and new units were formed based on frequency of implementation of practice observed during the video taping and confirmation of the practice by each participant during the interview. The new unit clusters were bracketed to determine themes of child-focused practices implemented in the classroom. In addition, educational practices were clustered and bracketed within each child-focused practice theme. Next, the second level of analysis paired the cases to determine similarities and differences. Each case paired within its setting (Head Start, Pre-K, Childcare) creating connections. The third level of analysis was cross case clustering, looking for connections and patterns confirming similar themes. The final step was making a composite summary of emergent themes connecting the implementation of child-focused practices to educational experiences.

## First Level Individual Case Analysis

### “Isabelle”

#### Demographic Context

Isabelle was the lead teacher in a high-quality five star Head Start inclusive classroom located at an elementary school in a suburban county. This class was unique since it was the first time Head Start and Title I were blending funds. This was Isabelle’s first year teaching in this Head Start classroom (five months), however she had 18 years teaching preschool age children in public and private community settings. Four of those years were in a More at Four pre-k classes that included children with disabilities and children whose primary language was Spanish and children considered at risk. She was bilingual and used both English and Spanish in her classroom. Prior to this experience, she also worked in community childcare centers teaching infants and toddlers for three years, taught kindergarten, and first grade in a public school setting. Isabelle’s undergraduate degree was Bachelor of Science in Secondary Education, Social Studies. She recently completed her Master of Arts in Teaching Birth-Kindergarten, which included licensure. She also reported she had extensive training on the *Early Childhood Environmental Rating Scales*. In addition, she had training on *Creative Curriculum* and *Foundations* (see Appendix A).

Isabelle used *Creative Curriculum* and appeared to understand child-focused practices. During the interview, she was asked the meaning of child focus practices. “Child focus practice was taking your clues from the children . . . (Child focus) was interesting meaning and relevant so you take cues from them.”

**Setting.** The classroom was located in the kindergarten wing, has outdoor access and close to the front of the school. There were 15 children in the class with one identified as having special education needs for speech and language and another child was identified yet the IEP meeting had not taken place. Four of the children's first language was Spanish. Isabelle worked closely with her assistant teacher and she reported they have an excellent relationship.

The classroom was large and includes a sink and a bathroom for the children. On the first day of observation, the room was arranged with different learning centers: (a) art area with an easel, (b) music area that included instruments and a CD player, (c) writing area with paper and pencils and crayons, (d) computer area, (e) dramatic play, (f) large and small wooden blocks with accessories such as people and cars clearly labeled on shelves, (g) book corner with pillows and soft items, (h) an area for manipulative and games including math, and (i) science area that includes plants and other items. A large area rug with letters and shapes was located left of center for large group circle time. There were four small tables for groups of four to six. The teacher has an area in the corner but no teacher desk was visible. The children have cubbies for their belongings. The children's artwork was displayed around the room at and above eye level in addition to some commercial materials as letters, numbers, words and rules. The calendar was in the circle area with children's daily work jobs listed.

**Video observation.** The observation took place during free time, in the morning and before lunch. The children had just transitioned from breakfast into center time. There were 14 children in the morning and 16 later on. All children were engaged in



activities at different centers. Two girls were block building, three boys playing with manipulatives building three then four were making masks at the art center and one was painting, and two were making paper chains with the assistant teacher, and one was making a book at the writing center. Before lunch the children were in large group for gross motor play. They transitioned into two smaller groups with each adult taking the lead of a group. One group was dancing and listening to the music and the other group was playing a beanbag toss game. Overall, during the 60-minute videotaping sessions, the researcher observed practices during center time, transitions, and group time.

### **Themes**

The videotape was reviewed several times to determine child focused practices used by Isabelle. The practices were coded (see Appendix I) and clustered aligning with the category code sheet (see Appendix K) to identify themes. For example, Isabelle asked open-ended questions and had children respond to “tell me.” She had them problem solve for everything even trying to do the tape for the masks. She used plan do review strategies, and intentional teaching with letters and numbers. She challenged children to make the right choices by having them follow rules and practices. Isabelle used implicit practices that were developmentally appropriate and individualized to the child with disabilities. During this process, practices she implemented most frequently were bracketed into themes. The themes that emerged were: teacher acknowledgement and recognition of child success; developmentally appropriate practice (DAP) of integrating concepts and content into play; DAP of scaffolding and building learning through asking open-ended questions; and teacher individualizing and adapting activities for children.

When asked about her educational experience connected to her practices, she related her experiences in college, training, and relationships. Consistent themes emerged connecting the practice to educational experiences (see Table 1). The next section discussed the themes for implicit practices and the educational experiences connected to practices.

**Table 1**

*Isabelle Themes*

Category	Child Focused Practice	Educational Experience
Implicit	Uses acknowledgement and recognizes children's success	Acknowledges her relationship with her mentor and supervisor  College coursework and training on DAP
Implicit	Integrates concepts and content during play with incidental teaching moments	Connects integrating concepts to her trainings and workshops on DAP
Implicit	Scaffolding to build knowledge through asking open-ended questions	College coursework and the ability to practice what she had learned
Implicit	Individualizes and adapts activities for each child	Trainings on DAP and college coursework

**Implicit CFP.** *Isabelle used acknowledgement and recognizes children's success.*

In a developmentally appropriate environment, a teacher acknowledges and encourages children's efforts to complete tasks and follow directions (Copple & Bredekamp, 2009). In the first observation, Isabelle moved from child to child during free play. It began with the boy painting, "Wow that's fantastic. Look at all those colors. Let's see where we can put it to dry." During this exchange, she made direct eye contact examining his work and

he was smiling and wanted to share it with his peers. They too acknowledged his work with nods. As she, fluidly moves to the writing table she states, “good writing.” Even though interrupted by another child, she acknowledged the child respectfully saying, “I’ll be right back.” Moving to the boys as the blocks seemed to fly off the table, she commented.

When they go on the floor, what were you suppose to do? [*I didn’t do it all*]. If you have a helper, he can pick up too. See, thank you. If you don’t pick them up someone will have to. Look he made 25 wide, can you add these and make more than 25. Good. Thank you. (Video Transcript)

In this example, Isabelle used positive guidance and acknowledged the boys’ success then redirected them to appropriate behavior. In reviewing of the videotape, she made several comments to children. Moving back to the writing table, she acknowledged a child’s writing in his book, “Look (holding it up and sharing with assistant teacher). Here let’s try this (as she gets the camera). I’m getting a camera to take pictures. Wow.” With her camera, she moves to the block center as the child stands up and waves her to their structure, “That was wonderful. Very nice. You used both kinds of blocks (Video Observation).” The girls smile but get right back to work on their structure. As Isabelle continues to move around responding to needs then settles at the mask-making table. A boy comes to her with the paper chain he has been working on with the assistant teacher, “This was nice tell me about the pattern.”

During the small group indoor beanbag toss, she also used positive guidance and acknowledgement for their compliant behavior, “Now take your turn, that’s it. Good. Get behind,” and “Thank you for helping him and getting that (beanbag)” (Video

Observation). These practices were for all children and not just the child with disabilities. However, during the beanbag toss, she used recognition as well as individualized instruction with B2 (child with language delays). “Try one more time B2, then we can go on the carpet and play alligator . . . B2 try again. Perfect. Wow, a little higher. Want to try another one . . . you got it.” (Video Observation)

After viewing this practice on the video, during the interview Isabelle pointed out her use of acknowledgement and encouragement giving specific feedback as a frequently used approach to teaching.

So instead of saying that’s wonderful and great say a specific comment like you must have spent a lot of time picking out your colors or I like the way you mixed in the blue with the green or I like the way the brush strokes go instead of just swishing over the paper. (Interview)

As we looked at the mask making during the interview, she pointed out how the mask was their work and deserves acknowledgement.

I said if he liked it that way. If you did it that way you must like it so that’s good. It didn’t matter for you do it for yourself not for me. So, it’s your art and if you like it then that’s success.

She believed acknowledgment included providing feedback, “So the feedback comes quite often. They get it using what they made. In this class they get feedback” (Interview). Encouragement was used together with another practice, integrating concepts and content during play.

*Isabelle integrated concepts and content during play with incidental teaching moments.* According to developmentally appropriate practice (DAP) and Division for

Early Childhood (DEC), child focused practices include planning the environment so children can be engaged with materials to enhance learning opportunities (Copple & Bredekamp, 2009; Sandall et al., 2005). These were incidental teaching moments when the teacher extends learning into content area. Isabelle used incidental teaching methods and language expansion.

During the video observation, Isabelle approached the three boys at the manipulatives who were building with small blocks and integrated math.

This way and this way. You can build 25 up or 25 this way . . . He made 25 [*wide on table*], can you make more than 25? . . . BC can you pick up 5 and see what you have. That's it, if everyone picks up five how many will be left? 5, 5 and 5. (Video Observation)

Later to the children working at the chain table Isabelle commented, "Tell me about the pattern. You have two greens." When Isabelle and the researcher viewed this practice, Isabelle notes.

Looking at the blocks counting them. Integrating the subject matter into their play. Having the play teaching the concepts so they don't know they were learning math they just think they were learning blocks . . . math was integrated throughout the day in real life situations and that's about all the lesson plans says. Then I will put information like numbers 0-5 or focusing on counting and then you try and bring out the math in all the room around all the day, integrating math in all their activities. (Interview)

During the video observation, Isabelle encouraged children to write and spell using their knowledge of phonemic awareness. As G1 interrupted, showing her work to Isabelle, she asks for help with spelling, "You want to write person. Person starts with 'p'." When asked about the writing center, Isabelle discussed

the purpose of a writing center. She describes the importance and how it needs to be individually appropriate for all children.

They like to write in those books . . . And again, on the individual levels, some I have to spell the letters for them and they can write it or some we can do the sounds. With reading, you can say sound it out and write and with some, they say the word and you write it for them . . . So you're developing print awareness and phonemic awareness just on whichever level they were on. (Interview)

Isabelle frequently asked questions to expand language during the observation, "How were you going to keep it on? Let see. What can you use?" This was also the case during the musical freeze game, "Listen to the music and freeze on the letter and tell me what letter. Lets march, marching on the letters" (Video Observation). This was particularly useful for B2.

While waiting in line, an opportunity emerged for incidental teaching moment with a small group of children. Isabelle commented on this during the interview.

If someone was commenting on the wall, we have a plant, one of those at Christmas and we put tape on the wall. It grows wildly for 3 weeks and we have been marking on the wall how high it gets. And, I guess someone commented on how high it was and I pointing out the marks on the wall where we have been tracking the growth of the plant . . . I guess its ongoing scientific observation. (Interview)

As Isabelle integrated concepts during, she also used scaffolding and asked open-ended questions.

*Isabelle used scaffolding to build knowledge through asking open-ended questions.* In a developmentally appropriate environment, scaffolding was "providing assistance and/or supports to enable each child to master a challenge just beyond his

current level” (Copple & Bredekamp, 2009, p. 154). This was also a recommended practice with Division for Early Childhood to promote active engagement and interactions within the environment to promote skills, “opportunities were provided for expansion and elaboration” (Sandall et al., 2005, p. 86). This was a very noticeable practice, and questions were frequently asked during the free play.

In reviewing the video observation, mask making was an example of this practice. As the child came over to Isabelle and showed his mask she asked, “What if you looked at one eye and it was taped?” While holding mask, Isabelle asks questions:

Let’s see if this works. What do you think? Look in the mirror. H what do you think? Plan what you were going to do. Where do you want the eyes to go? Look at this one [points to mask]. Take that to the mirror. That’s like M’s. (Video Observation)

Later on returning to the mask table, “I like this. How were you going to keep it on? Let see. What can you use?” As another child comes to the mask table, Isabelle queried.

Let’s see now. You’re going to make a mask. What about your eyes? What do you need? What about his paper? [Points to clear plastic.] Did you get the tape . . . Look in the mirror. Does it work? (Video Observation)

When asked about this practice during the interview Isabelle responded,

Questioning, what and why, what can you do kinds of questioning. Ah um, which was from early childhood. But you do that. You don’t just put on the mask you talk about it. (Interview)

During the block building, Isabelle went over to the girls and spoke to them. She was increasing their knowledge and challenging them to expand on their play. “There, outside under the bridge. This was a house for animals [takes picture]. Look here were some more things you can use [gets a few animals].” In viewing this practice, Isabelle felt strongly she frequently used scaffolding.

I asked open-ended questions and I ask questions with more than one answer. I ask how and why or explain what you did in more than one or two words. To get them to talk to build brain language, to think. (Interview)

Isabelle elaborated as she used scaffolding as a means to individualize her practice.

I try to do it as much as possible because they all were at so many different levels. For example, this child was walking back from class and looked up at the classroom and said 126 and that was 126. So, he was saying 125, then 126. So we checked and knows all his numbers up to 200 too. Um, but then we got some that 3 throws them off. So, you have to support them where they were. (Interview)

*Isabelle individualized and adapted activities for each child.* The child with disabilities (B2) and the child (B1) recently identified were included in all activities.

Isabelle was aware of the IEP for B1 and tried to include him in all activities and individualize and adapt the activity as needed.

Oh so close B2 [wanders away, twirling, teacher retrieves B2] Let’s stay in line and wait your turn [B2 touches flowers] . . . [B2 swayed and moved up front for his turn]. B2 wait your turn. Go behind G [physically helped him move behind. Now pick it up. Here we go. Now get back in line. Good. Now that was great. (Video Observation)

When we discussed this practice, Isabelle remarked,



With B2, you have to direct him just a bit because he functions better in a small group than a large group. So, if I got some of them out of the way he could concentrate on what he was doing. (Interview)

During the interview Isabelle discussed individualizing and adapting practices for B2.

This was a child focused practice B2 was doing some of that. He gets more turns than some of the other kids. You look at their ability and along with the observation you were looking at something interesting meaningful and relevant and what you can do to make him successful.

When inquiring about documenting a child-focused practice with B2 or all children, Isabelle admitted she did not document practices “I know I plan to but I’m bad at that.” She used the camera to document children’s work and uses this as authentic assessment to individualize practices.

It helps you know just what they were doing. It gives us a chance to document I guess sometimes you can’t write down and describe everything or exactly what you’re seeing but the camera will get the picture . . . So, you can plan for the individual based on what you see in the record based on the pictures. (Interview)

Isabelle was very willing to individualize and adapt the environment to meet the needs of all children. During this discussion, she admitted she did not document practices.

As each practice was observed and discussed, Isabelle connected the implementation of practice to educational experiences. Isabelle frequently repeated her college coursework and DAP training. Themes emerged emphasizing this connection to college and DAP training.

**Educational experiences.** Isabelle connected her use of implicit child focused practices to her educational experiences (see Table 3). She felt most of her practices were

directly related to her college coursework and trainings on DAP. Her use of acknowledgement in recognizing children's success, integrating concepts during play, scaffolding and individualizing practices were influenced by her college coursework. Therefore the following theme emerged and connects each practice to her college experience

*Isabelle felt her college coursework and training on DAP influenced implementation of implicit practices.* It seemed difficult for Isabelle to isolate a specific class or training activity that influenced her strategy of acknowledging children's success.

The development, all the things, I think I didn't put down [*response on educational survey*] the Foundations training, but all the trainings I had when the More at Four first started and then all the developmentally appropriate practices. I was first introduced to that at FMC. (college (Interview))

Training on the ECERS Isabelle felt contributed her integrating concepts through play,

Since I took the training and got to talk to the people in Chapel Hill directly, everything you do in the child's environment, from the ECERS, I learned the environment was for the child and they learn through play. (Interview)

Isabelle used play to develop knowledge and skills. Her coursework in addition to training was an opportunity to scaffold. She had a strong foundation at both of her colleges on using a theoretical approach, such as Vygotsky to scaffold learning.

They (college) explained why it worked. You learn the why. This was good it works, but they explained all the theory behind it and the why and it reinforced the good practices. (Interview)

Isabelle continued this theme as she discussed individualizing and adapting activities for each child.

If you were doing DAP for the age of the children and what's appropriate for the individual children your including children. What inclusive was, was planning for the individual children. At the time, I didn't know that, but when I went to college, BK, a lot of what I had been doing was individualizing (Interview)

Isabelle's thoughts included coursework, trainings, and having a mentor prepared her for implementing developmentally and individually appropriate practices in an inclusive setting. Her relationship with her mentor and supervisor was an additional educational theme influencing practices.

*Isabelle acknowledged her relationship with her mentor and supervisor influenced implementing developmentally appropriate practices. Isabelle first learned of DAP from her supervisor and she became a mentor.*

So she was really big into developmentally appropriate practices. So that was the first I heard of that. Then my first job, the director was really big into that also (B). Back then she was an important person and she would check. So I would read the book (DAP) and check to make sure I was doing what I was learning. She taught me a lot. (Interview)

For Isabelle, it also meant you had to practice what you learn to be successful implementing any practice.

So your training you have and opportunities to implement your training and implement the practices . . . Having the opportunity to practice to see what works and then reflective thinking about it. (Interview)

Isabelle seemed confident in her teacher preparation experiences in addition to having training in specific topics such as ECERS or Foundations. She also felt her supervisors and mentors allowed opportunities to practice what she had learned.

### **Summary**

Isabelle was an experienced pre-k teacher with a Masters in Birth-Kindergarten teaching in an inclusive Head Start classroom. She used the *Creative Curriculum* and demonstrated an understanding of child-focused practices. During the time of the observation and interview, only one child having special educational needs in language has an IEP. After completing analysis of the interviews through analytic memo, transcription of interview and video observation, four themes emerged regarding the implementation of child-focused practices (see Table 1). Isabelle implemented implicit practices that occur naturally in an early childhood setting. She followed developmentally appropriate practice acknowledging and recognizing children's success, integrating concepts into play, scaffolding and building knowledge through asking open-ended questions, and, individualizing and adapting to meet the needs of the child. Her clear and consistent theoretical approach seemed to dominate her thinking and practices. Mentors, trainings and college preparation grounded her perspective and influenced her choice of using developmentally appropriate practice.

### **“Nancy”**

#### **Demographic Context**

Nancy was the lead teacher in an inclusive “EC” classroom of three and four year olds in a high quality five star Head Start center in a suburban setting. Her classroom was

housed at the main Head Start office that included 10 classrooms. She has 16 years of teaching experience in preschool, all at Head Start. In 2005, she earned her Associate in Applied Science degree in Early Childhood from a community college. Nancy was asked her meaning of child-focused practices during the interview.

I am going to be focused on each child individually. Focusing on each child as to where they were and to know what the next milestone was. Know what activities that kind of enhance upon based on research the activities that move children from one milestone to the next. (Interview)

She indicated she has not had any specialized training on implementing child-focused practices (see Appendix A). Nancy used the *Creative Curriculum* in her classroom.

**Setting.** There were 16 children in this inclusive classroom with four identified as having special educational needs; two have IEP's for speech and language only (G3, G4), one (B1) identified as having Autism Spectrum Disorder (ASD), one (B2) identified as Developmental Delay (DD). The children with disabilities receive services in small groups in the classroom twice a month by the Speech and Language Therapist (SLT). Additional services were provided in a separate classroom consistent with the IEP. On some occasions, the SLT read a story to the whole class. Nancy had one full time assistant plus an AmeriCorps Volunteer who assisted in the morning and or when available. This was the first year Nancy has taught this class at the Head Start center. She has however, taught inclusive classes at other sites. Two years ago, she taught a More at Four/Head Start class at a community childcare setting.

The classroom was large with a bathroom in the hallway, shared with another class in addition to a bathroom in the classroom. The physical environment was

organized into several centers for small group and individual play. Upon entering the classroom several centers were clearly identified and separated by low shelves: (a) three types of blocks and accessories, (b) manipulatives including stacking and connecting items, (c) craft area with an easel, (d) dramatic play with several types of clothing, (e) computer for individual play, (f) science area with natural items in addition to discovery items such as magnets, (g) two quiet book areas, (h) writing area with pencils, markers, letters and different types of paper, (i) small teaching table for assessment with children, (j) puzzles and games, (k) circle time mat and music area, and (l) sand table. There were five rectangular and round tables for 4-6 children. Children's artwork was displayed in addition to rules for behavior, commercial letters, commercial pictures, and numbers. The calendar was located in the circle time area with children's daily jobs posted. The schedule for the day was posted as well. The centers have Velcro attached delineating how many children was allowed in each center.

**Video observation.** The researcher and videographer arrived at 8:30 and children were having breakfast. There were 14 children present. Nancy and her assistant were serving children breakfast at the tables. Nancy moved from table to table asking question about their breakfast and talked about their food. She seemed to move to all the children with special education needs as a cue to the researcher. After breakfast, children transitioned to group time then transitioned to play in the centers. During the 60-minute video observation, the following activities occurred; breakfast, transition, circle time, and center free play time.

## Themes

Consistent with the previous case, the videotape observation was reviewed several times to determine child focused practices used by Nancy. The tape first was reviewed to determine the category of implicit and explicit teaching practices. Next, the practices were coded, then, clustered for themes. Although the environment was clearly developmentally appropriate with clearly identifiable centers and open-ended materials, Nancy primarily used explicit, direct and deliberate, teaching approaches. Several themes emerged during the coding analysis; using guidance and redirection with clear specific choices, using recall and response with prompts, and embedding instruction across activities. One implicit theme emerged, using social contextual conversations. Nancy felt grounded in her community college educational experiences and implemented practices she had learned through that experience. She acknowledged modeling after the itinerant teachers but does not make a clear connection to the practice. Consistent with Isabelle, Nancy lacked a systematic procedures and documentation (see Table 2).

**Explicit CFP.** *Nancy used positive guidance and redirection with clear and specific choices.* DAP and DEC, recommend teachers need to guide and support children as they develop self-regulation (Copple & Bredekamp, 2009; Sandall et al., 2005). Guidance consists of establishing clear limits with the children and offering choices. At times, choices were direct and limited to insure the safety of others. If a teacher overuses guidance strategies, an atmosphere of control develops and children do not develop self-regulation skills. Children can become dependent on extrinsic control (Copple & Bredekamp, 2009).

**Table 2***Nancy Themes*

<b>Category</b>	<b>Child Focused Practice</b>	<b>Educational Experience</b>
Explicit	Positive guidance and redirection with clear and specific choices.	College classes prepared her to use guidance
Explicit	Used recall and response with prompts and cues to build knowledge	College classes supported what came naturally  Connects her practice to modeling and collaborating with the itinerant specialists
Implicit	Socio-contextual conversations and social narratives to guide behavior	Related her use of socio-contextual communication strategies to college coursework, her field experience, and practice.
Explicit	Embedded instruction across activities and routines for her children with disabilities	Learns from her college experience then implements the practices to see if it fits.  Questions her ability in implementing practices and seems to lack confidence in using practices with her children with disabilities.

In this classroom during the video observation, Nancy used clear directions and instructions on what to do, when to do it and how to do it during breakfast, transitions, and group time with positive reinforcement. “Where do you want to go, you have a choice, here or here? Here, want to sit here [B1 points and sits at table with breakfast].” Also during breakfast she moved across the room to B2, “B2 was that how we drink our milk [licking milk in cup]. No, we pick our cup up [holds cup and B2wiggles]. B2 you need to go to the bathroom, then you need to clean up.” To the girls in the back table, “I



need you to finish up and clean up your area. Were you done yet? Were you going to throw it in the trash or dump it [full milk glass, G3 dumps it]? Ok thank you.” This was a familiar pattern during breakfast and the question “Were you finished?” was the signal to clear off, wash hands and go to circle or bathroom (Video Observation). Most children followed this routine without needing guidance or direction.

Nancy went to the breakfast tables and guided children into expectations.

Were you finished? Were you ready to clean up? [No response] . . . Do you need anything? [Nancy moves to side table] you finished? Clear off and wash your hands . . . Were you finished ... B2 where do they go [meaning plate and cup]? What do we have to do? [She points and directs him to the sink.] (Video Observation)

While transitioning and getting ready for circle time, several direct guidance procedures were used. She sang most of the instructions to a familiar melody.

Let's be safe :: All my friends were on a square ::: la la la [shutting music off].  
Have a seat on the carpet ::: [all were on the carpet but B1, at table and B2 bathroom]. Ready, [sings and signs] the more we get together:: (Video Observation)

With B1 (ASD) and other children with special education needs, she was very direct.

B1 ready to listen. Look at me B1. Right here, look at me [he looks and screams]. To B1, I know you were upset. Where do you need to look? [B1 hides face down]. Can you see like that? [Stops screaming and looks]. Thank you. (Video Observation)

Nancy and the researcher discussed this practice used with the children during the interview. She was familiar with her practice and felt comfortable using it with the children.

I'm trying to make sure that everyone was accountable for themselves. Um, trying to move them from one activity to the next without a lot of confusion or commotions. So, I try and give each child individual attention and kind of letting them direct themselves while directing them at the same time. Yet they still, I feel I was supervising all the rest of the areas. (Interview)

She used the singing for transitions and specifically to provide direction. In the interview she shared.

That to me at this age, the singing, they get it better, the directions, as long as you sing it like singing the directions, we're sitting on the carpet, it's time to go outside, something to let them know what's coming next, or what was expected. A lot of it in song seems to work best for my 3 year olds. (Interview)

Nancy discussed using this strategy with her children with disabilities.

I just redirected him, tried to have him make eye contact with me. Once he made the wise choice, I praised him for his wise choice. And, I also tried not to focus in on the bad behavior.

Nancy also frequently used another explicit approach in addition to guidance, using recall and response to build concepts.

*Nancy used recall and response with prompts and cues to build children's knowledge.* She frequently asked closed questions with predictable responses. In developmentally appropriate environment teachers frequently provide information and ask questions. However, using recall and rehearsal with prompts, cues and time delays,

was a direct instruction approach consistent with DEC recommended child focused practices (Sandall et al., 2005). Nancy used this strategy during breakfast, circle time and centers.

At breakfast, she used the prompt, “Were you finished?” as a way to transition children to clean up and go to circle time. The prompt used was a guidance technique, yet she encouraged the children to recall what will happen next, “You finished? What do you need to do next?” The children seldom responded with words, but moved to the sink or stacked their dishes (Video Observation). During circle time, Nancy started with songs then moved into the topic, senses.

Ms. M has been talking to you this week about . . .?[children respond, senses] Senses that’s right. Why do we have ears . . .? [To help us listen] That’s right but this week we’re going to talk about what? . . . [points to nose]. That’s right. And on my picture, what was she using, her nose to smell? [Flower] That’s right, flower. And when we look at this picture, and she uses her eyes to see, and her ears to listen [points to picture and some children say see and listen], that’s right. (Video Observation)

Nancy also used recall and rehearsal with prompts and cues during the book sharing time.

OK Brown bear brown bear what do you see? I see a . . . [yellow duck]. Yellow duck yellow [what do you see]. I see a [horse]. What color horse? [Blue] Blue horse, what do you think he sees? Let’s say it, green frog. What color [green]. You’re doing a great job telling me your colors. Now what were we naming? [Colors] and animals. (Video Observation)

During center time, children were asked specific recall questions.

B1, what letter was this? Was this a G? [Yes]. B1 what letter was this [holding an E, turns it over] it was an egg, what letter? [No response]. The letter was an E [places in chart, B1 screams]. (Video Observation)

We discussed the practice of using recall and rehearsal with prompts and cues during the interview. Nancy, was not quite sure of what she would call this practice. She struggled for a word. During the probe, using reflective listening, the researcher used the word “prompt.”

So I guess I give them a question or like you said a prompt, so I repeat back what they said to me after I asked a question, and I give clarification that they heard what I said and were engaged in what I said, then they answered the questions like to me they were on task and focused on the questions so they can come back to me and say it. So it tells me I need to go to the next step and to add more words and give them more words. You know build their vocabulary. So those types of things I do. (Interview)

Nancy admitted she used recall and response practices for both typical and atypical children. She also used practices to individualize and promote learning for the children with disabilities. Nancy began to embed IEP goals for her children with disabilities.

*Nancy embedded instruction across activities and routines for the children with disabilities.* Rather than isolating children with special education needs for instruction on a specific skill, a child-focus practice should happen in the context of the child’s daily routines and activities (Noonan & McCormick, 1993; Schwartz, Billingsley, & McBride, 1998). DEC recommended this practice as an effective strategy to use in inclusive settings. It was a specialized procedure “embedded and distributed within and across settings” (Sandall et al., 2005). Embedded instruction was a practice implemented in a developmentally appropriate environment by individualizing and responding to the unique developmental needs of every child (Copple & Bredekamp, 2009). To embed a

practice, a teacher must be familiar with the child's IEP or IFSP. Therefore, embedding was an explicit practice in the context of a naturalistic environment.

During breakfast and while washing hands, she individualized her practice and worked on self-help and language with B1.

Ok. ABC it was [singing while washing hands]. ABCDEF . . . where's the G [B1 points] HIJK, find the L [points] LMNOP. What's next [points] QRSTU . . . looking for V [B1 points utters V] WXYZ [B1 z. You finished the book. Good job. Now we will count to 10, 1-10, shake, shake, dry them off without touching the sink. Good job [B1 dries hands]. (Video Observation)

With B1 again, "Were you going to eat? What's this for? [Holding up the spoon, no response]." She was trying to expand his language and sit with him and model appropriate behaviors during breakfast. During circle time, she directed him to make eye contact and communicate rather than screaming.

B1 ready to listen. Look at me B1. Right here, look at me [he looks and screams]. Thank you G6. Thank you, B6 [Looking at book]. To B1, I know you were upset. Where do you need to look? [B1 hides face down]. Can you see like that? [Stops screaming and looks]. (Video Observation)

Nancy was aware of his IEP and tried to embed his goals during routines.

On his IEP were simple things like following simple directions, um. I can't even remember his IEP, I know it's down the hall. But was following simple directions, um a lot of communication like, more than two syllable or 2 word sentences and things like that. His IEP was more language based let me say that. (Interview)

Nancy also used this practice with B2 as she encouraged him to follow directions as a part of his IEP.

B2. What's wrong? [No response] Were you finished? [B2 shakes head and points to milk that was full]. Do you need help? What do you do when you need help? [B2 **signs** help]. No, ask for help with words . . . B2 where they go [meaning plate and cup]. What do we have to do? [She points and directs him to the sink, as she wipes off the table] B2 get behind her. B2, do you need to go to the bathroom? [B2, no]. Get behind her. What do you do next [B2 empties milk]? Good job. (Video Observation)

Nancy was aware of B2's needs and intentionally embedded a goal of self-help and self-regulation.

B2, as you call him needs that little bit of extra guidance or he will go off and it will be difficult to bring him back. So for me it's like giving him, or being there with him, letting him um, make his choice, like cleaning up. (Interview)

When asking Nancy about this practice during the interview, she responded, "Do you think I focus too much on my special needs children?" She further explained her work with children with disabilities in her classroom.

And this year I found myself balancing out. I know I have to step back when B1, I know he doesn't have adequate language OK, but I know in the back of my mind I think, those kids were here so I will deal with it and find the best way to help.

This implied she planned for her children with disabilities. She planned and implemented practices to meet all children's needs. As she did this, another theme emerged that was less structured and explicit, Nancy engaged in socio-contextual conversations with the children. At times there were narrative highlighting appropriate social skills for the children with disabilities.

**Implicit CFP.** *Nancy used socio-contextual conversations and social narratives to guide behavior.* All children benefit from conversations to enrich and extend learning

opportunities. For children with disabilities, conversations become social narratives, highlighting appropriate responding in a specific situation. Teachers follow children's lead and add comments to engage children. This was a developmentally appropriate practice and what Vygotsky would say was a part of developing in the "zone of proximal development" (Copple & Bredekamp, 2009). Socio-contextual strategies were naturalistic and were often teacher-child or child-child interactions. This implicit child focused practice was part of the day-to-day routine.

Nancy began the day moving to different tables having conversations. They were brief, yet engaged the child in attempts to extend learning.

Where were you yesterday, I missed you. [B2 muffled I sick]. You were sick. [B2 coughs]. Did you cover your mouth when you coughed [yes, all day sick, I was doctor]. You were sick? You went to the doctors and got sick? [Nods yes]. Did the doctor give you medicine [nods no]. (Video Observation)

Nancy discussed her conversations with children. She did not identify it as a practice because it was "just what I do."

Well that was just a conversation. It was just a brief conversation to try and find out why he didn't come to school the day before and once he got here to find out what took place He went to the doctor and to find out about it. (Interview)

Nancy tried to extend the conversation at another table while two girls were talking about the Nutcracker ballet.

Were you going to be a ballerina too? Were you and G2 going to be in a play together [both shake yes]. Now wash your hands. [To B1] Were you going to be a ballerina too? [G1, boys can't be ballerinas] Were you sure? [G1, boys were basketball players]. I don't know about that. (Video Observation)

Unfortunately, the conversation was interrupted. Nancy commented on this conversation during the interview saying, “Hm. I just saw myself having conversations and doing the daily routine” Nancy used conversations frequently during breakfast and transitions routines and did not view this as a practice, to her it was more of a routine.

At another table, Nancy tries to engage another child with special need (G5) who had language delays.

G5 you done? [Nothing was eaten on plate]. I thought you were hungry. You tried it though didn't you . . . what did you like about it? [G5 points to peaches]. You liked the peaches. [G5 points to head and stomach at the same time]. What's wrong you got a headache? [No response] Were you going to eat some more? [No response] Do you think you can eat some French toast? [No response]. (Video Observation)

This conversation was a social narrative since Nancy wanted to engage G5 with others highlighting appropriate communication during breakfast. Nancy also used this to check in with each child as to their health and what was happening at home. During the interview, she comments, “I'm just engaging with the children.”

When B1 was finishing breakfast, he carried his milk to the circle time area. This was an opportunity to use a social narrative by highlighting relevant cues and offering examples of appropriate responding. During this conversation B1 was encouraged to use words then follow the typical routine of sitting at the table for breakfast.

[B1 screams coming over to group and Nancy carrying cup of milk]. What's the matter? [B1, I spill] You spilled your milk. Say, I spilled my milk . . . Where were you suppose to take your milk, or do you want to drink your milk? [B1 ok]. Do you want, (to group), excuse me for a minute, B1 do you want to drink your milk, yes or no? Then sit at the table and drink your milk. [B1 nods yes and moves back to table holding milk carefully]. (Video Observation)



When asked about this particular practice, she explained “All I am doing was talking, using language, trying to get my children to communicate their needs and wants.” She then goes on to say “We were trained to use language, so I use language” (Interview).

As Nancy discussed the implementation of each practices, she was asked to connect the practices observed to her educational experience. She was very clear, that most of the practices implemented were the result of her teacher preparation experience.

**Educational experiences.** *Nancy implemented primarily explicit child focused practices and one implicit practice.* She connected all of the practices implemented to her teacher preparation experiences (See Table 2). For Nancy, this was a strong theme connecting education to practices. She also recognized in working with the Itinerant Specialists, she was able to model practices to use in the classroom.

*Nancy acknowledged her college coursework prepared her for implementing all of her practices.* Nancy was clear that her course, Child Guidance, was instrumental in her use of positive guidance and redirection.

Well to me it was Positive Child Guidance. That was a great class for me, um, I can't even remember the names of the classes, I know positive child guidance, and also the class that taught DAP. (Interview)

She also connected guidance and the use of recall and response to another class.

The Curriculum Planning class because it makes you decide if you were going to be that teacher that's hands on or were you going to be very structured person or a very laid back person or a combination sort of thing of using all the different curriculums (Interview).

Both guidance and recall were explicit practices. Another explicit practice was embedding and individualizing instruction. For this practice she acknowledged another class she had taken during college.

You know it was my Co-op that helped me. That was a while ago. I also had one class on EC kids. So, when I look at children now, I say do I see you right, and I maybe still using it (practice) but there may be something better to use. You know what I'm saying. Although, some of the things I started off using seems still to be working. So I keep using it.

She also related her "Co-op class" to implementing socio-contextual conversations and using narratives for children with disabilities to practices skills. Nancy discussed she had trainings but was not clear when or where. It was trainings and "what you had been taught in school."

I think for me it was the training, my college, for two-years at Community College and then being able to implement those things, easily. Figuring out what works for you, the practices. (Interview)

As she discussed the practices, she spoke about her children with disabilities and how she learned to include them. At first Nancy was not sure of a connection other than college. Then she added relationships with the Itinerant Teachers. This created a new theme.

*Nancy connected using recall and response and embedding practices to modeling and collaborating with the itinerant specialists.*

They were modeling when they come in on Thursday. And basically, they were modeling what they do. But when they do their inclusion, they come in and it's mainly story time about 11:15 . . . And then I build upon what they were doing at that time. (Interview)

Nancy observed the specialists when they come into her class and sees a new practice. She then tries to implement the practice she observed. Nancy seemed to connect most of her practices to her college coursework in addition to working with Itinerant Specialists. However, she did questions if she was adequately prepared to meet the needs of children with disabilities. “I see growth, in them all but I am just wondering am I meeting their needs. That’s a big thing for me” (Interview). But overall it was the community college experience that prepared her for the inclusive classroom.

I think for me it was the training, my college, for two-years at Community College and then being able to implement those things, easily. Figuring out what works for you, the practices. (Interview)

### **Summary**

Nancy was the lead teacher in a Head Start inclusive classroom, 16 children with four having special educational needs. Nancy implemented primarily explicit child focused practices. The explicit themes included: guidance and direction with clear specific choices, using recall and rehearsal with prompts as a direct teaching practice, embedding instructional practices for children with disabilities. The only implicit practice was using socio-contextual conversations with social narratives to guide behavior. She related most child-focused practices implemented to her college coursework. She also acknowledged implementation takes experience and practice. She has developed a relationship with the Itinerant Specialists who have guided her practices with children with disabilities (see Table 2).

## “Mikell”

### Demographic Context

Mikell was the lead teacher in a public Pre-k inclusive program in a rural county. She has her Bachelors of Science Degree (BS) in Secondary Education however, she did not teach at that level. She originally was certified in Preschool Special Education (after taking a test) and later grandfathered for a Birth-Kindergarten (B-K) Licensure. She taught for 7 years in kindergarten then moved to this pre-k inclusive classroom. Mikell received additional training on reading difficulties (3 continuing education units, CEU, from a college) and training in special education (4 CEU from a college). Although not reported on the survey, she mentioned her training on the ECERS during the interview (see Appendix A). She uses a combination of curriculums, *Discovery Math*, *Hill Center*, *Letterland*, and *Creative Curriculum*. During the interview, she described her meaning of child-focused practices.

To me that means teaching as it relates to the children. To see if they best understand and can relate to my teaching . . . Making things fun so that they know they're learning and realize that they know they were learning.

**Setting.** This inclusive classroom had 18 children, 7 children with special educational needs (5 with Developmental Delays (DD), one of which was Hearing Impaired (HI) and two speech and language). There were two full time assistants and one special shadow for B2, a child with DD reported to have behavioral issues (outbursts in the past). The Itinerant Specialists (Speech and Language, Occupational Therapist,

Physical Therapist) remove the children from the classroom for specialized services according to their IEP.

On the date of the video observation there were only 15 children present and 6 children with special education needs. One of the assistants was substituting for the usual assistant assigned to the classroom. The room was average size yet crowded and children shared bathroom with another class. There was an additional sink for hand washing by the craft table. Most of the children's work was displayed at eye-level with commercial alphabet letters and numbers, in addition to labels for centers. Rules were posted near the calendar and daily chart. A large Smart Board was on the wall for circle time. The Smart Board was also a choice during center activities. In addition to the Smart Board there were several learning centers clearly identified for small group play with magnets for children to attach their "butterfly" indicating they have chosen the center to play in. The additional centers include: (a) arts and crafts, (b) writing center with papers and writing tools, (c) table toys, (d) manipulatives and puzzles, (e) puppets and flannel board, (f) computer, (g) discovery area with natural objects and weights, (h) sand table with tools, (i) different size large blocks and accessories, (j) dramatic play area, (k) music and instruments, and (l) books and quiet area. The teacher's desk was in the back left and an additional shared small student desk for assistants' materials and personal items. There were two large rectangular tables for 6 to 8 children and a small circle table for four in the center of the room. The circle time area and carpet was along the right wall with a CD player, computer and Smart Board. The calendar and pocket chart were there as well.

**Video observation.** The observation took place for over 60 minutes as the researcher and videographer observed and video recorded circle time, transition, breakfast, transition circle time, and free play at centers. This was a developmentally appropriate classroom with clearly identified centers. The schedule included routines, activities and free choice time.

During the circle time, the children went over the calendar using the smart board. Children participated as daily helpers. During breakfast, after washing hands, they all sat at the table and ate their breakfast. This was timed and children were reminded how much time they had to eat. There were conversations between the children and between the adults sitting at the table. After breakfast, children transitioned to a brief circle time to share, but show and tell was usually in the afternoon. Then the children transitioned to centers. Children were free to chose a center by picking out their butterfly nametag and placing it in their center. Mikell moved from group to group during center time.

### **Themes**

Consistent with the previous cases, the videotape observation was reviewed several times to determine child focused practices implemented. The tape was reviewed first to determine the use of implicit and explicit teaching practices. Using HyperResearch software to analyze transcription of the video observations and the interview, several prominent child-focused practices and educational experience themes emerged. Although the environment was clearly developmentally appropriate with identifiable centers and open-ended materials, the day was structured and planned. Mikell used a combination of implicit and explicit teaching methods to direct and guide children

to promote learning. When making a connection between practices and educational experiences, Nancy recognized her years of experience working with children with disabilities, practicing through trial and error and following the IEP. Also her family relationships seemed to guide her practices (see Table 3).

**Table 3**

*Mikell Themes*

Category	Child Focused Practice	Educational Experience
Explicit	Directed children to use manners to guide and redirect their behavior	Connects her practice to her family relationships and her common sense.  Resources provided by her supervisor as a form of professional development and practice implementing strategies
Implicit	Acknowledged and recognized children for following directions and completing tasks.	Years of experience with children and use of trial and error to practice  Observation and modeling in other inclusive classrooms
Explicit	Embedded children's IEP goals into her daily routines and activities	IEP informed her practice to embed instruction  Experience working with young children with special needs informed her use of embedded instructions
Implicit	Integrated learning concepts and content during play	Experience and practice rather than specific training or college coursework.

**Explicit CFP.** *Mikell directed children to use manners to guide and redirect their behavior.* As noted in a previous case, “Nancy,” guidance techniques can be

developmentally appropriate, helping the child make positive choices or more directive, limiting choices and not offering opportunities for children to problem solve and develop self-regulation (Copple & Bredekamp, 2009). Teachers establish clear limits in a mutually respectful way and model appropriate expectations. It was the teacher's tone and the way in which children were guided that makes the difference between controlling behavior and teaching expected behaviors.

During the first circle time with the Smart Board, Mikell used a soft tone and positively guided children providing clear direction. "I like the way you're sitting on your bottom and listening to B1. You were a good listener." She directed the child to put the birthday cake on the calendar, and provided guidance but clear choices.

Now where were you going to put the birthday cake? Excuse me [to G1] sit on your spot please so I won't stand on you. Now, you put it on 6 because that's your birthday. Raise your hand if you know another person that has a birthday. [Me, me] And when was your birthday, did we put it on there? [Pointing to board]. Look, say 28 [B2 points] absolutely right. [T puts cake on calendar]. That's right so we put 2 birthday cakes on the calendar. (Video Observation)

As the circle time continues, Mikell was very clear regarding expectation and redirects and limited choices. "Listen to our weather man please." Then again, "I need eyes and ears." Shortly thereafter to an individual child (B2),

Eyes and ears, B2 [Mikell models and prompts]. I need you to sit on your bottom and raise your hand when you have something to say [prompts]. You're not using your manners [ B2 jumping and sitting in chair]. I need you to sit like a big boy [slowly complies]. (Video Observation)



This redirection was used during the transition from hand washing to breakfast.

She prompted him to sit and raise his hand.

B6 I need you to sit on your bottom. [B2 yells out]. You need to get down and raise your hand [B2 complies, raises hand]. Yes sir. Excuse me [to group] B2 raised his hand we need to listen to his words. (Video Observation)

This continued during the transition as well, “Now G2 turn around and get in the line.”

Also to B2, “find your name and don’t sit in anyone else’s or touch their food” and to B1,

“B1, show me you’re ready to wash your hands”. A less directed strategy was

implemented with B2, “Can you show me how healthy boys eat? Going to make us proud.”

Mikell talked about her guidance practices during the interview. She noted that many of her directive practices were toward her children with disabilities.

I guess I do for the children with special needs here. I give them extra reinforcement. I guess I use little signals, non-verbal cues was a good way to put it. It doesn’t work for all children but I guess its just another one of many strategies I use to try and bring them back around, to refocus. (Interview)

When probed about being directive with B2 she explained. “That was something I catch myself doing . . . And for him to just make sure he makes it right. Positive redirection.”

Mikell named reinforcing rules and directions as using manners. Her intention was to guide children to use their manners.

[Using manners]. I think that means about the three main rules we use. I don’t know if we did that that day or not, but we generally go over the rules. The first rule we call it the golden rule, be kind to others. It’s just telling them to treat

others how you want to be treated. Secondly, listening and following directions, I consider that manners. And, doing their very best what ever they may be doing. So I guess I call manners and rules the same thing.

Mikell implemented directive guidance practices and referred to this practice as using manners. She revealed this practice was used primarily with her children with disabilities. She felt she was assisting children to follow the “rule” by using manners as a part of their IEP for example, with B2. According to Snell (2007), embedded instruction was effective for teaching new skills, increasing engagement, participation, and independence. Mikell felt she embedded the children’s IEP goals during the day. This was another explicit practice.

*Mikell embedded children’s IEP goals into the daily routines and activities.* She was very aware of each child’s goals and used them as a guide to implement practices.

I think one tool that helps you work in an inclusive classroom with children with disabilities, was being able to know through the IEP what these needs were specifically and what you need to be focusing on for these children. (Interview)

During the routine calendar time, the children recited the alphabet. She encouraged G1, to participate in the lesson. G1 appeared shy with hands in her mouth. Mikell assisted G1 to stand up and G1 leaned close into Mikell as she grabbed the wand to point at the letters. Mikell used a hand over hand method to assist G1 as she pointed to the letters. “G1 you stand with me and your friends” (Video Observation). Although the group recited the letters, you could not hear G1. She was encouraging G1 to use language consistent with her IEP. Mikell next went to B2, “B2, what letter was that [B] and whose name begins with that [B2].” Next, she asked B5 to assist her with counting to 20. “B5

will you come up please? I'm going to hold these numbers [number strip] and we're going to count to 20 [B5 moves gets wand]." Mikell frequently used corrective feedback with the children with disabilities during the circle time. She addressed their IEP goal to listen and follow directions, "I like the way you're sitting on your bottom and listening to B1." And, she encouraged B2, "Criss cross apple sauce [B2]. A little bit more. There perfect." Before transitioning to breakfast, she modeled hand washing for B6, "I need you to help me practice [reaches to B6]. Inside, other inside, in between, good remembering, in between all around" (Video Observation).

While the children were having breakfast, she seemed to focus on the children with disabilities encouraging them to use language.

[Moving to B5] What do you have to eat? What's that [no sound err, looks at fingers]? Yogurt, mmm. Was that strawberry? That's my favorite [no response]. You like strawberry? [Uh uh] It was your favorite. (Video Observation)

Embedding instruction was the focus of Mikell's classroom. During the interview, she stated clearly all children should take part in the routines. "They were absolutely encouraged to do it all or anything. They have just as much opportunities to participate as any of them" (Interview). During centers, Mikell individualized instruction based on their IEP.

I gather them after breakfast and then they go to centers. And during centers we do some individualization and pull some small groups together . . . that was something we do to give them a lot of 1/1 attention. Even if we just pull them for 5 to 10 minutes from their play.

Embedding instruction was critical to Mikell. When asked about how she documented this practice, at first she stated she did not document overall but then as the interview progressed she revealed she did document the children's progress, specifically children with disabilities because of their IEP.

I definitely do document. I should show it to you. I have a clipboard with index cards for each child and I do make documentations just when I notice things like that. But with children with IEP's I make a point of documentation everyday of something that I did see them or did not see them do. It's very important to document that stuff. And you know I pretty much can predict, I could have told you which ones would go (pop up with letter) and which ones would stay.

The IEP was very important to Mikell. In most cases, she participated in its development. She also used implicit practices, as she acknowledged children's success and integrated concepts during play.

**Implicit CFP.** *Mikell frequently acknowledged and recognized children for following directions and completing tasks.* This practice was similar to that described and used by *Isabelle*. It was a developmentally appropriate practice using acknowledgement and recognition to positively reinforce a behavior. This was both an explicit or implicit practice depending on the frequency and condition of its implementation. It was explicit if planned for a target behavior and documented using systematic procedures (Sandall et al., 2005). However, Mikell did not systematically enforce a specific target behavior. It seemed to occur naturally, as a part of using good manners in the classroom.

During the first circle time, Mikell commented, "Good job. B2, I like the way you're sitting on your bottom and listening to B1. You were a good listener" (Video Observation). She not only guided the expected behavior she acknowledged his success.

When the child chose the correct graphics for the weather, Mikell remarks, “You’re absolutely right [getting graphics] sunny and cloudy.” She continued with the weatherman, “That’s great. Can you change our sign over there from sunny to sunny cloudy? [waits] Perfect. Thank you for your help weatherman” (Video Observation).

As the children continue to work on the calendar, she acknowledged their efforts.

There you go and B4, that’s an important date isn’t it? Here you go B3. I could put that up here. [It’s my letter]. It was a different shape than yours isn’t it? That looks fine [writing number. Thank you [B3] my friend. All right. (Video Observation)

Mikell selected a child to lead the alphabet drill. When the child finishes, she comments, “You were a good leader.” A child then comes in late, she greets him warmly, “Hi buddy. I’m glad you’re here. You brought me some show and tell, [utters ah-ah] and it’s letter S. I’ll be waiting for that”. Before the children transition for breakfast, the whole class was acknowledged, “And boys and girls look at the great B pictures we made [holding picture].” She reaffirmed their success as well as their membership in the group, “What was the last number we said? It’s after 19. It was (20), 20 you were absolutely right. [Another child comes in.] B6 I’m glad you’re here.” And to the group again, after the number drill, “You all we’re good rockets weren’t you? You started early . . . Excellent my friends.”

These were brief acknowledgements for completing tasks and routines successfully. “Good job. B5 I love your manners. You’re showing me you were polite . . . B2 were you using your manners.” During the center time, children were acknowledged for their work with a classroom signal of accomplishment, a snowman.

Boys and girls could I have a snowman [raises both hands] Snowman [Freeze] for a second. We have an incredible building here, and what was it? It's a road. Say it again; it's like a bridge road so if you want to see it come over here . . . Guys I have another snowman. G and G, I need eyes and ears, they made the circus. So, if you want to see it come by. (Video Observation)

Mikell described her use of acknowledgement and recognition in the interview.

I see I affirm what he was saying. I say a little bit sunny and a little bit cloudy, I didn't say he was right or wrong. I didn't just say you see a little bit cloudy and sunny, then I say let's think about that, let's talk about that. So, that's a positive and I respect his opinion and knowledge of the weather.

She consciously made an effort to find a way to acknowledge what they do in a warm supportive tone. "When I spoke to the little girl who was telling me about playing in the snow, I guess I again reaffirmed, 'Yes that exciting and it's a fun thing to do' (Interview).

Mikell described encouragement and acknowledgement an important part of the inclusive experience.

I noticed I was trying to move around and make sure children were engaged with their peers. I noticed everybody felt a part of that and was included. As I said I have these two over here on the end and I did walk over to them one time and encouraged them to change (partners) but I encourage them to, well its more of inclusion I encourage them to be friends and buddies with everyone. (Interview)

Mikell's classroom was clearly organized into different activity areas where children can choose where to play. They were encouraged to engage in small group play in addition to solitary play. Developmentally appropriate classrooms include opportunities for the teacher to expand on learning through asking questions and sharing

information (Copple and Bredekamp, 2009). Based on clustering practices, a theme emerged.

*Mikell integrated learning concepts and content during play.* Mikell's classroom provided a rich experience with technology, as the children were free to "play" with the Smart Board. "You guys can have this (wand for Smart Board). You know how to play" (Video Observation). The boys turned on the computer and began a game of letters on the Smart Board. Other children watched as they boys changed games and music. At the computer station, another child was playing a matching game by himself.

Mikell asked open-ended questions about the weather to extend conversations during play.

But did anybody else hear what else might happen out there?  
What might happen next week? [Snow] It might snow . . . Did you go out in the snow when it snowed [shakes head]? You did. Did you love it? (Video Observation)

During transition, Mikell used an opportunity to integrate concepts during a conversation with a child. This was an incidental teaching moment and Mikell got out the globe.

Girls and guys, give your eyes to G. [not audible] Uh uh, you went with your grandpa to the beach in Mexico. Wow. Those of you who came in late, we talked about [gets globe and shows Mexico] G who traveled from her home here, and she didn't go on an airplane, she rode in a car all the way down to the [beach] beach. And what's the name of the country, Mexico. At the beach, was it sunny? Was it warm? Not warm enough to swim but was it still pretty? [Nods]. (Video Observation)

When discussing her integrating concepts during play, she felt it was an important practice. She saw this practice as a way to encourage learning.

I do simple things like getting face to face with them. Like um, I like to look at them face to face and just see if the language I use, simplified or child friendly so that they understand what I'm saying. Making things fun so that they know they're learning and realize that they know they were learning. (Interview)

Learning was integrated throughout the day. The routines and transitions were opportunities to encourage all children. Mikell expressed confidence with her ability to implement practices in an inclusive setting. She related her educational experiences to implementing practices in the context of an inclusive classroom.

**Educational experiences.** Mikell primarily used explicit direct guidance and redirection practices including corrective feedback during the observation. She also positively recognized children for their success and integrated concepts during play. When asked to relate this to her educational preparation, an overall theme emerged during this interview, years of experience with children with disabilities and opportunities to practice. She also acknowledged her relationship within the family and her supervisor who provided resources.

*Mikell connects implementing child-focused practices to her years of experience working with young children with disabilities then observing and practicing.* In teaching children with disabilities, knowledge of the IEP was important. For Mikell, implementing the IEP informed her practice to embed instruction, and integrate learning. Although the IEP for children does not include specific practices, Mikell described that it did inform her practices.

You know and just knowing (IEP) and deciding beforehand. I just need to know this and do this for these children, and need to know what to do for this child and



what technique to use or what will work for all of these children so, I think just having a good idea of what their needs were makes it work (Interview).

Mikell did not relate the IEP development to any training or college coursework. “As for as a particular class I took, I’m sure there were, but off the top of my head, I really can’t say”(Interview). She felt just working with the children influenced the practice that she chooses. She acknowledged children and tried to do what was “best” in helping them to complete tasks and follow directions. But it takes experience.

I think that was important. I think I take the child where they were at and I try to do what was best. No two children were the same. Some years I think well socially I did more for that child than I did academically but that was helping them to work to their potential. That’s what I aim to do, that’s why I am a teacher. (Interview)

According to Mikell, both experience and opportunities to practice determined the appropriate child-focused practice to implement with a group of children.

I think it was just trial and error, and years and years of doing it. And you know what works with this group of children, might not work with next year’s children so, I think it’s just a matter of trying to do something encouraging and try to find what’s effective with particular children. (Interview)

Mikell also had an opportunity to observe in other inclusive classrooms, this influenced her acknowledgement of children. She had the opportunity to work with several classrooms on a grant-funded project. She observed the teachers in the classroom, and then modeled positive guidance.

Anytime you go into another classroom, you get to see different effective practices people were doing. But because I supposedly modeling these positive

things for the teachers in the classrooms that I was visiting, it made me a little more aware of making sure I do that. (Interview)

Mikell also discussed the relationships that were established during this opportunity. This related to theme emerged in reviewing educational experiences that informed her practices. Mikell connected her practices to personal and professional relationships.

*Mikell connects implementation of guidance practices to her relationship in her family and with her supervisor.* Mikell used direct guidance methods to correct behaviors and asked children to use good “manners.” Manners and being considerate were encouraged in her classroom and related to Mikell’s family relationships. As a child, she was nurtured using manners as a guide for proper behavior. Mikell also used this with her own children in addition to the children in her classroom.

You know I think it was just something that was instilled in me as a child. My parents had expectations for behavior and um, I’ve done it rearing my own children. It just does work. I don’t know if that’s an answer your looking for but that’s just one of those common sense things (Interview).

Mikell also related her guidance practice to a new book provided by her supervisor. Mikell’s supervisor provided each teacher with a book, *Conscious Discipline*. She was encouraged to read the book and share reflections with her supervisor and colleague. This was a form of professional development. Her relationships during this professional development opportunity informed her use of guidance practices.

Our director, we went through this book *Conscious Discipline*, but that book, it just had so much in it and so many strategies in it that I went through it and read

from that and pulled from that. We actually were given a chapter a week that we had to read and just do a little blog, a little summary of what you read and blog to everybody, and it helped us review the book and try different things. Again, we did that and then trial and error and being there and doing that and finding out what works . . . I think the book *Conscious Discipline* really was helpful.  
(Interview)

Mikell expressed confidence in her ability to teach in an inclusive classroom. “I love what I do, teaching these kids.” Regardless of the practices and educational experiences, she felt comfortable in her classroom.

### **Summary**

Mikell was an experienced pre-k teacher in a public school inclusive program. She had 7 children with disabilities and 11 typical children. The children with disabilities were mainly developmentally delayed. She had been working in an inclusive setting for 10 years and kindergarten for 7 years. She had a BS degree in Secondary Education, however had primarily worked with children under the age of six. Her B-K licensure was grandfathered in from a certification in preschool exceptional needs. She had additional CEU training in reading and special education.

She implemented both explicit and implicit practices and focused her instruction on the children with disabilities (see Table 3). She used the explicit practices of guidance and redirection with clear specific choices, and embedded instruction based on the IEP across routines and transitions. She was implicit in her use of acknowledgement, and recognized success in children. Manners were important and she modeled appropriate manners. During center time, learning opportunities were integrated during play. Mikell did not relate the implementation of child-focused practices to her college experience

saying it was too long ago and she couldn't remember. She did relate her years of experience with children with disabilities and knowing and using the IEP informed most of her practices. Also, years of experience provided an opportunity to observe children and continue to practice based on their needs. Experiences with family and other professionals informed her practices as well. The relationships with her family, using "manners", and discussing *Conscious Discipline* with her colleagues influenced practices.

### **"Jenny"**

#### **Demographic Context**

Jenny was the lead teacher in a high quality five star inclusive public school Pre-k classroom in a rural county. Her classroom was located in the wing of the building with all Pre-k classes and exceptional children's (EC) staff including Itinerant Specialists and teachers. Jenny had her Bachelors of Science Degree (BS) degree in K-4 Early Elementary and her MAT Birth-Kindergarten (BK) including a BK licensure. She had taught children ages infant to Kindergarten in her 35 years. She was teacher and director of her own early childhood center for 20 years. The past 10 years she was the lead teacher in EC inclusive preschool classes. In addition, she participated in training on *Foundations: North Carolina Early Learning Standards* and *Inclusive Practices*. Although not reported on her survey sheet, she mentioned training on the ECERS during the interview. She uses *Creative Curriculum* and others such as *Letterland* in her classroom. She shared her meaning of child-focused practices.

It's focusing on the child and doing what you can to help them to develop. It's doing what you can for the child. It's whatever they need. It's what we do every day with the children. For us being an EC class it's what we have to do.

**Setting.** Jenny's classroom consisted of 17 children ages three-four including five children identified with disabilities, Developmental Delay (DD). Three of the children had physical impairments but were mobile. Besides Jenny as lead teacher, two full time assistants (AT) were in the room plus a half time assistant for one child who required additional help. The video observation took place for over 60 minutes documenting gross motor play in the gym, transition, table time, circle time and centers. There were 15 children present during the observation day including four children with disabilities. The Itinerant Specialists (Speech and Language (SPL), Occupational Therapist (OT), Physical Therapist (PT) removed the children from the classroom for specialized services according to their IEP. However, the specialists went into the gym on occasions to observe and work with some children.

The gym was large with equipment for the children to play in. There were 10 different size trikes, some with carts and two seats. There were balls, hula hoops, climbers with slides, ropes, play houses, beanbags, and push and pull toys. The gym was on the second floor and the children walk through the hall and go downstairs to their classroom on the first floor. There was an elevator if needed.

The classroom was very large and you entered from the back going down steps (8). Children with mobility issues were assisted by Jenny and AT. There was a sink with shelves in the back with three rectangular tables for 4-6 children. This was the arts and craft area and used for special projects. The bathrooms were in the classroom down a hallway. There was a teacher's desk on the left with a small area for the assistants. The windows were high and the room well illuminated. The room was arranged in defined

areas and included: (a) blocks and accessories, (b) music and instruments, (c) writing table with notebooks, pencils and pictures for prompts, (d) arts and crafts with an easel, (d) manipulatives for stacking and small blocks, (e) puzzles with varying complexity, (f) sand/snow table, (g) dramatic play with props, (h) book center with soft pillows and a chair, and (i) math and science area. Shelves separated the areas and two round tables were placed by manipulatives and puzzles. There were few commercial pictures and children's artwork and colored worksheets were displayed. Most of the children went to the bathroom independently, however, some required assistance. Hand washing did not occur as a group. The circle time was in the front and included a bulletin board for calendar, helpers for the day, schedule and rules. The entrance to the classroom was from the playground where cubbies for children's coats and other items, line the wall.

**Video observation.** The observation began during the gym time with three inclusive pre-K classes together. Jenny was supervising the whole group and children were riding trikes, playing with balls, hula-hoops, and slides. It was a large area and small groups tended to form with an adult assisting. The OT, PT and SPL were also in the gym with different children.

When they went into the classroom, the teacher instructed a brief lesson on the letter "k" while the children sat at the tables. The children transitioned to circle time, then free play in the centers. Each assistant teacher worked with a small group during center time. The classroom was videotaped for over 60 minutes observing large group gross motor play, transitions, direct instruction, circle time and centers.

## Themes

An important goal for all early childhood settings was to provide successful learning experiences. Effective child focused practices were the particular strategies that teachers intend to and actually do use to enhance children's development. Practices were about what to teach as well as how to teach (Wishard et al., 2003). For the young child with disabilities, it was even more crucial to intentionally implement practices and specific strategies consistent with an IEP or IFSP to increase learning across all settings. Consistent with the previous cases, the videotape observation was reviewed several times to determine child focused practices implemented. Using HyperResearch to analyze transcription of the video observations and the interview, several prominent themes for this teacher emerged. She acknowledged her college experiences as preparing her to implement practices and specifically knowing and using IEPs (see Table 4).

**Explicit CFP.** Jenny was very intentional in her teaching and used explicit child-focused practices in the context of a developmentally appropriate classroom. Jenny frequently implemented guidance and direct instruction practices with clear specific choices consistent with direct instruction methodology.

*Jenny used guidance and direct instruction providing clear choices and expectations for performance.* As noted in previous cases, guidance techniques can be developmentally appropriate when children have choices. Guidance was individualized and sets limits to develop self-regulations (Copple & Bredekamp, 2009; Sandall et al., 2005). During the video observation, the children went to the gym to play with the gross

motor equipment. Jenny moved from child to child checking on them and assisting when needed. At the scheduled time, she called her class together and directed them to line up.

OK I need my guys. Come on [raises hand and waves]. Come on D. [Moves to left side of gym to gather children, waving her hands to come line up.] Come on D. L [calling children by name and they line up at a spot.] Come on. [AT goes to each of children and gathers them up and put toys on the side of the gym]. (Video Observation)

**Table 4**

*Jenny Themes*

<b>Category</b>	<b>Child Focused Practice</b>	<b>Educational Experience</b>
Explicit	Guidance and direct instruction providing clear choices and expectations for performance	MAT in B-K prepared her for implementing this and all practices  Training on IEP's tells a teacher what practices she should implement
Explicit	Embeds IEP goals for each child into routine and activities	College education, her B-K license  IEP directs embedding practices
Explicit	Recall and rehearsal with closed questions to <b>expose</b> children with disabilities to concepts	The experience in her B-K licensure program  Experiences as a parent and teacher of her child with disabilities
Explicit	Used typical peers to model for children with disabilities	College experience  Experiences working with children of differing abilities encouraged this practice

The children went to their assigned spots in the line. The children walked in a line down the hall without incident to the stairs. The children with physical needs received



assistance. Upon entering the room, Jenny instructed the children to sit at the table for the letter of the day. The children had pencil boxes and a worksheet at their assigned spot.

Jenny directed the lesson.

What letter was this? Let me hear the sound the letter makes at this table [K]. [She went to each table and had the children repeat the sound]. K was the kicking sounds K K K. B2 [child with DD] I really would prefer that you use crayons. It's ok. [G 4 says she didn't, pointing to B1]. That's ok and it's a HE, B1 was a HE ok . . . It's time to clean up for circle time. Good job, they were beautiful. (Video Observation)

As Jenny transitioned to the rug, she gave another direction, "Ok guys put your crayons in your box. Come on." The children go to the mat and Jenny directed them to the spot, "Remember your spot. B1, this was your spot here." At this point, she physically moved him to his spot and continued.

Here B2, here's your spot. Come on W, here's your spot. G2 [DD] will you be a young lady today [G crosses legs]. Come on G2. [Moves to CD.] Everyone ready, B3 you ready? Everyone lets sit down. OK guys lets listen. (Video Observation)

Jenny continued to guide children into centers and told AT where to assist.

I'm going to check on this center, you go over and help here [to AT]. You have to pick another there were 4 people in this center. This center was full already; you need to find another one. To G2, I want you to stay in this one OK. (Video Observation)

Jenny discussed her use of this guidance practice during the interview. She felt she often "reinforces" the rules for safety. When transitioning from the gym to the classroom, she described the line up as a part of the routine.

I don't like to use a whistle or anything, I just call my children and they come. By this time of year, they know what to do and they all line up. You see him, he was a new child but already he can line up. (Interview)

She next described using the use of guidance and direction as the children completed the worksheet. She knows it was not appropriate but felt it was necessary.

Well it was not developmentally appropriate according to the ECERS but we have to do it for the school. This was not art. We use the letter people and every day we go to the table. Each child has their own pencil box. (Interview)

Jenny felt following directions was a routine guidance practice.

They can follow a routine and that was important. By now they know they have to sit and wait quietly as their name was called. Criss cross applesauce so no one would get hurt or trip over when they get up. They know what was expected. (Interview)

Jenny shared her confidence in using guidance as a practice since parents and others have commented about its successful implementation. "I had parents and others come in here and ask how do you get the children to sit and be so quiet. I don't, it's just a natural flow" (Interview). She clearly focused on her children with disabilities as she embedded instruction.

*Jenny embedded IEP goals for each child with disabilities into routines and activities.* The natural early childhood environment consists of routines and play-based activities. In Jenny's class, she used child-focused practices embedded in routines focused on the children with disabilities, specifically those with physical disabilities. Jenny was very familiar with a child's IEP, stating in the interview, she "writes them."

Jenny focused on her children with disabilities instructed her teaching assistants to work with the children. When the children were in the gym, she provided physical assistance to a child by helping him place his hands on the tricycle (Video Observation). Jenny commented on this practice. “We encourage a lot of gross motor activity. These kids need it and we work with them. The OT and PT sometimes come in and work with the children as well” (Interview). She addressed the specific physical needs of her children with disabilities when she transitioned into the classroom.

His physical needs were great so he needs extra help. We were lining up then go to the hall and down the stairs and this was even a part of his IEP. We work on his IEP goals anyway we can (Interview).

At the tables, she helped B2 into a special chair and instructed the assistant teacher to sit by him. With B1, she encouraged him to open his hand and hold the crayon.

B1 open [modeling opening hand]. See open your hand. You can't color with that hand if you don't open it. [To AT] Help B1 opening his hand up then put your hand on the paper, stretch his hand out. (Video Observation)

Jenny pointed out this practice during the interview.

You see here, he was in a special chair and he was doing well trying to sit and hold the pencil. This was also an opportunity to sit at a table to do work. To practice. Yes, whoever sits with him has to do hand over hand to help him hold it. But, he was doing well. At first, he could not grasp, now he can go back and forth and we help him practice holding saying back and forth. He was doing well and this was a part of his IEP.

When children transitioned to the carpet for circle time, all children have their assigned spots. This was the routine, “Everything we do was through routines. We know what their needs were (IEP) and plan” (Interview).

This was good for them especially my special children. This was a very important part of socialization. Sitting there, together, listening, practicing talking and communicating (Interview).

The routines were very important to Jenny and the children. The schedule was on the floor and on the board. This was how she planned and embedded instruction.

This helps them thrive. It doesn't have time on it or anything but it was what will happen next. They can touch it, they can step on it, they know what we do. We have breakfast, circle outdoor or gym, table time, circle before we go to centers. They need to know what's going to come next. This helps them plan and know what we were going to be doing. (Interview)

At one point, Jenny individualized instruction spending 12 minutes with one child, B1, working on his fine motor skills and language development.

Ok. [assists child with rings on post]. Let's try this one. [hand over hand to grab each ring at first then B1 does it on his own] . . . Here [holds pegs for him to put on]. Use both hands. [B1 quickly begins to stack different colors on peg once he gets a feel of it]. Here's another one. Use this hand. (Video Observation)

Jenny worked on several IEP goals with B1. She talked about embedding instruction:

We know what was in the IEP and every day we make sure we cover parts of it during play. Sometimes I sit and do assessments with them one on one if needed. Or I have my assistant's work one on one as needed. (Interview)

This related to another theme Jenny used, with closed questions as a learning approach to expose children to concepts.

*Jenny used recall and rehearsal with closed questions to expose her children with disabilities to concepts.* Jenny planned the environment and routines carefully to meet the developmental needs of all children. She planned activities to expand their learning by asking closed questions. This was a direct teaching explicit approach with scaffolding rarely used in this classroom. Social conversations were limited and few questions asked to expand language based learning. In reviewing the video, most questions related to colors, letters, and numbers with predictable responses. At the table doing their worksheet, children were asked about colors.

B2, do you have an orange. Where was your orange? Find it. That's your orange. Yes that's yours . . . what color it that? [Green] Do you like green? [Shakes head yes].

Jenny described “exposure” as the methods she used to develop concepts for the children in her classroom.

Everything we do was planned and intentional when coming to the circle. The calendar was exposure. We were exposing the children to the day and date. It was done in a pattern. We go over the months. We sing it and say it. We also count. I know they were not expected to know it but my typical children do so they help the others . . . its exposure. (Interview)

During circle time and later in centers, Jenny asked recall questions. The circle time songs were numbers, months and days of the week. “What were we going to sing about

now? [Months of the year].” As the children placed the date on the calendar, the children discussed the pattern on the calendar.

OK let’s look at our pattern here. We have penguin, snowflake, snowman [pointing to calendar]. Penguin, snowflake, snowman [some children calling out together]. Penguin, snowflake, snowman. What’s next? [The green one, Green.] Were they right? [B4 nods head and places number on calendar] . . . Today was number . . . let me here it [19], 19. (Video Observation)

Next, the children rote counted to 19. The circle time continued with recall and rehearsal strategies. “Which one did you want? [Points] What color was that? [Boo].” As Jenny viewed this practice, she shook her head and said, “Exposure.” When asked if she documented this practice she responded positively.

Well we have charts everywhere. For the EC kids it was a part of their IEP and we check it off. For the others we do as well. So, we write down everything. I will go over to my chart and write it doesn’t for example, what he said. This way I know if he meets his IEP goals.

Jenny used this practice and documented children’s responses as a part of assessment. She used a systematic procedure with the charts placed on her desk. She also implemented peer mediation strategies.

*Jenny used typical peers to model for children with disabilities.* Peer-mediated strategies were an intentional child-focused practice to promote the behavior of a child with disabilities (Sandall et al., 2005). This involves having the typical child model a behavior for the atypical child to imitate. In Jenny’s classroom, she frequently used the typical children as models. Research suggests this was an explicit practice that was

effective for working with children with disabilities in an inclusive classroom (Chan et al., 2009).

She discussed implementing this practice when observing the gross motor play. “My typical children see [B helping another child get on the trike] so they help others . . . the typical children help the special ones.” Also, when we watched the children play in the pretend snow, “we encourage them to play and play with others.” Jenny planned for this practice and stated,

My atypical children can learn from the typical children even better than they can learn from me. I recognize that and then I can pair a child with another and they can help. (Interview)

During center time, “I will pair a child with another.” One of Jenny’s final comments about her implementing child-focused practices related to the importance of this strategy in an inclusive classroom.

It’s like B2, he couldn’t even open his hand and now he can hold a crayon. Not because I made him, it was because he saw other children doing it and he wanted to. So a peer helped him and put it in his hand now he can grab it. That’s why I love what I do. (Interview)

Jenny discussed her educational experiences related to implementing the explicit child-focused practices.

**Educational experiences.** Jenny has many years of experience working in early childhood. But she related her teacher preparation experience earning her Master’s degree influenced her practices in an inclusive classroom. She also connected her experience as a

parent and teacher of a child with disabilities influenced her embedding and using practices.

*Jenny related her college coursework while earning her Masters in B-K prepared her for implementing all of her practices and the IEP was the guide.*

Getting her Master's degree was very important for Jenny. Even though she had years of experience in early childhood, Jenny stated college prepared her for the inclusive classroom.

I learned so much there. I really learned about strategies and working with young children with disabilities. It was when PM was there and R But I learned so much. I had great teachers. (Interview)

When asked about a specific class for implementing guidance and redirection or recall and rehearsal strategies she immediately responded.

All of them but I know we had classes specific for strategies. I can't remember. You know B-K was working with infants and toddlers as well as special needs. They really concentrated on working with special children and including them. (Interview)

Jenny was asked about her educational experience for implementing embedded interventions. She shook her shoulders and said, "B-K license. You know B-K." She also mentioned the IEP. She had training on IEP's in her college coursework. She also expanded on how developing an IEP helps her with documentation. "The IEP was the plan and we do assessments on what they learn."

She acknowledged for any practice, the "IEP's we do whatever it says in the IEP." Jenny felt all practices she implemented were included in each child's IEP. She further



stated, “Honey, we write them usually and we know everyone of their goals and make sure we address it daily.” The IEPs were used to specifically embed instruction and with peer mediation strategies. “Just following the IEP. Just following the children’s lead.”

In attempting to probe further on other educational experiences, Jenny related she was a parent of a child with disabilities. Here she addressed her experience as a parent helped with the IEP’s and practices.

*Jenny related her own experiences as a parent and teacher of her child and others with disabilities influenced her practices.* Jenny worked with her own child in her childcare setting. This informed her practice as she realized exposure was important.

I had my own childcare for years. In fact, that was how it started. Well, I had, have a special needs child. So, I know what it was like. I knew the rules and what to do for IEPs but I wanted to help other children. So, I had a childcare and I use to have children with disabilities in my center. They all learned from each other. (Interview)

She had practiced within her own classroom and center with her child and others before going on to school furthering her education wanting “to do more.” Jenny has many years of experience with all types of children. She also had some training but was not specific.

I did have trainings but really, it was learning on your own. Getting in there with the children and practicing what works. Each child was different . . . but it was practice, for each child was an individual and if you teach each child according to what they need, they can make it. So, it’s teaching each child and exposing them to others. (Interview)

Jenny seemed confident in implementing practices based on her education and experiences with children. She focused her classroom around her children with disabilities and their IEP. Her MAT in B-K was most instrumental in informing practice.

### **Summary**

The room was developmentally appropriate and the environment planned with materials available for the children. Jenny used guidance and direct instruction with clear specific choices. During circle and centers, children were encouraged to play with their friends in small groups and Jenny embedded instruction across the routines and activities. Although structured, children could choose their activities and direct their play. Jenny moved from child to child during center time expanding their play using recall and response strategies by asking closed questions. The typical children seemed to take the lead in the class and were used as models. The typical children provided peer support to their “buddies” without being asked to help. It was a structured, organized inclusive classroom and Jenny used explicit child-focused practices (see Table 4).

Jenny connected her use of practices to her college experience, her MAT in Birth-Kindergarten. The courses focused on children with disabilities and how to implement practices based on the IEPs of the children. She documented her practices and children’s development through assessment. Jenny’s felt experience as a mother of a child with disabilities informed her practices as well. Her 35 years of experience provided many opportunities to implement effective practices in a Pre-k classroom.

## “Miranda”

### Demographic Context

Miranda was a lead teacher in a small NAEYC Accredited Five star childcare center. The center was located in a suburban community housed in a church. There were only six classrooms with approximately 60 children attending. Miranda has a BS degree in Business Administration/Accounting in addition to two add on certificates, Early Childhood Education and Administration Early Childhood. She has completed over 54 credits toward her AAS degree in Early Childhood and plans to complete this next year. She has been teaching and administering in early childhood for 15 years. This was her third year at the current center. She has attended training on *Creative Curriculum* and uses this curriculum and other “child centered” practices in her classroom. Although she did not report any training on her demographic questionnaire, during the interview she stated she attended a training program on inclusive practices that prepared her for teaching in an inclusive setting. She was aware of child-focused practices and during the interview, she shared her meaning.

Child focused practice was taking that teachable moment during that child’s activity time and taking that teachable moment and expanding upon it and using those open-ended questions and expanding upon it for language development purposes and exploratory purposes and discovery. (Interview)

**Setting.** Miranda has one of three inclusive classrooms. There were nine children in this four-year-old classroom with two identified as having disabilities, speech and developmental delays. The Itinerant Specialists come into the center to provide services

and take the children to another room. Miranda has not seen the IEP but communicates and collaborates with the specialist and parents.

The classroom itself was very small. It was a small room with learning centers clearly identified and separated by three small and one large shelf that acts as a cubby for children's belongings. Learning centers include: (a) manipulatives and math, (b) music, (c) writing center with materials and prompts, (d) science area with natural objects, books, plants, a fish, a lizard (e) art with different materials, (e) small blocks with accessories as trains cars and people, (f) small housekeeping area, and (g) computer. Only two children can be in the area at once, although there were no limits or signs posted. Windows were wide offering light and the outside seems to be a part of the classroom. On warm days, the children were free to use the outdoors as a part of the classroom since that was where the easel and sand/water table was located. The outside was being rebuilt as a natural area and the play set was gone. There were gardens, and water fountains and natural objects for children to explore. There were two small tables for writing but no snack tables or teacher area. The counter top with the sink and cabinets seems to be the teacher's area as well as for storage. The bathroom was in the classroom. Children's work was displayed at eye-level and includes a storyboard with documentation of children's learning experiences. No commercial signs were visible and letters and numbers were on the shelves and the writing table.

**Video observation.** The observation began at 8:30 as the children entered the classroom after having breakfast. Initially there were only five children [one child receiving speech services], however two came in later during circle time. Children

transitioned easily from snack, washing hands and using the bathroom as a part of the routine. Children immediately went into the centers and began to play with the materials. Three boys went into the small block area and began to build trains and a track. Miranda seemed to move quietly, calmly and easily, though limited space, to talk with the children and asked frequent open-ended questions during the free time. Free play continued for more than 60 minutes. Children seemed to know what they wanted to do and a puzzle not finished the previous day remained for the child to finish. The children initiated all activities including the music and circle time. The children transitioned next for snack time, music and returned for circle time. Circle time was “show and share” as the children shared objects they brought from home.

### **Themes**

The videotape was reviewed several times to determine child focused practices implemented by Miranda during free time, routines and circle time. As previously noted, the practices were all coded then clustered aligning with the category code sheet (see Appendix K) to determine themes. During this process, practices that Miranda implemented most frequently were combined (reduced) and bracketed into themes. Miranda implemented implicit practices that were child centered. The emerging themes were developmentally appropriate practices: integrating concepts and content during play; scaffolding and building learning with open-ended questions; expanding language through socio-contextual communications; and, individualizing practices for every child. Her educational experiences included college courses and training, observation and relationships with family and supervisor (see Table 5).

**Table 5***Miranda Themes*

<b>Category</b>	<b>Child Focused Practice</b>	<b>Educational Experience</b>
Implicit	Integrates concepts and content during play through questioning	Experiences with her mother (parents) as first teachers.  College course work prepared her to integrate learning
Implicit	Scaffolds and builds knowledge through asking open-ended questions	Attended trainings and workshops in addition to college classes  Observed teachers implementing child-focuses practices.
Implicit	Expands language through socio-contextual communications	Experiences with her mother (parents) as first teachers  Supervisor provided resources to assist with her classroom
Implicit	Individualizes practices to meet each child's needs	Observed teachers implementing child-focuses practices.

**Implicit CFP.** *Miranda integrated concepts and content during play through questioning.* Child focused practices include planning the environment for all children to enhance learning opportunities (Copple & Bredekamp, 2009; Sandall et al., 2005). This includes having open-ended materials to engage children. Miranda moved freely from child to child to integrate concepts such as numbers into their play. She asked questions to encourage number recognition in addition to incidental teaching moments on other math concepts.

How many cars [B2 – yes] how many cars were on your freight car train? [B2, 1, 2, 4]. Were you sure? Lets count it together [1, 2, 3,4, 5] Great job. Now where was the caboose? [I don't have a caboose] Now lets look, I see some, look. Now you have a lot of these. How many Thomas's do you have? [3] Three Thomas's. (Video Observation)

Math seems to be something Miranda likes to encourage since there were several instances of counting during free play.

How's it coming along, how many did you get? Look how many red monkeys were in that barrel [um, a lot]. How many was a lot? Can you count them? Let me see you count them in the barrel. You'll have to take them out to count them. So you say there were 8 red monkeys in the barrel? Count them for me. Count. Count them put them in the barrel [1, 2, 3, 4, 5, 6, 7]. Yes, that's seven. (Video Observation)

As Miranda and G1 fill up the fish bowl, she again explores number concepts.

Now how many do you think it will take to fill up the fish bowl? [Maybe 8]. Eight. Let's see. We're going to stop at right about here. [Pours water into fish bowl.] How many was that [holds up 2 fingers, "2"]. How many was that? [1, 2] 1, 2, [3]. How many [4]. Do you think we need a little more? Will we make it 6, or 5? [There]. You think that's good enough? Look maybe [G1 adds more water, that's 6]. (Video Observation)

Miranda commented about this during the interview. "G1 was stacking some of the stackable and I like to incorporate math when I can. I like to get the children to estimate to calculate, so it's a form of a math practice." She intentionally plans the environment to develop concepts in math, science and geography. During the interview she reveals, "Because math, geographical, sequential order goes at every center at some point of time."

In reviewing the video, she asked several geographical questions during their play. “Where’s your train headed B3? [I don’t know]. Its headed to I don’t know? [I going to the North Pole]. To the North Pole.” She then gets out the globe and shares it with the boys. With one child, she encouraged her to create a pattern with her matching game.

Let’s see now, this line shows all the fruit. Now look this was the pattern you built. So this one was correct, grape, pear, apple. Now that’s right, correct. Good job now what comes next? Grape. Good job G2 [non verbal]. Now can you create a pattern right there for me to try. You can make your own pattern right there and let’s see if I can do it. Ok can you put one here? (Video Observation)

Miranda, looking at this part in the video laughs and said, “I love numbers and math.”

Miranda also used another implicit practice to build knowledge.

*Miranda scaffolds and builds knowledge through asking open-ended questions.*

Both the DEC and DAP recommend scaffolding an effective and systematic child-focused practice to help all children develop and progress in all areas (Copple & Bredekamp, 2009; Sandall et al., 2005). It can be a question, a hint or looking at play in a new way to enhance critical thinking. With children with disabilities it can be used to engage children with materials during play. Miranda used many open-ended questions during free play and circle time. She wanted to engage the children and sought opportunities to extend learning. In reviewing the video observation, Miranda used scaffolding with the boys building trains. “Were you going to build a depot this morning? . . . What will you find at the North Pole? [B2, over bridge, across, up top . . . hey its



Christmas mas Eve].” Miranda checked with the other children then returned to scaffold and extend the train play.

What was your trains doing? [It’s making a little yellow circle]. A yellow circle. What happens in the yellow circle? [It making a circle] It going to North Pole. Already]. Well who lives in the North Pole? [Santa Claus]. Well who was Santa Claus? [Look. B3 mine at North Pole too]. B2 who was Santa? [The guy that brings lots of toys when we were good]. When you’re good? What happens when you’re not good? [You won’t get any presents.] (Video Observations)

Miranda offered this comment during the interview about her use of scaffolding and building knowledge.

They were talking about the trains and I noticed as we go on further, I began to listen to the dialogue of the little boy on the carpet because he’s a reader . . . I want to see just how far they will go with the idea they have come up with or why they were using the toy in the manner, in which they were using the toy. (Interview)

With G1, she had an incidental teaching moment that went from counting with one-to-one correspondence to writing a number sentence on the board.

So you have 11 in the cup plus 1 was how many? [11, 12]. Good [Miranda turns to write on board] now G1 do you know what you just did? You counted [Miranda writing number sentence on the board] Eleven, that’s 11, plus, this was a plus sign. Now how many more did I need to make 12 [1]? [Writes equal] what sign was this [equal]? Very good equals [5]. Now  $11 + 1 =$ , how many monkeys were in your barrel? How many did you count? [12]. That’s right 12. We write 12 like that. To get 11, you took each monkey that you put in the barrel, one at a time, and got 12. (Video Observation)

Miranda looked for opportunities to build on learning. During the interview, she revealed how she used this method to learn from the children.

A lot of times I try and put myself in the place of a child. Children were very interesting because they come up with the reasons why they play something in a particular place. Reasons that you and I would never think of, so a lot of times I just want to know what they think of it, why they think of it and or use certain colors. Was there a reason that you use certain colors or you placed this here or stacked this a certain way. And, sometimes the answers will really, really amaze you or some will baffle you. (Interview)

Miranda also used this with her children with disabilities. G1 was drawing a picture of a house. Miranda comes over to her and asked about the house and who lived there.

What did you do on this paper right here? [I drew that one this my name.] And what was her name? Claire. Very good. You wrote it on a line, and what was this shape [house] and this was your house. A new house. How many rooms in this house [a lot]. A lot. [2, 3] Who lives in this house with you? [You]. I do!? I'm sure this was a nice house and I'll enjoy living there. I'll write what you said. (Video Observation)

Miranda also used scaffolding during her "show and share" time. This was a simple exchange but demonstrates her looking for opportunities to build on prior learning.

Ok. Tell us about this watch. [This watch put hand that]. You put it on your hand like that? Ok. What was that? What character was that? Who was that on your watch? [Spiderman] How many of you like Spiderman? [I do]. What you do with this watch? What does this watch help you to do? [I, I -] (Video Observation)

Miranda engaged children in play, integrated learning through scaffolding and also expanded language.

*Miranda expanded language through socio-contextual communications.* Miranda talked throughout the morning with the children. In social interactions such as play, children were provided with many opportunities to use language to express their thoughts

and ideas. When teachers interact with children and join into their play, expansions opportunities were created to increase child's vocabulary allowing practice with words for those thoughts (Copple & Bredekamp, 2009). This was an implicit practice as she added to the conversations and did not take over the conversation.

Miranda observed G2 in the manipulative game area. She was playing the game Operation by herself. She was very quiet so Miranda moved in to have a conversation while she was playing.

G2, look. She's having an operation, was that what you want to do? . . . Great job G2, you did 3 operations already. Now what's wrong with that little girl? [Not responding]. You're fixing her what? What else needs to be fixed? [G2, she's smiling back at you] You're taking her temperature. Her arm was now fixed. Great job G2. That's how T will be smiling when he comes back from his operation on Thursday. How fast can you do that G2? Were you being shy today with me? You're doing that fast. (Video Observation)

When G2 did not respond, Miranda used descriptive language in hopes it would develop into a conversation. G2 finally engaged the teacher when she said, "She's smiling back at you." Miranda discussed this further during the interview.

I was trying to promote her and trying to entice her to talk and she knew what she was doing. She was matching. Matching an injured person and making that person well again and where to match the different parts of the body to repair that injured person. So I know it was out of shyness because someone else was in the room but I was trying to everything I could to try and get her to talk. (Interview)

While Miranda was helping G1 wash her hands, B3 holds up an object he made. She began another conversation.

What was that B3? [It's a mow thing]. A mower? Well what does that do? [It goes through that, that]. Grass, the grass? Very interesting. What's the blue part? [Door, look at my mower]. I'm coming over there. I believe you guys have been on the farm. [We're on the farm in the trees.] (Video Observation)

During the video observation of circle time, "show and share," Miranda sees this as an opportunity to expand language with B4 (child with DD). He was sharing a collage he had made at home.

[That my Jacob, mmi-child *unintelligible*]. Now who was Jacob? That's my brother]. That's his little baby brother [dats Emy]. Emily. [wh]. I know that little boy. Who was that? [Me] Me who? What's your name? [*Unintelligible*, that's Taylor]. He's sliding [that's] Granny and Mimi. That's Bart the bear [*unintelligible*]. That's a T-rex. [Me, papa?] (Video Observation)

She tried to say the correct word for B4. Miranda was very pleased with B4's growth as she individualized her practices to meet his needs.

*Miranda individualized practices to meet each child's need.* In planning her classroom, Miranda considered each child. She knows their interests and their developmental levels. She meets children at their level then tried to encourage learning and development by spending time with each child. She knows G1 needs extra help with hand washing. At the sink, she has to prompt her what to do next.

Now let me see you make a lot of bubbles. Now what do you do, now, where else and on the wrist. [G1 washes hands and wrists] Ok. That's ok I'll help you finish. Good job G1. Now shut off the water after you completely dry off with the towel. (Video Observation)

During the interview it was mentioned how G1 washes her hands frequently. Miranda states, "That's what she likes to do." She was just "practicing" and this was "healthy."

Another time during the observation, Miranda encouraged B3 to put on the music. She wanted him to get more involved. “B3 would you like to come over and put on music.” Miranda spoke about this in the interview. “I asked him to be in charge of the music today. He can be very quiet.” She frequently encourages him to play with a peer. “And this was something I have taught them, to work as a team and work with one another.”

The circle time was another time to individualize. She used circle time to expand language and to help each child feel comfortable in a group.

Now what about here [hold cell phone). [B2 this was my phone and I love I push these buttons]. Show them the buttons. How so you push the buttons? [Hold it like this.] Where did you get the phone? [Chuck e Cheese]. Was that a special phone they were giving away at Chuck e Cheese? [Yeah, now they don't.] Nice phone. Make a phone call for me pretend you were talking to someone. What would you say? [Mama]. Ok. Let me hear your conversation. [Hi mama, what were you doing, don't do that]. Great job [laughter] (Video Observation)

She seemed to modify the conversation and level of questioning based on the child's ability. She did not ask B4 to have a conversation since he was just beginning to label and use language as mentioned previously.

Miranda talked with every child in the class and moved into their play looking for learning opportunities. She individualized and planned her environment to meet their needs. Her educational experience that guided this practice emerged into a similar theme, trainings, coursework and observing in an inclusive classroom.

**Educational experiences.** In discussing her educational experiences, Miranda revealed her college courses and some trainings helped her with integrating concepts

during play and other practices. She also stated her family especially her mother informed her practice to integrate concepts into play. Her supervisor provided resources for her, and this also informed her practices. Therefore, relationships built in the home and with her supervisor seemed to inform her practices.

*Miranda's college course work, trainings and opportunities to observe and practice strategies prepared her to build knowledge during play and individualize practices.* Miranda discussed college experience, specifically her Early Childhood Credentials and learning about the ECERS.

I think it was like back in the nineties, '96-'98 somewhere like that in between their credentials came in Smart Start came in to play and I was involved with the first of the ECERS rating scale.

She also spoke about a class on special needs. "I took this class over at the college which was really a phenomenal class. I learned a lot how to help children in play." She learned how to integrate learning through play for all children. Miranda also implemented another cognitive strategy with the children, scaffolding to build on prior knowledge by asking open-ended questions. Miranda knows she learned to implement this in a class she took, but was unclear as to what class it was, "The curriculum where you learned all that. When I went on to further my education." She knows it was during her college experience but also trainings and workshops.

Miranda frequently attended the Smart Start Technical Assistance Center (TAC) trainings and workshops and used the resources available. This was another way she learned to implement concepts and content through play.

You find out just by going in and going to the available workshops and trainings. Just reading what they have, offering different articles and going into TAC and getting the materials. By reading this stuff over and over again and talking with people. (Interview)

She was able to observe teachers and children interacting and this prepared her for working with children with disabilities. She observed the practices in other inclusive settings then adopted them as her own. The observation helped her understand scaffolding and how to individualize with children with disabilities.

I had an opportunity to go over and stay for a morning with just a few of my colleagues and we were able to see how teachers actually functioned in the classroom with children with disabilities and children without limbs, and all kinds of situations. And they felt comfortable with it and I saw how they were conversating (*conversing*) with the children interacting. (Interview)

During the observation Miranda noticed, “They had the little gross motor things and doing exercises and I am thinking this, I can actually do this with each child. So by seeing it having an opportunity first hand to witness it, then I knew I could do it.” She then added “but it took practice.” Miranda observed teachers implementing practices and then individualized and implemented on her own. She continued, stating she needed to “find out how I can help that child and solve the problem.”

As Miranda connected her education experiences to her practices, she discussed her experiences in her family were important, since her mother was her “first teacher.” Her professional relationship with her supervisor in addition to her family influenced several practices.

*Miranda connected her family relationships and her relationship with her supervisor influenced practices.* Miranda spoke about her mother instilled a love for math so she integrated math concepts into her own classroom.

When I was young from my mother when she began to teach me about quantities and qualities and alphas and numbers. Then I took that when I had my own child and I incorporated what I learned from elders as far as how to measure . . . so it really starts at home . . . I brought that into the classroom and acquired additional education.

She felt she “learned as a child from my parents and went on to teach my child and I got that mother wit or that nurturing instinct there.” She nurtures children in her classroom just as she was nurtured in the home. She enjoyed “conversating” with children like her “mother did with her” (Interview).

So, my interests became children and I need to really look and see. There was a need here for people who love children not just get into the field, but love children. And they really just, just take hold of me and I would take hold of them and I would, well it was like a perfect fit. (Interview)

In addition to her family, Miranda had a very good working relationship with her supervisor. Miranda’s supervisor provided resources to assist with her classroom practices. When she does have a problem or a questions she goes to her supervisor who then gathers resources for her.

I am not fearful of going to my director for she’s very helpful and she volunteers information and she brings in certain articles like on speech or behavior that she feels would help us in the classroom, in an inclusive environment. She does it regular and those I appreciate it and I put it in my little portfolio and I go back and use it to refer when I come across a certain situation. (Interview)



She specifically was provided resources on including children with disabilities in the classroom. Also, when she wanted to know how to help with language, her supervisor provided her with articles. Therefore, in connecting her implementation of practices to educational experiences, two overall themes were confirmed; her college coursework and trainings observing practices, and family relationship and professional relationships.

### **Summary**

Miranda was observed implementing implicit child focused practices that were developmentally and individually appropriate. Several themes emerged as she implemented practices (see Table 5). She used several cognitive strategies such as integrating concepts and content during play. She “loves” math and science and tried to include opportunities for learning in all of her centers. As children moved through the centers, she used scaffolding and built knowledge through asking open-ended questions. During scaffolding, she frequently expanded language by having several socio-contextual conversations. This was evidenced during routines, free play, and circle time. Miranda individualized her practices for children with disabilities. She related her implementation of practices to her upbringing, her parents (mother) as her first teacher and this influences how she regards others. College coursework, the early childhood credentials informed her practices. In addition, she attended workshops and trainings including an opportunity to observe teachers in an inclusive setting. This opened opportunities for her for teaching an inclusive classroom. Her supervisor provided resources to assist her with any problems that might occur in the classroom.

## “Mariah”

### Demographic Context

Mariah was the teacher in a community based NAEYC accredited five star childcare center in a suburban county. This was Mariah’s second year teaching in this center and recently completed her BS degree in Human Development Family Studies, which includes B-K licensure. She also recently enrolled in a Masters of Education program with a concentration in Special Education. She had experience working in a childcare center assisting her mother who owns and operates a childcare (See Appendix A). She stated she did not follow a specific curriculum. She described her meaning of child-focused practices.

I think of child-focused practice, I think of everything being for the child. Everything being focused on the child. The teacher meeting the child’s needs, any cost, not just overboard with it. I think the teacher is the nurture for the child and being the one to guide the child into learning new things and new concepts.  
(Interview)

**Setting.** Mariah teaches nine children, four identified as having disabilities (2 DD with PH, 1 speech, 1 emotional) in this small inclusive three-year-old classroom. Itinerant Specialists went to the center for the two children with DD and provide therapies outside the classroom. The other two children receive services with private contractors and Mariah has contact with them with permission from the parents. Mariah did not participate in any IEP planning nor has she read the IEPs. She was informed that they do exist but has never seen them.

The room was arranged into several learning centers which include: (a) dramatic play with accessories, (b) books and soft items, (c) manipulatives and puzzles, (d) discovery with science and math manipulatives, (e) art and writing, (f) small blocks and accessories, and (g) sand table. The room had small low shelves (three) with materials clearly identified and used as separators for the centers. There was only one small round table for four to sit at in addition to a small square table in the dramatic play area. All teacher materials and extra supplies were in the cupboard above and below the sink for hand washing. The sink was high and children used a stool to wash their hands. There was direct access to the outside play area with some climbing toys, balls, and a natural area. The windows added space and light for this small room. Children's work displayed at eye-level and above with a few commercial posters and an alphabet and numbers above eye-level. Centers were labeled with clear indicators on how many children can be in a center. The class shared a toilet and sink with another class. Children had breakfast, snack, and other meals in a small cafeteria. There was also a large room for gross motor play. It was a developmentally appropriate environment, however space limits children's choices and the natural flow in the classroom

**Video observation.** The video observation took place in the morning over 60 minutes and included transitions, hand washing, circle time, and centers. Since it was a small room children rearranged the class for circle time. In this task, the children took responsibility for their classroom and seemed engaged in the setting up and breaking down for circle time. Most of the class time (35 minutes) the children were transitioning and involved in routines such as hand washing, setting up the centers and circle time.

The routines seemed typical and during circle children sang, greeted each other, repeated letters, numbers, and calendar activities. Three children with disabilities were identifiable and one was not. However, after the observation, Mariah pointed him out. The classroom appeared child centered with developmentally appropriate materials, with teacher directed child-focused practices.

### **Themes**

Mariah planned the learning environment to include several appropriate learning centers for children to explore and engage with the materials. She also used routines to structure the day to insure all children have opportunities to develop self-regulation (Copple & Bredekamp, 2009). Specialized procedures were embedded within the routines to assist children on specific target skills. This was accomplished through explicit teaching practices as the teacher directs and managed the children guiding them to reach a goal (Sandall et al., 2005). During the HyperResearch analysis, several consistent explicit child-focused practices emerged connecting to educational experiences, specifically her college internship experience in an inclusive setting (see Table 6).

**Explicit CFP.** *Mariah used direct guidance and redirection during routines.* It is consistent with both DEC as a child focused practice as well as developmentally appropriate to develop self-regulation in children (Copple & Bredekamp, 2009; Sandall et al., 2005). For typical and atypical children, specialized explicit strategies are useful to develop skills in an early childhood environment (Odom et al., 2002). Mariah felt she must implement guidance consistently to control behaviors. She used corrective feedback frequently during routines:

Correcting behavior. You can have a well-behaved class. Some, you can just have order, and the day will go a lot smoother. So I guess I try and stay on them with the behavior cause I know they can do it . . . So, I feel like if you have and not even a military, you know everything has to fall into place, but you know you can have some control over the behaviors in the classroom it helps the day go by.  
(Interview)

**Table 6**

*Mariah Themes*

<b>Category</b>	<b>Child Focused Practice</b>	<b>Educational Experience</b>
Explicit	Direct guidance and redirection during routines	Field experience, her college internship, prepared her for implementing guidance practices  Practices what she learned from her internship in her own classroom.
Explicit	Direct instruction across activities and routines to meet the individual needs of the children.	Internship at the children's center  Observes the children and used practices based on collaboration with the therapist
Explicit	Rote and recall strategies to teach concepts	Internship at the children's center  Experiences working with her mother in childcare
Implicit	Intermittent conversations with the children during the routines and transitions	Internship at the children's center

Mariah transitioned from snack to the classroom during the observation. As the children entered, they were instructed to remain at the door. Next, they were directed to sit on their spots or crayons.

All right, lets line up where our crayons would be [removed during holiday].  
[Holding fingers to lips] Sh. Go ahead. Line up where your crayons would be.  
Where would your crayons be? Line up where they would be [Entering space in

front of sink heading toward bathroom]. If they were down right now. Go ahead [Sh sign on lips, 2 children imitate] (Video Observation)

Mariah directed B1 (child with DD) with the hand washing. As he jumped down, he was immediately corrected.

Right. [to B1] You do need a paper towel your hands were still wet. [Assists B1 on stool and with towel – he was unstable on stool]. Here [gets more paper towel]. Good job. [B1 unsteady but jumps from stool] B1 do we jump down from the stool like that? [Pointing to stool, B1 goes up stool]. You need to go down the correct way. Thank you. (Video Observation)

As the children waited, she redirected the boys who were finished washing hands to set up for circle time.

Listen when you're finished can you sit the chairs up for me [nods]. Ok [B1 I want help] you can help B2 put the chairs up but wait until B2 was finished. B3, I hope you were keeping your hands to yourself. G3, wash your hands. [B3 gets up out of line to assist B2]. B3, you come back here, you have not washed your hands. [Puts B3 on floor to wait] (Video Observation)

As she redirected the boys, she was still guiding and directing each child washing its hands. "Dry your hands off. Don't rip it. (G3 smiles and giggles) Were you being silly? A little silly (smiles) . . . B3, now wash your hands." During circle time, she guided the children into their spots, and gathered her materials.

Boys come have a seat. B1, B2, B4, come have a seat. You all have a seat. B4 What were you doing over there? [in housekeeping] It's fine. B4, keep your hands to yourself. Do not hit, ok? (Video Observation)

The children were frequently given clear directions. Mariah was consciously aware of this practice and felt it was what made her classroom successful. “Redirection. I am redirecting and that was one thing I tend to do with him (B3) the whole day” (Interview).

Mariah used routines to develop self-care and self-regulation. Using corrective feedback and some positive reinforcement, she guided and managed behaviors in her classroom. She also used a directive approach during activities to individualize practices.

*Mariah provided direct instruction across activities and routines to meet the individual needs of the children.* Mariah was not familiar with the IEPs on any of her children but she did individualize practices.

I know that G1 has an IEP and takes speech privately. B3 has an IEP and I haven't seen it, and I know he goes to a psychiatrist and everything. And I haven't seen anything on him. Now B1 and G3 both have IEP's and I haven't seen them. And that's a shock I guess. (Interview)

She targeted specific skills based on her own observation and in collaboration with Itinerant Therapists and parents. Mariah used a direct approach telling children what to do to address their target goals. With G1, (Speech) Mariah encouraged hand washing then encouraged her to use words.

G1, you may wash your hands [sitting on floor]. Alright get soap. Good job. Alright dry them off very well then have a seat [pointing to spot]. We're going to have circle time after we wash our hands [G1, wet]. They're still wet. Here Maybe you need a bigger piece of paper towel. Was that better? [G1 nods head] You use words. Was that better [G1 nods-yes]? Better. [Better.] (Video Observation)

For B1, she tried to develop self-help skills and following directions, breaking it down into simple tasks.

Ok, B1 you have to go pee pee. Let me hold it (door). Good job (B1). Your mommy will be very happy . . . After you're done washing your hands, get your lotion, ok? Turn the water on. You have to do that before you wash your hands ok? What's next? Rub them. Good job. After you dry your hands off what did I ask you to go and get? B1, you didn't get all the soap off your hands. I asked you to get the lotion on your hands. (Video Observation)

The two twins, B1 and G3 had cerebral palsy and received itinerant services from OT, PT and SPL. Mariah did not watch or participate when related services were provided but she did speak with the specialists.

A lot of times for B1 and G3 it was through the speech therapy. She comes here and she lets me know what they were working on so I can. So they get speech, PT, OT so whatever they were working on I try and carry it into the classroom. (Interview)

Mariah makes frequent contact with G3. She reinforced specific skills during the routines of the day.

Good job G3. Watch out so B3 can wash his hands and remember keep those heels down, heels down . . . Ready G3? [sings song] Say hello to G3. Hello. Good job using those words. (Video Observation)

During center time, G3 changed her center and the teacher asks her to think about the rules. G3 used sign language to talk.

How many were suppose to be in books? Come here G3 [signs] show me [signs] how many [hold finger up] one, say one [one]. You don't want to do kitchen? Come here and keep your heels down. Would you like to go to science?



You going to stay in the kitchen or do sand? [sand] Good. Ok. (Video Observation)

Mariah felt she addressed each child's needs. "With B3, I get things from the Dr. what they were working on and his mom talks to me so I can help" (Interview).

Another explicit practice observed, was using rote and recall. Mariah asked closed questions and expected the children to respond. She also used rote drill during songs and activities.

*Mariah used rote and recall strategies to teach concepts during activities.*

According to DAP, learning the alphabet or numbers were important part of literacy. Children should have the opportunity to see letters, numbers, and words in the classroom and "see them, touch them and manipulate them in their work and play" (Copple and Bredekamp, 2009, p. 330). In Mariah's classroom, the letters and numbers were practiced with recall and drill, a very direct explicit practice. Direct instruction was an appropriate way to teach children, especially those with special education needs, rote drill can be effective (Forness, Kavale, Blum, & Lloyd, 1997).

Mariah used recall during circle time as children repeated letters and numbers. She held up a letter, children identified it then practices the sound.

Was this our letter M? [holds in front] And what does M say? (mmmm) Good job. M says "mmm." My says [mmm] [singing] every letter makes a sound. M says "mmm." Good job B2. What letter? [M] But what letter? [m] (Video Observation)

As the children sang good morning and each had to identify the letter in their friend's name.

Alright B2 pick a friend [G3]. Do you know what letter G3 starts with [T]? High 5 good job . . . Say hello to G5. [Everyone waves and says hello] G5, we can't hear you [hello]. Ok pick a friend. [G2]. G2. Do you know what letter it starts with G3 Say it G2? That's right A "A" (Video Observation)

Mariah was aware of her practice and felt she was teaching children to identify letters.

Letters. With B1 and his letters, I love to give him that encouragement when he gets a letter. Um he doesn't know very many but for him to know what G2 starts with or G3 I was super happy about that. (Interview)

The children continued naming the letters then directed to the calendar to name the month and the day.

Do you remember what month it was? [Mariah stands up and goes to calendar]. G5 do you remember what month? [January]. That's right, January. [Standing over children] And what letter does January start with? [J] Good job. Today was not Monday anymore. We're going to say goodbye to Monday and say hello to [holds up Tuesday card]. [Thursday] No. [Tuesday]. Yes. Good job, Tuesday. Hello to Tuesday. Ready [singing and clapping]. Today was Tuesday.

Mariah next asked the children to identify the number for the day. "Were you ready [holds ruler as a pointer standing above child's eye level counting]? 1 2 3 \_\_\_ (4) 4. So, what number? [four] Four" (Video Observation). When asked about this practice, Mariah was clear she used rote learning daily.

Ok. I guess we were learning numbers. Through counting, some of them don't recognize numbers so that's fine but we were trying to get them to rote count. To get there rote counting down. (Interview)

Mariah used labeling and recall to expand their language and vocabulary during book sharing.

Alright what's next? What was that called? [Ambulance] An ambulance. You're right that's a big word [lights on it]. That's right it does have lights on it . . . Ok. [To B3] That was a boat. That's a motorcycle. Do you have a motorcycle? You ride on it or in cars? Was it a toy motorcycle? [No response] (Video observation)

She was aware of using direct instruction and rote learning as a way to develop skills.

However, she also used conversations with children, a more implicit practice.

**Implicit CFP.** *Mariah had intermittent conversations with the children during the routines and transitions.* Conversations were opportunities to expand language and build relationships. Building of relationships was a critical part of developmentally appropriate classrooms. It was a way to include children with disabilities and develop a sense of belonging. Mariah was just beginning to use this practice in her classroom.

Recently, I find myself conversing with them a lot throughout the day. It's not always redirecting, a lot of it, sometimes, it's like they were my little friends and we just sit and have conversations with them throughout the day. (Interview)

While hand washing with the children, a conversation began about going to the doctors. It ended with a brief opportunity to use scaffolding.

You want to go to the doctor you do? [Nods] You like going to the doctor? . . . [G4, I get shots at the doctor]. Shots. You don't like shots [G3 signing doctor and shots]. But shots make you feel better sometime. They protect you from getting diseases. [G2 I cry and little bit when I get shots]. You do? Do they hurt? . . . (Video Observation)

The conversation was brief, yet an opportunity to build relationships and learning. When Mariah was asked about this practice she laughed after observing the video.

Lots of conversations. Lots and lots of conversations. That usually how we were all sitting down like that and this was normally how it goes. If someone starts with one thing, it just leads into this long conversation. Like about the shot, then we start talking about band aids and then crying when you get a shot. So, we end up have 20 conversations about little things. (Interview)

Another conversation began, but ended with an interruption during hand washing.

Say it one more time please. [B4 mumbles]. Granddaddy was hammering nails with you? Was it toys? [No] Was granddaddy building something? [No, we were doing something metal] Metal. Where did you get metal? [We put nails in it] (Video Observation)

Mariah felt her conversations help to build relationships and a sense of community. “So that what a lot of times our conversations were. I try and show them that even though we were all different we all have some things that were alike about us” (Interview). She enjoyed watching the conversation on the video and noticed she closed the conversation.

So my thing was to stop him right there and let him know conversation time was over and we were saying good morning. Then I kind of felt bad because then I didn’t realize that B4 had his hand up. (Interview)

The examples were limited, but Mariah sees socio-contextual conversations as a way to build opportunities. She related having conversations was natural, and tried to think of a connection to her educational experiences. When reflecting on her educational experiences to prepare her to implement these practices, she was very clear, her internship as a part of her college education influenced practices.

**Educational experiences.** Mariah was a recent college graduate. She related that one course in particular connected to implementing the child-focused practices she used,

her internship. This was a very influential experience and seemed to develop her as a teacher. She also connected her relationships with the itinerant specialists and her mother affected her practices.

*Mariah's field experience, her college internship, prepared her for implementing direct explicit practices.* Mariah implemented a specific child-focused practice consistently during the observation, guiding, redirecting and managing behaviors. As a part of her B-K licensure, she completed a six-month internship at an exceptional children's center. In the experience, she observed the lead teacher and adopted her practices. Her mentor guided her as she implemented the practices. "I really think it just stems from having the good time that I did at the children's center. The teacher that I worked with, phenomenal. She was phenomenal" (Interview).

Mariah revealed her classroom was very much like her internship. "It was in an inclusive class since there were children there that were typically developing" (Interview). Mariah practiced what she learned from her internship in her own classroom. She also said she needed to practice to become more "patient" with the children. She learned a great deal from the internship, but needed to keep "practicing with her own classroom" (Interview). "You have to manage the children and that takes practice."

This inclusive field experience shaped her use of direct instructional rote and recall strategies. "So a lot of the things that I do I learned from there, the 6-7 months I was there." This theme was further reinforced, "I just think the time spent at the children's center really" (Interview). Mariah stated during her circle time, the songs she

sang were learned during her internship. “Everyone of those songs, good morning songs, the majority of the songs we sing I got from her. I do what she did” (Interview).

One implicit practice that emerged was having conversations with children. She seemed to enjoy having socio-contextual conversations. Asking about her use of conversations she reinforced, “I think the whole thing was being at the center.” She then continued to discuss how watching the children sometimes helped her know what practice to implement.

*Mariah observed the children and then individualizes practices based on collaboration with the therapist.* She used her observation skills to determine the needs of the children then implements a practice.

Well sometimes, I just sit and watch (the children). Like if I observe then and I think, wow, you know watching B1. When B1 and G3 first came I realized they can't hold a fork and a spoon correctly so that's when I am thinking well they were going to need help with that. So I bring it to the therapist and tell them and they said you know that's a good thing to work on or a goal we need to put down . . . and a lot of times I just sit back and see what they can and can't do and then maybe I can add that into a lesson plan or implement an activity for that.  
(Interview)

Mariah clearly planned activities to meet the unique need of her children with disabilities. Her internship at the center developed her skills to work with children with disabilities but also helped her collaborate with the different therapists and parents concerning the implementation of practices to meet each child's individual needs.

When asked about other experiences that may have influence her practices, she revealed her mother influenced her practices. This has helped her grow as a teacher.

*Mariah had experiences working with her mother.* Mariah's mother had a childcare and she worked with her. When she had a chance she continues to work with her.

And also by working with my mom, because she has her own daycare and I think that was so. I get to work a lot with her also so I think that too. I do what she does. (Interview)

She also shared how her mother was an assistant teacher working with children with disabilities.

Um. I remember being really really young when I was about 10, I lived in Florida and my mom she was a teacher assistant and I went there and that's what I remember. My mom worked with children with disabilities. (Interview)

Her mother was a model for her and provided opportunities to work with children.

I realize I was really really young being in that environment and being around children with disabilities and realizing you know they were not just called special needs children for a reason. (Interview)

Mariah used several explicit practices to instruct and direct children's behavior and learning. In reviewing the practices with Mariah, it was clear she primarily used explicit instructional techniques she had modeled from her internship experience and working with her mother and the specialists. Mariah was optimistic about going on for her Masters of Education and hoped to be better prepared for teaching in inclusive settings.

## **Summary**

Mariah was teaching at this high-quality childcare center for less than two years. Her classroom was small with only nine three year olds, four with special educational needs. The class appears to be developmentally appropriate yet children did not seem to initiate many activities. Mariah used guidance and redirection during routines and activities and integrated learning with direct instruction adapting practices for her children with disabilities. She was not familiar with the specific goals in the IEP, but collaborates with specialists and parents to embed the observed needs of the children. Her special children were her focus and feels she was improving learning and behavior using direct instruction methods. She believed her use of rote learning and recall develops literacy. All children seemed to know the routines and Mariah revealed both she and the children “thrive” on routines. Mariah was beginning to use socio-contextual communication strategies as she and the children “love” conversations (see Table 6).

She acknowledged her educational experience that prepared her to implement practices was her “tremendous” internship at an exceptional children’s center. In addition, her collaboration with specialists and working with her mother at the childcare center informed her practices. As she grows as a teacher, she used observation and tries out new strategies.

## **Second Level Analysis Pairing**

The first phase of the analysis describes each case and explores meaning of child focused practices implemented in the context of inclusive settings. During this phase, similar patterns were coded then turned into themes for each individual to determine if a



phenomenon emerged in implementing child-focused practices. At the same time, educational experiences were aligned with the implementation of practice based on interviews. To continue to explore the phenomena of the relationship between practices and educational experience, meaning and themes were paired within each case. Within-cases analysis is a part of the clustering phase to explore themes by looking for consistent patterns (Creswell, 2005; Shank, 2006) across cases. Each case was paired based on contextual features; Head Start, Childcare and Public Pre-K. All were five star high-quality settings as determined by the Division of Early Childhood in North Carolina. Through triangulation of the data, common themes were identified.

### **Pairing Head Start**

Both Head Start classrooms operated under the same non-profit organization in the county. Therefore, the structural management was the same and both teachers had the same executive director. However, Nancy's classroom was onsite at the main Head Start office. Isabelle's classroom was located offsite in another town within a public school building. Head Start and Title I funded Isabelle's classroom (see Table 9).

**Demographic pairing.** Both Nancy and Isabelle have similarities. They both taught in a pre-K classroom between 16-18 years. This implied they both have experience teaching young children. They also had previous experience teaching young children with disabilities. Both Isabelle and Nancy were lead teachers in a "More at Four classroom" which served young children with disabilities. The number of children they served was also similar, 16-17, each having an assistant teacher. However, these were the only patterns demographically. Nancy had four children with special needs in her

classroom, two with moderate delays one having autism spectrum disorder (ASD), and two with speech/language needs. An AmeriCorps volunteer provided additional support during the day. Isabelle had only one child with an IEP and she said for speech only. Another child was in the process of identification.

Another difference between Isabelle and Nancy was their educational attainment. Isabelle has completed her Master's degree and licensure in B-K and frequently attended workshops and trainings. Nancy had her AAS Early Childhood Degree and attended trainings that Head Start offers on "paper work and things" (Nancy, Interview).

**Child-focused practices.** The decision to implement a practice is primarily the responsibility of the teacher. Both teachers use the *Creative Curriculum* in their classroom. There were no common themes in the area of child-focused practices (see Table 7).

**Educational experiences.** Isabelle and Nancy agree their college experience facilitated their implementation of practices. While there was a strong connection for these two teachers in the area of educational experiences, their college degrees were very different a MAT Birth-Kindergarten versus an AAS in Early Childhood. However, Nancy credited her internship and lab experience as having the greatest impact. Isabelle did not connect implementation of practices to her internship or lab experience but identified a relationship with a supervisor and mentor in addition to the content of the classes preparing her to have a solid foundation in DAP.

**Table 7*****Theme Pairings Head Start***

<b>Implicit Child Focused Practice</b>	<b>Isabelle Nancy</b>	<b>Connection</b>
Uses acknowledgement and recognizes children's success	✓	
Integrates concepts and content during play with incidental teaching moments	✓	
Scaffolding to build knowledge through asking open-ended questions	✓	
Individualizes and adapts activities for each child	✓	
Socio-contextual conversations and social narratives to guide behavior		✓
<b>Explicit Child Focused Practice</b>		
Positive guidance and redirection with clear and specific choices.		✓
Used recall and response with prompts and cues to build knowledge		✓
Embedded instruction across activities and routines for her children with special educational needs		✓
<b>Educational Experiences</b>		
Acknowledges her relationship with her mentor and supervisor	✓	
College coursework and training on DAP	✓	
Trainings and workshops on DAP	✓	
College coursework and practicing what she had learned	✓	✓ College coursework on curriculum and strategies with opportunities to practice.
College classes prepared her to use guidance		✓
Connects her practice to modeling and collaborating with the itinerant specialists		✓
College field experience and practice implementing the practices		✓
Questions her ability in implementing practices		✓

**Summary.** During this pairing phase, it was clear that Nancy and Isabelle relied on their college experiences for implementation of practices but they both implemented different child focused practices, although both used *Creative Curriculum*. Demographically their years of experience working in pre-k were similar as was their experience in inclusive settings.

### **Pairing Public Pre-K**

The classrooms were both located at a separate public school building that was renovated to house preschool programs for exceptional children (EC). Specialists, OT, PT and SLT had offices and rooms to provide therapies. Other exceptional children's services were located in the building with offices and rooms for training.

**Demographic pairing.** There were similarities between Mikell and Jenny (see Appendix A). Both had 17-18 children in their classroom with approximately one-third of the children having disabilities requiring Itinerant Specialist (OT, PT, SLP) services implemented consistent with IEPs. They both participated in trainings on special education specific to child-focused practices.

There was however, a discrepancy between educational attainment and years of experience. Jenny completed her Master's degree and licensure in B-K (2002) and has 35 years in Pre-k with the last 10 in EC Pre-k. Mikell graduated with her BS degree in Secondary Education (1985), became certified in Preschool Special Education by taking the National Teacher Exam in Preschool Special Education, then grandfathered under the Department of Public Education for her B-K licensure. This required her to take CEU credits (7) in special education and reading difficulties. Mikell taught kindergarten for

seven years and had been teaching Pre-k for the past 10 years. Jenny had more years of experience and higher degrees.

**Child-focused practices.** Both teachers used the *Creative Curriculum* in addition to *Letterland* and other curriculums. Both also mentioned having a thorough knowledge of each child's IEP and participated in developing the IEP in most cases. In analyzing and bracketing the child focused practices no new themes emerged. However, there was consistency implementing explicit child focused practices confirming the original theme (see Table 8).

**Explicit CFP.** Several practices overlapped during this pairing. Both Mikell and Jenny used direct guidance and redirection with clear expectations for children to use their manners. Mikell and Jenny also embedded IEP goals for each child during routine and activities. They were both familiar with the children's IEPs and knew firsthand what the goals were. The IEP goals were embedded during routines and activities. Another consistent theme was confirmed, connecting the IEP to educational experiences.

**Educational experiences.** A pattern was confirmed connecting the implementation of child-focused practices to educational experiences during the pairing. Both Mikell and Jenny revealed IEP and training on the IEP informed embedding practices. Consistent with the use of embedding practices, the IEP provided the educational context to guide the implementation of practices. Another theme was confirmed: both Mikell and Jenny disclosed opportunities in their family provided educational experience. A connection was made to family as an education experience.

**Table 8*****Theme Pairings Pre-K***

<b>Implicit Child Focused Practices</b>	<b>Mikell</b>	<b>Jenny</b>	<b>Connections</b>
Acknowledged and recognized children for following directions and completing tasks.	✓		
Integrated learning concepts and content during play	✓		
<b>Explicit Child Focused Practices</b>			
Guidance and direct instruction providing clear choices and expectations for performance		✓	Used positive guidance and redirection with clear expectations to use their manners
Encouraged children to use manners to positively guide and redirect their behavior	✓		
Embeds IEP goals for each child into routine and activities	✓	✓	Embedding IEP goals for each child during routines and activities.
Recall and rehearsal with closed questions to <b>expose</b> children with special needs to concepts		✓	
Used typical peers to model for children with special educational needs		✓	
<b>Educational Experiences</b>			
MAT in B-K prepared her for implementing this and all practices		✓	IEP and training on IEPs informed embedding practices.
IEP and training on IEPs informed embedding practices.	✓	✓	
Experiences as a parent and teacher of her child with special needs		✓	Opportunities in their family provide a educational experiences
Connects her practice to her family background and her common sense.	✓		
Experiences working with children of differing abilities encouraged new practicing strategies	✓	✓	Experiences working with children of differing abilities encouraged practicing new strategies
Resources provided by her supervisor as a form of professional development and practiced implementing strategies	✓		
Observation and modeling in other inclusive classrooms	✓		

A similar connection included their years of experience working with children of differing abilities encouraged practices allowing opportunities to practice strategies. Mikell and Jenny have worked in the pre-k inclusive setting for almost 10 years. This had provided an opportunity to have a variety of experiences with many types of children.

**Summary.** During the pairing of public Pre-K inclusive classrooms, several practices connected to educational experiences were confirmed. Contextually they were similar in number of children in the classroom including children with special needs. They also used comparable curriculum and attended trainings. Both implemented explicit practices and followed the IEP as a guideline for practice. The themes for educational experiences were confirmed as well.

### **Pairing Childcare Classrooms**

The classrooms were both at the same NAEYC Accredited childcare center. This center had three inclusive classrooms. Two of the teachers participated from this center participated in the study. The center and classrooms were small and housed in a church. Teachers use additional rooms for lunch and snack, gross motor play, and specials such as music. Itinerant Specialists came into the center and provided services to the children with special needs consistent with their IEPs. Services were provided outside of the classroom.

**Demographic pairing.** There were few similarities between Miranda and Mariah (see Appendix A). Both had 9 children in their classroom. However, in Miranda's class one child had developmental delays and one child speech only. Mariah had four children

in her class with IEP's, two with developmental delays, one speech only, and one with emotional and adjustment issues.

There was a slight discrepancy between educational degrees and years of experience. Miranda has a BS in Business Administration/Accounting with two early childhood certificates, Administration and Early Childhood Education. She had to 54 credits earned toward her AAS degree in Early Childhood (2006). Mariah has her BS in Human Development and Family Studies including a B-K Licensure (2009). Both did not feel they had participated in training or workshops on child-focused practices. Teaching experiences were dissimilar with Miranda having 15 years in Pre-k and Mariah finishing her second year.

**Child-focused practices.** Only Miranda reported using a curriculum, *Creative Curriculum*. Both mentioned awareness of the IEP's but did not have a copy nor did they participate in developing the IEP. Any information about the IEP and goals were from the specialists and the parents. In analyzing and bracketing the child-focused practices, there were few connections (see Table 9).

**Implicit CFP.** Miranda implemented implicit child focused practices in the context of a child-centered environment. She used a great deal of conversation to expand learning and development. Mariah also used "lots of conversations" (Mariah, Interview) and asked questions. Since both used socio-contextual conversations to enhance learning and development this theme was confirmed.

**Educational experiences.** A pattern emerged connecting the implementation of child-focused practices to educational experiences during the pairing.



**Table 9*****Theme Pairings Childcare Classrooms***

<b>Implicit Child Focused Practice</b>	<b>Mariah</b>	<b>Miranda</b>	<b>Connection</b>
Intermittent conversations with the children during the routines and transitions	✓		Using socio-contextual conversations to enhance learning.
Expanded language through socio-contextual communications		✓	
Integrated concepts and content during play through questioning		✓	
Scaffolds and built knowledge through asking open-ended questions		✓	
Individualized practices to meet each child's needs		✓	
<b>Explicit Child Focused Practices</b>			
Positive guidance and direction through routines	✓		
Direct instruction across activities and routines to meet the individual needs of the children.	✓		
Rote and recall strategies to teach concepts	✓		
<b>Educational Experiences</b>			
Field experience, her college internship, prepared her for implementing guidance practices then practicing.	✓		College coursework (including field experience) with opportunities to implement practices.
College course work prepared her to integrate learning		✓	
Observed teachers implementing child-focused practices.		✓	
Observed the children and used practices based on collaboration with the therapist	✓		
Experienced working with her mother in childcare and experienced with mother (parents) as first teachers	✓	✓	Family relationships (mother) provided experiences.
Attended trainings and workshops in addition to college classes		✓	
Supervisor provided resources to assist with her classroom		✓	

Both Miranda and Mariah acknowledged college coursework (including field experience) influenced practices. In addition, family relationships affected implementation of child-focused practices.

**Summary.** In pairing the two childcare classrooms, contextually they both had the same number of children. While both had BS degrees they were in different areas. Only one implicit child-focused practice was similar, using socio-contextual conversations. The pairing corroborated the influence of college coursework with opportunities to practice strategies as well as relationships with family.

### **Cross Pair Analysis**

The final level of analysis for pairs included looking for connections between pairs. The cross pair analysis did not reveal any new themes for implementing child-focused practices. Creative Curriculum was implemented in two of the settings. The pairings revealed consistency within public pre-k only (see Table 10). A consistent pattern across pairs did emerge for educational experiences informing practice, (a) *college coursework on curriculum and opportunities to practice strategies* and (b) *influence of family relationships on practices*.

### **Summary**

The cross pair analysis, second level in the clustering and bracketing process, bounded and paired each like setting. Few similarities emerged. In pairing Head Start some contextual patterns, such as number of children in the classroom and using the same curriculum emerged. However, there was a difference in the number of children with disabilities and type of disability.

**Table 10*****Cross-Pair Analysis Themes***

Category	Head Start	Public Pre-K	Childcare	Connection
<b>Contextual Themes</b>				
Children in classroom	✓	✓	✓	Number of children.
Children w Special Needs		✓		
Education			✓	
Training		✓		
Years of Experience	✓			
Curriculum	✓	✓		Using Creative Curriculum
<b>Implicit Child Focused Practices</b>				
Using socio-contextual conversations to enhance learning.			✓	
<b>Explicit Child Focused Practice</b>				
Used positive guidance and redirection with clear expectations to use their manners		✓		
Embedding IEP goals for each child during routines and activities.		✓		
<b>Educational Experiences</b>				
IEP and training on IEP's tells a teacher what practices she should implement directs embedding practices		✓		
Experiences in their family provide a educational experiences		✓		
College coursework on curriculum and strategies with opportunities to practice.	✓		✓	College coursework and practice
Family relationships (mother) provided experiences.		✓	✓	Family relationships provided experiences

A similar connection between educational experience and implementation of practice seemed to strengthen the theme college coursework on early childhood curriculum with opportunities to implement practices. In pairing of the pre-k there were several connections. Both had similarities in number of children in the class and number of children and type of disability (DD).

The explicit child-focused practice themes were also supported in this pairing: (a) both used direct guidance and redirection with clear expectations for the children to use their manners, (b) both embedded IEP goals for each child during routines and activities. Similarities were noted in educational experiences connected with those practices: (a) IEP and training on the IEP informed embedding practices, (b) opportunities in their family provided educational experiences to inform practice, and (c) experiences working with children of differing abilities encouraged new strategies to practice. The childcare pairing revealed similar connections. Both teachers did have contextual connections; the same center, same number of children, both BS degrees (one non-related). However, the number of children with disabilities and the type of disability was dissimilar. An implicit practice theme was confirmed, using socio-contextual conversations to enhance learning. Connections to educational experiences and implementation of practices included: (a) college coursework (including field experience) with opportunities to implement practices, and (b) family relationships (mother) provided experience. Educational Experience was the only connection in the final pairing.

### **Third Level Analysis: Across All Cases**

The third level of analysis identified similarities and differences across each case. This process supported themes in each area, contextual, implicit and explicit child-focused practices, and the connection to educational experiences. This analysis revealed minor connections (three or less similar themes) and major connections (four or more similar themes). Major connections were strengthened implementing explicit child focused practices and their connection to educational experiences.

#### **Cross-case Analysis**

**Contextual themes.** The emerging themes for each pair and case were reduced and bracketed looking for connections. Demographic contextual themes revealed similar patterns (see Table 11). Education and years of experience, using a curriculum in addition to children and disability, were similar across several cases.

The cross case analysis revealed several overlapping themes (3 and 4 case patterns). This level of analysis allowed the researcher to explore looking for patterns and connections (see Table 12).

**Implicit CFP themes.** Two minor themes were confirmed. Isabelle (HS), Mikell (Pre-K) and Miranda (CC) integrated learning concepts and content during children's play. This was a developmentally appropriate child-focused practice implemented during free play and center time. Nancy (HS), Miranda (CC) and Mariah (CC) used socio-contextual conversations to enhance development and learning during routines and activities.

**Table 11***Cross-Case Analysis Contextual Themes*

Category	Isabelle	Nancy	Mikell	Jenny	Miranda	Mariah	Connections
<b>Contextual Themes</b>							
Children in classroom (15 +)	✓	✓	✓	✓	*	*	More than 15 in a class.
Children w Special Needs							More than 4 cwsn in a class.
✓ Over 4	*	✓	✓	✓	*	✓	
* 2 and less							
Education ✓ B-K							B-K licensure level of attainment
Licensure	✓		✓	✓		✓	
Training	✓		✓	✓	✓		
Years of Experience (over 15)	✓	✓	✓	✓	✓		Over 15 years in children 5 and under.
Creative Curriculum	✓	✓	✓	✓	✓		Used an established curriculum

**Explicit CFP themes.** There were three themes confirmed for explicit practice, two across 4 cases and one across three. These themes confirm the use of explicit practices by most teachers.

*Four teachers used direct guidance and redirection for behavior and learning providing clear expectations encouraging children to use manners.* Nancy (HS), Mikell (Pre-K), Jenny (Pre-K) and Mariah (CC) frequently guided and directed children's behavior during routines, transitions and activities.

**Table 12*****Cross-Case Analysis***

Category	Isabelle	Nancy	Mikell	Jenny	Miranda	Mariah	Connections
<b>Implicit Child</b>							
<b>Focused Practices</b>							
Acknowledged and recognized children for following directions and completing tasks.	✓		✓				
Integrated learning concepts and content during play	✓		✓		✓		Integrate learning concepts and content during play.
Scaffolding to build knowledge through asking open-ended questions	✓				✓		
Individualizes and adapts activities for each child	✓				✓		
Socio-contextual conversations and social narratives to guide behavior		✓			✓	✓	Socio-contextual conversations to enhance development and learning
<b>Explicit Child</b>							
<b>Focused Practices</b>							
Used positive guidance and redirection with clear expectations to use their manners		✓	✓	✓		✓	Positive guidance and redirection with clear expectation to use manners.

Category	Isabelle	Nancy	Mikell	Jenny	Miranda	Mariah	Connections
Embedding IEP goals for each child during routines and activities.		✓	✓	✓			Embedded IEP goals during routines and activities
Used recall and response with prompts and cues to build knowledge (Rote)		✓	✓	✓		✓	Used rote, recall and response with prompts to build knowledge.
<b>Educational Experiences</b>							
IEP and training on IEP's tells a teacher what practices she should implement directs embedding practices			✓	✓			
Resources provided by supervisor as a form of professional development opportunities to implement Opportunities in their family provide a educational experiences	✓		✓		✓		Family and professional relationships provide experiences
College coursework on curriculum and strategies with opportunities to practice.	✓	✓		✓	✓	✓	College coursework with specific curriculum on practices and opportunities to implement



Category	Isabelle	Nancy	Mikell	Jenny	Miranda	Mariah	Connections in the field.
Experiences working with children of differing abilities encouraged and then practicing strategies			✓	✓			
**Lacks confidence implementing practices		✓				✓	

*Four teachers used rote, recall and response strategies with prompts to build knowledge.* The same four teachers, Nancy (HS), Mikell (Pre-K), Jenny (Pre-K) and Mariah (CC) implemented this explicit practice along with the direct guidance practice.

There was a similarity across three cases for the theme embedding IEP goals during routines and activities. Nancy (HS), Mikell (Pre-K) and Jenny (Pre-K) implemented IEP goals during class time. Miranda and Mariah were unaware of the IEP and individualized instruction rather than embedding the practice.

**Educational experiences.** During this analysis, a connection was made to their educational experience that informed practice. One strong theme (5 out of 6 participants) reported college coursework influenced practices.

*Five acknowledged college coursework in specific curriculum for implementing practices and opportunities (field work) to practice influenced use of specific child-focused practices.* Teachers related their college coursework to several practices

implemented during the observation. Several also revealed, opportunities are needed to practice any new strategy.

*Family and professional relationships provide experiences that informed implementation of practices.* This was a new theme that resulted from reducing opportunities in the family and supervisor providing materials. Both were connected to relationships established in the family and at work. Mikell (Pre-K), Jenny (Pre-K), Miranda (CC) and Mariah (CC) and Isabelle (HS) revealed their family and/or work relationships influenced their implementation of practices.

### **Summary**

Cross-case analysis reinforced major and minor themes. Contextual analysis created a background to explore connections and patterns. Patterns emerged regarding number of children and disability in addition to educational experience. Two minor themes were similar for implicit child-focused practices, integrating learning during play and using socio-contextual conversations. Two major themes supported the implementation of explicit child-focused practices; *(a) direct guidance and redirection with clear expectations to use manners, (b) rote, recall and response with prompts used to build knowledge.* Also there were similarities across cases when embedding IEP goals during routines and activities. A strong connection was made between implementing practices and t educational experience; *(a) college coursework on specific curriculum with opportunities to implement with fieldwork, (b) family and professional relationships provide experiences that informed implementation of practices.* Further explorations of

the themes are discussed in Chapter V to define the relationship between educational experiences and implementation of specific child focused practices.

## **CHAPTER V**

### **DISCUSSION**

The overall purpose of this study was to explore the relationship between teacher education experiences and child focused practices implemented in quality early childhood inclusive environments. A qualitative multiple case study method was used to reveal themes across settings (Head Start, Public Pre-K, Childcare) and across cases (6) to explore the relationship between educational experiences and implementation of practices. Questionnaires, video observations and interviews provided data to confirm themes during a modified phenomenological analysis discussed in Chapter 3. Four categories during the analysis searching for themes were explored, contextual themes, implicit child-focused practices, and explicit child focused practices, and educational experiences. Through a three-step level analysis themes emerged revealing a relationship between educational experience and the implementation of child focused practices. This chapter will first discuss the conceptual framework and context that informs education and practices. Second, the brief overview of child-focused practices in inclusive environments and the relationship to emergent themes from this study is discussed. Third, educational experiences that inform practices are discussed. Then finally the connections revealed in this study highlighting limitations and future research.

## **Conceptual Framework**

### **Unified System Theory of Practice**

Inclusive early childhood environments are appropriate environments for young children with disabilities. High-quality inclusive settings provide access, participation and supports (DEC/NAEYC, 2009) promoting learning and development. Social systems theory is the framework for inclusive environments since interactions and experiences within the levels support the child and build a foundation for learning. However, what happens within the context of the levels is unique to the setting. A Unified Theory of Practice envisioned by Odom and Wolery (2003) combines several educational theories since one approach may not be sufficient for improving development and learning for the child with disabilities. Although a constructivist developmentally appropriate approach is the context for high-quality settings, the practices to include children effectively, to teach the child, may rely on behaviorist principles. A Unified Theory of Practice addresses this mix of theories as an approach to teaching in an inclusive environment (see Figure 1). The child, the focus of a theory of practice, and their special educational need determines the specific effective practice to implement. As this study explored the relationship between practices implemented and educational experience, theoretical memos were a part of the analysis. This process framed the context of study when delineating meaning for practices. The teachers used different approaches to teaching based on their theoretical perspective.

Consistent with DAP, the physical environments provided challenging learning opportunities as described in Chapter IV. Yet, the teachers approached learning from

different perspectives. Isabelle and Miranda used a constructivist theoretical approach to teaching allowing the child to initiate learning with open-ended materials. Nancy and Mikell used a developmental-behaviorist approach through structuring the environment yet offering child-initiated play. Jenny and Mariah used a behaviorist approach with in a developmentally arranged environment. Consistent with Unified Systems Theory of Practice, the teachers in this study used different theoretical frameworks. All teachers focused on the child, yet implemented different practices based on the perceived needs of the child and their own theoretical stance. Bredekamp and Copple (2009) recommend a “both/and” thinking to encourage the developing child (p. 49). Not one approach is best. There should be a continuum of practices including both child-centered and teacher-directed strategies (Bredekamp & Copple, 2009). Therefore, the child should determine the practice, not the theory. For this study, this may suggest, the child’s special educational needs determined the practice. The practice for a child with DD may need to be different for a child with language challenges. The context and the type of disability may determine the theory of practice.

In a Unified Theory of Practice approach, environments may need to be structured to promote engagement for children with disabilities. For example, in Jenny’s classroom she structured the materials in the manipulative area to work with a child with physical disabilities one on one. His needs required a direct behaviorist instruction approach. Miranda had one child with DD bring in a collage of family to share with the class to expand language by asking open-ended questions, a constructivist approach. Both practices were appropriate yet one used explicit methods and the other naturalistic.

Therefore teachers need to be familiar with several theoretical approaches to learning and use practices based on the needs of the child. Teachers cannot take an either or approach; it is “both/and” thinking (Bredekamp & Copple, 2009).

### **Contextual Themes**

The participants in this study all teach in a high-quality inclusive childcare setting. They were chosen from three different types of environments. Therefore, one might assume the quality of the classroom should be somewhat consistent. Quality structural indicators such as teacher child ratios, room size, and arrangement into learning centers, materials, and schedule were consistent across settings. The ratios were 1:9 (Miranda and Mariah), 2:16 (Isabelle and Nancy) and 3:18 (Mikell and Jenny). However, there is a difference in the ratio of children with disabilities and the type of the disability in the classroom. Gallagher and Lambert (2006) found types and severity of the disabilities of the children and percent of children with disabilities in the classroom influenced practices. In completing the contextual analysis, Isabelle included one child (speech) and one recently identified but did not have an IEP. Isabelle (12% children with disabilities) implemented implicit child-focused practices using a constructivist approach. This is also the case with Miranda, who used primarily implicit practices and had two children with disabilities, (22%). During the initial observation of both classes, it was difficult to identify the children with disabilities. It appeared implicit practices were implemented more frequently in classrooms with the least amount of children with disabilities. Also, the needs of the children were not as severe or visible.

The remainder of the classrooms had a higher percent of children with disabilities and the severity was greater. Sandy had (25%) children with disabilities, Mikell's class (39%), Jenny's class (29%) and Mariah's class (44%) children with disabilities (see Appendix A). These teachers primarily used direct, explicit practices with children with DD and ASD. For example, the children's choices were limited and they were given clear instructions. The children were asked to repeat directions and follow structured routines. Nancy, Mikell and Mariah used prompting and reinforcement frequently with the children with disabilities. Jenny used hand over hand prompts in addition to physical prompts with two of her children. It appears the higher percent of disabilities in the classroom and the severity of the disability influenced the type of child-focused practice, consistent with Gallagher and Lambert (2006).

Another contextual theme, education and experience in the field was examined. Five of the six teachers had over 15 years of experience with children ages 5 and younger. However, in relating years of experience to a specific child-focused practice a theme did not emerge. This was also the case with educational degree. Two teachers had MAT and B-K licensure. Both went to the same college for graduate school. Yet Isabelle implemented constructivist implicit practices in developmentally appropriate classroom relying heavily on "DAP" (Isabelle, Interview). Jenny implemented behaviorist explicit practices using a direct instruction approach in a developmentally structured environment. Therefore it appears the college education did not influence the specific practice in the classroom. As mentioned previously, Isabelle had fewer children with less severe disabilities than Jenny. The curriculum at the college may have been similar yet



both teachers implemented different practices. It may be the needs of the child determining the practice consistent with Odom and Wolery (2003) and Gallagher and Lambert (2006).

Another contextual feature was the curriculum used as a guide in the classroom. All teachers except for Mariah were familiar with *Creative Curriculum* and used this curriculum as a guide. However, this didn't seem to influence the implementation of practices since there was inconsistency between theory of practice and the curriculum. Therefore in exploring the contextual themes within a framework of an implicit theory of practice there are several considerations. The classrooms were quality developmentally appropriate environments with different levels of structure. The teachers' educational backgrounds were different across settings and did not appear to connect to theory of practice. It seems from this study, the child's disability and the ratio of typical to atypical children in an inclusive setting may influence the child-focused practice.

### **Child Focused Practices**

Child focused practices are both implicit (naturalistic) and explicit (direct instruction) to promote learning for all children in inclusive settings (Wolery, 2005). In this study both implicit and explicit practices were explored. Results indicated that children with disabilities influenced the type of practice the teachers implemented. In the following sections, both practices are discussed

#### **Implicit Child Focused Practices**

In classrooms where there were fewer children with disabilities and the disability was less severe predominantly implicit practices were implemented. Isabelle and Miranda

had fewer children with disabilities and with less severe needs. Classrooms were less structured and teachers integrated learning during play. The children initiated learning and the classrooms were child centered. The child with disabilities was not the focus of the classroom. The environments were accessible and arranged for all children and the teacher acted as the facilitator of learning. Children with disabilities were not identifiable. This created an atmosphere of a community of learners. The implicit practices were developmentally appropriate practices and encouraged learning through active play-based experiences. Teachers in inclusive classrooms should be confident in their use of implicit developmentally appropriate practices and use play-based strategies with all children. All children can benefit from child-focused practices that are both developmentally and individually planned to meet the needs of the child with disabilities. Implicit practices were implemented to some degree in all settings but Jenny's. However, most of the teachers relied on explicit and less developmentally appropriate practices. This may be the result of education, experience, or a lack of confidence.

### **Explicit Child Focused Practices**

Explicit practices can occur in the natural environment however the teachers in inclusive settings should have knowledge of children's IEP goals to implement the practices (Grisham-Brown, Pretti-Frontczak, Hemmeter, & Ridgley, 2002). All the participants in this study had knowledge of the IEP's. However, childcare teachers, Miranda and Mariah never read the IEP. The childcare teachers were informed of IEP goals from the specialists or parents.

It is interesting to note that Mikell and Jenny, Pre-k teachers were very familiar with the IEPs and primarily used explicit practices based on the IEPs. Because these teachers both consulted regularly with specialists and felt that the IEP defined the practices they implemented, perhaps the IEP influenced the practices they used versus teacher training or experience. The IEP included goals for the child not instruction strategies, yet Jenny and Mikell felt the goals determined the practices. They implemented explicit practices such as rote and recall to address the goals of the IEP. Since Mikell, Jenny and Nancy had the highest percentage of children with IEPs, and children with moderate disabilities, the IEP goals seemed to be the focus of practice in the classroom. Direct instructional methods may be appropriate practice (Forness et al., 1997) yet some teachers in this study were at times coercive and disrespectful to the children with disabilities. IEP goals can be embedded naturally through play when teachers plan child centered learning opportunities that occur naturally with appropriate materials (Copple and Bredekamp, 2009). The IEP's should not determine the effective practice. Teachers may need additional education and training on embedding goals with play-based strategies with fewer directives and not rely on the IEP to inform practices.

Mariah also implemented explicit practices, yet she did not have direct knowledge of the IEP as noted previously. Mariah communicated with the specialists and worked on specific learning goals she “thinks” are on the IEPs. Mariah may have been at a disadvantage in implementing child-focused practices based on the IEP. However, collaboration with the specialists helped inform their practices.

Mariah and Nancy both collaborated with the specialists to inform practices based on the IEPs. Collaboration with specialists encouraged embedding IEP goals and individualizing practices. Nancy and Mariah however expressed a lack of confidence in working with their children with special needs. This suggests further collaboration and support may be needed to build the confidence of the teacher as suggested by Dinnebell et al. (2006). Collaboration involves more than sharing the IEP goals for the child. As Dinnebell et al. (2006) suggests teachers need training to embed the goals of the IEP. Embedding IEP goals into daily routines requires knowledge of effective practices. Yet few specialists model effective practices to be used in the classroom. This may suggest Nancy and Mariah may not have a strong background in effective child-focused. Therefore, they relied on directive approaches rather than using naturalistic strategies that may be developmentally and individually appropriate. The overuse of explicit practices may be the result of lack of education and experience on embedding IEP goals naturally.

### **Systematic Procedures Documenting Practices**

For a practice to be child focused, DEC recognizes a teacher should use systematic procedures within and across environments (Sandall et al., 2005). Children's with disabilities have IEPs that require monitoring. Mikell and Jenny followed systematic procedures based on each child's IEP; however, three of the other teachers did not implement systematic procedures. This suggested the public pre-K program had a system already in place. Miranda (CC) also had a system, however hers was not connected to IEPs. For the teachers that did not use systematic procedures, all identified this as a weakness. Since this may be a weakness for teachers in non-public pre-k settings, it may

have implications for teacher preparation. Non-public pre-k teachers may need specific training on using systematic procedures to monitor IEPs and the implementation of practices.

Including children with disabilities in the classroom places several demands on the teacher. The teacher must have an understanding of the child's disability and the educational needs. Therefore the teacher must be familiar with of the child's IEP. This study suggested the IEP goals influence the implementation of specific practices.

Teachers in non-public pre-k settings were not involved in the IEP process nor were they well versed in the IEP goals. This placed the non-public pre-K teachers at a disadvantage and may have limited their ability to implement effective child-focused practices for children with disabilities to meet their educational needs. With no systematic procedures documenting practices in place, this implies the practices may not be as effective.

### **Educational Experiences**

According to Copple and Bredekamp (2009) early childhood teachers may implement practices "superficially" not knowing what practices to use in an inclusive environment. Teachers also may implement a practice and not understand the purpose or why they are using it (Lay-Dopyera & Dopyera, 1992). Further, Gallagher and Lambert (2006) and Buysse et al. (2002) suggested that experience and education influenced implementation of practices. A major focus of this study was to explore the relationship between practices and the teacher's educational experience.

## **Education**

The participants in this present study all achieved different levels of degrees (see Appendix A). However, it seemed there was no connection between level of degree and implementation of specific practices. For example, Jenny had a MAT, Mariah a BS, and Nancy an AAS and all implemented direct explicit practices. This is consistent with previous studies the degree does not determine the practice (Bogard et al., 2008; Cassidy et al., 2005; Chang et al., 2005; Early et al., 2006, 2007; Essa et al., 2008; Maxwell et al., 2006). However, college coursework did influence practices for all participants in this study except Mikell (her degree was in an unrelated field).

The five teachers with differing levels of education clearly connected specific college classes to implementation of practices. Isabelle, Jenny, Nancy and Miranda revealed they took classes on curriculum that included implementing practices). Nancy and Jenny took classes at the Masters level and Nancy and Miranda at the community college level. All completed their coursework within the last six years and understood child-focused practices. Although there was no consistency on the specific practice, either implicit or explicit, all revealed the college courses prepared them to individualize and meet the developmental needs of the child. Consistent with research by Chang et al. (2005) and Early et al. (2007) Nancy and Miranda added a class on exceptional children, which informed their practice. Therefore it seems teachers need basic knowledge of children and their disabilities to implement practices. However, knowledge is not enough and Mariah, Nancy, Isabelle revealed fieldwork such as internships allowed them to learn and rehearse different child-focused practices. Fieldwork, internships, and labs all offer

experiences with children of different abilities, therefore teacher preparation programs must offer these experiences as a part of the curriculum. Teachers must be knowledgeable about children with disabilities, IEPs, and child focused practices coupled with opportunities to practice the skills in inclusive environments. Practice was also important to Mikell, even though she did not relate it to her college coursework. Mikell, whose degree was in Secondary Education in 1985, mentioned her additional continuing educational units (CEU) informed practices. Her CEUs in special education prepared her for the inclusive classroom.

### **Experiences**

Family and professional relationships provided additional experiences that informed implementation of practices. Mikell and Jenny (Pre-K) and Miranda and Mariah (CC) acknowledge relationships within their own family informed their practice. While the researcher could not find studies to support the role of the teacher's mother (parent) influencing implementation of child-focused practices, there are several studies regarding culturally responsive practices (Cartledge & Kourea, 2008; Gay, 2000; & Ladson-Billings, 1994). According to Bronfenbrenner & Morris (1998), the relationships that develop over time influence interactions in the environment (proximal processes). As a teacher develops and grows, the implementation of practices are related to the interactions and relationships in the environments. Experiences and relationships established in the home seemed to influence the implementation of practices.

In a similar way, positive relationships established with the supervisor encouraged the supervisor to provide resources and support. For example, Nancy discussed the book

*Conscious Discipline*, influenced several practices implemented in her classroom.

Isabelle directly related her implementation of DAP to her supervisor providing a book on DAP and encouraging her to use it. Miranda felt supported by her supervisor and when she had questions about a child or a practice to implement, her supervisor provided her with resources. The supportive role of the supervisor influencing practices is consistent with studies by Essa et al., (2008) and Gallagher and Lambert (2006). Therefore, relationships within the family and relationships with supervisors influence the implementations of practices.

This theme of relationships also may have implications for teacher preparation programs. Effective collaboration is an important component of inclusive environments. Whether collaboration is with the specialist, parent, or family, teachers must be adequately prepared to collaborate with peers and professionals. However, teacher preparation programs seldom offer classes' specific to collaborative practices (Chang et al., 2005). Collaboration builds relationships, and relationships seem to influence child-focused practices. Therefore, education and experiences both connect to implementation of practices.

### **Limitations**

This qualitative multiple case study explored the implementation of child-focused practices in inclusive early childhood classrooms in communities in North Carolina. The results were based on the interpretations of six teachers. Their cases were "snap shots" of inclusive classrooms (Shank, 2005). Limitations are a natural when using case study methods.



### **Role of the Researcher**

Some may view the experiences of the researcher as a strength since she had over 30 years in early childhood education and was versed in DAP. However, as a college instructor, the researcher may have shown bias and preference for a practice based on her own definitions of best practices to implement in an inclusive early childhood environment. The researcher attempted to minimize bias by following standard of practice protocol and video recording similar events across settings, such as routines, small group, and large group time during the morning. Reflective journals were maintained after videotaping, after viewing the tape and transcribing, and after interviews and transcriptions. Also, the researcher frequently questioned her observation of practices through paradoxical interrogation, "Am I really seeing a practice or do I think I see the practice." Using a non-biased videographer and a research assistant minimized the bias. The research assistant blind coded video transcripts.

Another limitation was the researcher's passion for inclusive practices. As a grandmother of a child with significant disabilities this may have limited the trustworthiness of the study. However, this allowed the research to narrow her focus on effective practices in inclusive environments. Every classroom should be a place for her grandson.

### **Reactivity**

Children and teachers do react to changes in the environment. The video recording may have influenced results. However, reactivity did not seem to be a major issue for the children or teacher, since within ten minutes, the researcher and

videographer were ignored. Therefore the teacher was recorded for approximately 90 minutes. Video observations of the actual practices assisted with clarification as the researcher followed up with the participant seeking understanding and meaning.

### **Subjectivity**

In any qualitative case study method, self-report during the interview also had limitation. The teacher revealed what they wanted the researcher to hear as opposed to the reality. However, the video observation focused the interview on specific practices implemented. Following the interview, the participant was asked to review the transcription for any errors in wording or miscommunications. Another limitation was the actual interview protocol designed. Each practice elicited the same question and at times the participants appeared to repeat themselves (e.g. "I said this before"). Reflective memos and journaling helped during the transcription process and triangulation of data.

### **Sample**

Using a small purposeful sample may have interfered with trustworthiness. However, using only five star quality centers for specific ages in three different types of settings should have minimized subjectivity. A larger sample size would have either reinforced themes or disclosed new themes.

The researcher attempted to follow analytical methods to confirm themes for credibility. Reflective and analytical memos were important to creating trustworthiness maintaining a degree of credibility. Researchers role can be viewed as a strength or limitation.

### Summary

In exploring the relationship between teachers' educational experiences and the implementation of practices in inclusive preschool environment, several themes emerged. Teacher in inclusive settings implemented more explicit practices. These practices included guidance and redirection with clear limits, using rote, recall and response during routines and activities and embedding IEP goals into the routines and practices. This seemed connected to the number of children with disabilities in the classroom and the severity of the disability. Implicit practices were also implemented across settings including integrating concepts during play and using socio-contextual conversations during the day. This also may be related to the number of typical children in the classroom and relationship developed in the classroom. However, this has implication for teacher education and experiences.

In making a connection between practices and educational experiences, this study suggested that specific college coursework influenced implementation of practice. Coursework on children and their disabilities in addition to field experience and internship allowed teachers to practice new knowledge and skills. Observation and practice influence the use of specific practices. This also may suggest, teachers need more instruction on effective child-focused practices and how to systematically plan and monitor the practices. This has implications for teacher preparation practices as fieldwork and internships in inclusive settings should be included in any teacher preparation program. Relationships developed within the home with family and relationships at work also influenced practice. Interactions within and across systems seemed to influence

practices. Collaborations with family, teachers, supervisors and specialists provide experience and knowledge. This also has implications for teacher preparation; early childhood teachers in inclusive settings should have effective communication and collaborative skills. Education and experiences within the context of family and professional environments inform the implementation of child-focused practices within inclusive preschool settings.

### **Future Research**

As more children with disabilities are placed in inclusive early childhood settings, it is important to identify the specific effective child-focused practices that will meet the child's needs. Teachers have varying levels of education and experiences that inform practices. This study examined practices and explored relationship to education and experiences. Each setting was unique and the setting itself, Head Start childcare or public pre-K, did not influence practices. The results in this study suggest it was the child's disability that determined the practice and the ration of typical and atypical children in the classroom. Based on the results of this study, further research may want to consider the type and severity of disability influencing the implementation specific child-focused practices. How does the disability of the child determine the implementation of practices? Also, does the ratio of typical to atypical in the classroom influence practices? Tied to these questions, research should reflect on the importance of observation and fieldwork as a part of the teacher preparation experience to implement practices. This study also suggested family and work relationships influence practices, therefore the role of family and mothering (nurturing support) separate from cultural responsive practices should be

explored. Any study should consider using cross setting analysis since one setting does not provide the answers. Inclusive classrooms should provide access, participation and supports consistent with the DEC/NAEYC joint position statement. However, further research is needed on the extent and type of support needed for the classroom teacher to implement effective child-focused practices in inclusive environments.

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## APPENDIX A

### PARTICIPANTS' DEMOGRAPHICS

Participant	Setting 5 Star High Quality Curriculum	Number of Children	Number of Children with Disabilities	Education	Years of Experience Preschool (ages 3-5)	Training/Workshops on Child Focus Practices
Isabelle	Head Start  <i>Creative Curriculum</i>	16	1 (Speech) 1 (IEP in process)	BS Social Studies Secondary Education MAT Birth-Kindergarten Licensure (2006)	18	ECERS Foundations Creative Curriculum
Nancy	Head Start  <i>Creative Curriculum</i>	16	2 (Speech) 2 (DD, ASD)	AAS Early Childhood (2005)	16	None (Creative Curriculum at HS, Interview)
Mikell	Public Pre-k  <i>Several Hill, Math, Letterland, Creative Curriculum</i>	18	5 (DD) 2 (Speech)	BS Secondary Licensure Preschool Special Education (grandfathered to B-K) (1985)	10 (7 K)	Reading Difficulties, 3 CEU Special Education, 4 CEU
Jenny	Public Pre-k  <i>Creative Curriculum Letterland</i>	17	5 (DD)	BS Early Elementary MAT Birth-Kindergarten Licensure (2002)	34	Foundations Inclusive Practice Training
Miranda	Childcare  <i>Creative Curriculum</i>	9	1 (Speech) 1 (DD)	BS Business Administration/Accounting Certificate Early Childhood Associate (16 Credits) Certificate (Administration Early Childhood (16 Credits) (2006)	15	None (Inclusive Practices, Interview)
Mariah	Childcare  <i>N/A</i>	9	1 (Speech) 1 (EBD) 2 (DD)	BS Human Development Family Studies B-K License 2009	2	None

**APPENDIX B**  
**RECRUITMENT LETTER**

Dear Director/Principal,

I am contacting you to determine your interest in participating in a dissertation research study on effective practices in inclusive early childhood classrooms. Connecting research to practice was an issue in the field of early childhood special education and this was a chance to determine the effective child-focused practices that were implemented in your high-quality early childhood program. A five star facility, offers a high-quality experience for placing young children with special needs. If you were teaching a young child with special educational needs in an inclusive setting, I want to determine the extent to which effective child-focused practices were being implemented.

If you agree to participate in this study, you will be asked to forward email addresses of your teachers currently teaching in an inclusive setting who would be willing to participate. The teacher will be asked to answer a brief questionnaire about their classroom and provide information about the study. Each questionnaire will be coded with an identification number and letter and cannot be connected to you or your setting. Upon receiving the questionnaire and the teacher signs consent to participate form, I would like to videotape practices used by the teacher in the classroom for a minimum of 60 minutes (2-4 sessions) over several weeks. In addition, I would like to interview the classroom teacher regarding the specific practices and their educational experience. At no time will the teacher be identified by name or setting. All information will be kept confidential and will not be shared with any outside parties. The teacher will be provided with the video recording after the study and no copies will be made. Any research data will be unidentifiable and becomes part of a composite study.

If you were interested in participating, please contact me at [e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu) or 336-416-5482. I ask that you submit a letter of intention and support so we can begin this exciting study.

I look forward to hearing from you so we can begin to make a difference in the education of the young children we serve. Thank you.

Sincerely,

Ellen J. Wenner  
[e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu)  
Graduate Student Researcher  
University of North Carolina at Greensboro

## APPENDIX C

### PARTICIPANT RECRUITMENT QUESTIONNAIRE

*Thank you for agreeing to be a part of this study.* The purpose of this study was to explore the relationship between teacher education experience and implementation of effective child-focused practices in early childhood inclusive environments. This questionnaire consists of 6 questions and will take 10 minutes of your time. All questionnaires were anonymous and data will be combined and reported as a composite. All information obtained in this study was strictly confidential unless law requires disclosure. There will be no identifying information that connects you to the responses. There was no risk to participating in this study and you can stop at anytime. By completing this questionnaire, you will be asked to complete a consent to participate form. The study includes videotaped observation of your implementation of child-focused practices (60 minutes total over 2 sessions during the next 4-5 weeks) and participating in an interview (60-90 minutes) at a time convenient for you. Your interview responses and the video observation data were strictly confidential and will not be identifiable by name or setting. You were free to contact me at 336-416-5482 or [e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu).

#### DEFINITIONS

To assist you in responding to this questionnaire the following definitions may provide more information for understanding.

**Inclusive Classroom.** Teaching in a classroom with a minimum of one child having a developmental delay (including speech) and the child receives special education services from the local education agency or early interventionist through an Individualized Educational Program (IEP) or Individualized Family Service Plan (IFSP).

**Individualized Educational Program (IEP) or Individual Family Service Plan (IFSP).** Written individual plans for children with disabilities under IDEA.

**Child-Focused Practice.** Plans and strategies used to structure and provide learning opportunities.

**Teaching strategy:** A practice or practices that help children experience success in learning and become independent learners.

1. Which best describes your current setting?

- Preschool program with open enrollment
- Preschool program for “at risk” or EC students (not Head Start)
- Program or services for infants and toddlers
- Head Start
- Early Head Start
- Preschool program for special education students (self-contained)
- Private Child Care Setting
- More at Four

2. Which best describes your role or current positions?

- Lead Teacher
- Co-Teacher
- Director
- Director

3. Was your classroom “Inclusive”? (Teaching at least one child with developmental delays including speech at least 50% of the day three times a week)

- Yes
- No
- Unsure

4. How many children were in your classroom? \_\_\_\_\_

5. How many children were identified as having special educational needs, have an IEP or IFSP, and were present more than 50% of the time? \_\_\_\_\_

6. Were you using a specific curriculum? If so please name and describe the curriculum.

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Please complete the attached consent to participate in the study form. I will be contacting you to collect the signed consent form and make an appointment for the observations and interview.



**APPENDIX D****CONSENT TO ACT AS A HUMAN PARTICIPANT****UNIVERSITY OF NORTH CAROLINA AT GREENSBORO**  
***CONSENT TO ACT AS A HUMAN PARTICIPANT***

Project Title: Exploring the Relationship Between Teacher Education Experiences and Child-focused Practices Implemented in Quality Early Childhood Inclusive Environments

Project Director: Dr. Judy Niemeyer/Ellen Wenner

Participant's Name: Teacher

**What was the study about?**

This was a research project. The purpose of this study to explore the relationship between teacher education experience and child-focused practices implemented in quality early childhood inclusive environments

**Why were you asking me?**

Frequently, young children with special educational needs were enrolled in community-based settings such as yours. A five star facility, offers a high-quality experience for placing young children with special needs. Since you were teaching a young child in your classroom with special educational needs this research study plans to determine the extent to which child-focused practices were being implemented.

**What will you ask me to do if I agree to be in the study?**

If you agree to this study you will be video recorded implementing practices in your classroom a minimum 60 minutes (2-4 sessions) over four to five weeks. In addition, you will be interviewed regarding the practices and your educational experience (approximately 60 minutes). If you want further information you were free to contact me at 336-416-5482 or [e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu) or Dr. Judy Niemeyer at [janimey@uncg.edu](mailto:janimey@uncg.edu) 336-334-3447.

**Was there any audio/video recording?**

The observation of practices was video recorded. The interview will be audio recorded for accuracy. At no times will you be identified by name. You will have a code Identification number that cannot be connected to you or your setting. Because you will be potentially identifiable by anyone who hears or views the recordings, your confidentiality for things audio and video recorded cannot be guaranteed although the researcher will try to limit access to the recordings as described below.

At no time will anyone other than the researchers have access to the recordings. Upon completion of the study, you will be given the video recording. No copies will be made.

**What were the dangers to me?**

Institutional Review Board at the University of North Carolina at Greensboro has determined that participation in this study poses minimal risk to participants. Any risks were associated with pressure you may receive from your administrator to participate. Parents may also ask questions and they should be referred to the researcher.

If you have any concerns about your rights, how you were being treated or if you have questions, want more information or have suggestions, please contact Eric Allen in the Office of Research Compliance at UNCG at (336) 256-1482. Questions, concerns or complaints about this project or benefits or risks associated with being in this study can be answered by Ellen Wenner who may be contacted at (336) 416-5482, [e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu) or [janiemey@uncg.edu](mailto:janiemey@uncg.edu), 336-334-3447.

**Were there any benefits to me for taking part in this research study?**

There were indirect benefits to participants in this study. As a participant, you will have an opportunity to connect child-focused practices that lead to positive outcomes for your young children with disabilities. Upon conclusion of the study, each participating teacher will receive of their video recording

**Were there any benefits to society as a result of me taking part in this research?**

This study will begin to identify best teaching practices for improving development and learning for young children with special needs.

**Will I get paid for being in the study? Will it cost me anything?**

There were no costs to you or payments made for participating in this study. However, after completion of the study you were given \$35.00 gift certificate as a thank you for participation.

**How will you keep my information confidential?**

The information from will be stored in a locked file cabinet and there will be no information that will identify you by name or classroom. All video observation and audio interview data will be coded and combined and reported as a composite. All information obtained in this study was strictly confidential unless disclosure was required by law.

When completing the online recruitment participation questionnaire, **absolute confidentiality of data provided through the Internet cannot be guaranteed due to the limited protections of Internet access. Please be sure to close your browser when finished so no one will be able to see what you have been doing.**

**What if I want to leave the study?**

You have the right to refuse to participate or to withdraw at any time, without penalty. If you do withdraw, it will not affect you in any way. If you choose to withdraw, you may request that any of your data, which has been collected, be destroyed unless it was in a de-identifiable state.

**What about new information/changes in the study?**

If significant new information relating to the study becomes available which may relate to your willingness to continue to participate, this information will be provided to you.

**Voluntary Consent by Participant:**

By signing this consent form you were agreeing that you read, or it has been read to you, and you fully understand the contents of this document and were openly willing consent to take part in this study. All of your questions concerning this study have been answered. By signing this form, you were agreeing that you were 18 years of age or older and were agreeing to participate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPENDIX E

### MINOR CONSENT FORM

UNIVERSITY OF NORTH CAROLINA AT GREENSBORO

Dear Parents,

Your classroom teacher has agreed to participate in a research study, *Exploring the Relationship Between Teacher Education Experiences and Child-focused Practices Implemented in Quality Early Childhood Inclusive Environments* with UNCG. You may have the following questions.

**What was the study about?**

This was a research project. The purpose of this study was to identify specific teaching practices your child's teacher uses in the classroom. The research study involves video recording your child's teacher implementing child-focused practices. At no time will the researcher meet with your child. This was video observation in your child's classroom only.

**Why were you asking my child?**

Your child was currently a member of this classroom in which the researcher will be video recording teaching practices.

**What will you ask my child to do if I agree to let him or her be in the study?**

The researcher will not have direct contact with your child. This was a video observation in your child's classroom only. No harm will come to the child. The researcher will videotape your classroom teacher for approximately 60 minutes (2-4 sessions) over the next few weeks.

**What were the dangers to my child?**

The Institutional Review Board at the University of North Carolina at Greensboro (UNCG) has determined that participation in this study poses no risk to participants. Your child will not be identified in anyway.

Questions about this project or benefits or risks associated with being in this study can be answered Ellen Wenner, who may be contacted at (336) 416-5482, [e\\_wenner@uncg.edu](mailto:e_wenner@uncg.edu) or Dr. Niemeyer at [janemey@uncg.edu](mailto:janiemey@uncg.edu), 336-334-3447

**Were there any benefits to my child as a result of participation in this research study?**

There were no direct benefits to children in this study. However, your child's teacher may become aware of effective teaching practices.

**How will my child's information be kept confidential?**

Your child will not be identified by name. During video observation if the teacher implements a practice with a certain child, the child will be coded anonymously. For example, B1 (boy 1) will be used to describe the event. All information during the observation will be stored in a locked file cabinet at UNCG and at no time will any participants be identified by name. All information obtained in this study was strictly confidential unless disclosure was required by law. The video recording will be given to your teacher at the end of the study. No copies will be made by the researcher.

I hope you were excited about your child's teacher participating in this study. If you have any further questions please feel free to contact me. Thank you.

Sincerely,

Ellen J. Wenner  
e\_wenner@uncg.edu  
Graduate Student Researcher  
University of North Carolina at Greensboro

## APPENDIX F

### VIDEO OBSERVATION PROTOCOL

Setting: \_\_\_\_\_ ECT: A1 A2 B1 B2 C1 C2

Date (Time 1, 3): \_\_\_\_\_ (Time 2, 4) \_\_\_\_\_

Purpose: To explore the phenomena of relationship between teacher education experience and implementation of effective child-focused practices in early childhood inclusive environments.

Practices: When and Where	Observation Notes	Time
		Time 1 3
		Time 2 4
		Time 1 3
		Time 2 4
		Time 1 3
		Time 2 4
		Time 1 3
		Time 2 4

**APPENDIX G**

**INTERVIEW QUESTIONNAIRE**

**Please review the following definitions prior to the interview. Complete the brief questionnaire about your educational experience.**

**DEFINITIONS**

**Inclusive Classroom.** Teaching in a classroom with a minimum of one child having a developmental delay (including speech) and the child receives special education service from the local education agency or early interventionist through an Individualized Educational Program (IEP) or Individualized Family Service Plan (IFSP).

**Individualized Educational Program (IEP) or Individual Family Service Plan (IFSP).** Written individual plans for children with disabilities under IDEA.

**Child-Focused Practice.** Plans and strategies used to structure and provide learning opportunities.

**Teaching strategy:** A practice or practices that help children experience success in learning and become independent learners.

**Evidence Based Practices (EBP).** Teaching practices for each child based on ongoing data collection to meet child's changing needs. Teachers use a systematic procedure across environments to promote child's learning and participation.

**Code#** \_\_\_\_\_

**Educational Background Information**

**1. List the year and/or degree(s), and concentration.**

1.1 High School: \_\_\_\_\_

1.2 CDA: \_\_\_\_\_

1.3 Associate's: \_\_\_\_\_

1.4 Bachelor's: \_\_\_\_\_

1.5 Master's: \_\_\_\_\_

1.6 Doctorate: \_\_\_\_\_

**2. Have you had any specialized training implementing effective child-focused practices?**

2.1 No

2.2 Yes

If YES, please describe any coursework completed or professional development training including hours or CEU units if possible on effective child-focused practices.

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**3. List your years of teaching experience at each of the following levels:**

- 3.1 \_\_\_\_\_ Infants/Toddlers (includes birth through 2 year olds)  
3.2 \_\_\_\_\_ Preschool (includes 3 and 4 year olds and 5 year olds not enrolled in Kindergarten.  
3.3 \_\_\_\_\_ Kindergarten



**APPENDIX H**

**INTERVIEW PROTOCOL**

**Purpose:** To explore the phenomena of relationship between teacher education experience and implementation of effective child-focused practices in early childhood inclusive environment.

Time of Interview:

Date:

Place:

Interviewer:

Interviewee: Code #

<p><b>1. Child-focused practices was a term used often in early childhood curriculums. Tell me what you think this means.</b></p> <p>Probe 1: How would you describe child-focused practices? Probe 2: What does it mean to you?</p>	
<p><b>2. Let's look at the videotapes of practices. Tell me about this practice (for all practices).</b></p> <p>Probe 1: What made you decide to use this practice? Probe 2: How do you document the practice? Probe 3: How do you know when to use a practice? Probe 4: How do you know it works?</p>	
<p><b>3. Tell me about your educational experience or professional development that may have prepared you to implement the practices we just observed and discussed.</b></p> <p>Probe 1: Tell me about any specific classes you had on implementing effective practices? Probe 2: Describe any opportunities you had to practice implementing them? Probe 3: Tell me about any other training or professional development you had that prepared you for implementing child-focused practices? If so when and with whom?</p>	

<p>Probe 4: Tell me how your educational experiences influence your practices in this setting?</p>	
<p><b>4. Was there anything else you may want to tell me about your classroom, practices, children or educational experiences?</b></p> <p>Probe 1: Please let me know if there was anything else you would like to share about your classroom and your educational experiences.</p>	

**APPENDIX I**  
**MASTER CODE LIST**

Isabelle

Jenny

Mariah

Mikell

Miranda

Nancy

\_\_\_\_\_ (End list of cases)

The Master Code List for this Study is:

Acknowledgement and recognition for success  
Breaking down simple tasks  
College course and instructor  
Confidence in Implementing Practices  
Corrective feedback  
Correspondence training plan do review  
DAP Activity Based Interventions  
DAP child initiated  
DAP integrating concepts and content  
DAP Naturalistic routine and transition  
DAP Planning the Environment  
DAP Positive child guidance  
Direct Instruction  
Documenting children's work  
Embedded instruction across activities and routines  
Expansion of language  
Family Practice and Relationship  
Group Contingencies  
Guidance Redirection with clear specific choices  
Incidental teaching initiated by the child  
Individualizing and adaptation  
Itinerant Specialist Modeling Support  
Knowing and Using IEP

Mand Model  
Mentor and Supervisor  
Modeling and demonstration  
Naturalistic interventions for target behaviors  
No Systematic Procedures Documentations  
Observation and lab experience  
Peer mediated  
Positive reinforcement  
Practice and trial and error  
Problem Solving with the child  
Promoting engagement with materials  
Scaffolding and building with open-ended questions  
Social narratives offering cues for appropriate responding  
Social narratives that highlight cues for behavior  
Socio-contextual communication  
Trainings and workshops  
Using recall and rehearsal closed question with prompts  
Using systematic procedures  
Visual cue system prompts

## APPENDIX J

### CHILD FOCUSED PRACTICES CODES/DEFINITIONS

#### Child Focused Practices

According to Division for Early Childhood (DEC) and National Professional Development Center (NPDC) on Autism Spectrum Disorder (ASD), certain child focused practices exist to promote development and learning for young children with special needs. The following were adapted from DEC (Sandall et al. 2005), DAP (Copple & Bredekamp, 2009) and NPDC (NPDC on ASD, FPG Child Development Institute, M.I.N.D. Institute & Waisman Center, 2010)

**Acknowledgement and Recognition:** A developmentally appropriate practice that acknowledges and encourages the child related to what the child was doing and acknowledges efforts such as, “Nice use of color in your painting.”

**Activity-Based Interventions:** Emphasis was placed on enhancing authentic classroom activities with logical antecedents and consequences. Teachers plan activities that give all children opportunities for participation.

**Corrective feedback:** The teacher provides the child with specific information regarding his performance on a task and child was to correct it.

**Correspondence training:** The teacher reinforces a match (correspondence) between what the children say and do. Ask the child what she plans to do, provide an opportunity for the child to do it, then reviewing with the child what they did.

**Embedded instruction across routines:** Times and activities when a child’s IEP/IFSP goals and the instructional procedures for those goals were inserted into children’s ongoing activities, routines and transitions.

**Expansion:** Listening to what a child says, and after the child speaks, repeating what the child has said adding new words.

**Explicit:** Direct and deliberate, intrusive interventions that were planned. Include specific directions to children and verbalizations that maybe scripted. Behavior analysis techniques can be used. Deliberate, planned support strategies to facilitate a child’s understanding of the learning process, from simple cues and prompts to a more complex set of strategies to learn skills.

**Group contingencies:** Positive consequences that was delivered to a group usually based on the performance of a few or subgroup.

**Guidance and Redirection:** Teacher provides clear limits to children regarding acceptable behaviors with specific choices for performance.

**Implicit Naturalistic Strategies:** Teaching strategies and practices that naturally occur in a typical early childhood settings. Also includes play based activities and routines that occur to enhance learning. They were usually child initiated and least intrusive.

**Incidental teaching:** The environment was structured to increase the probability that a child will initiate to the adult. Child initiates adult requests more elaborate behavior. Adult expands based on child's initiation.

**Individualizing and Adapting:** Teacher individualizes learning adapting to the child's developmental learning need by providing differing levels of instruction and materials.

**Integrating Concepts in Play:** A developmentally appropriate practice integrating ideas, concepts and content through themes and play opportunities.

**Mand-model procedure:** Observing the child's focus of attention, asking an open-ended questions of the child about the focus, and waiting for n answer. If no answer, then model of the answer was provided.

**Modeling:** The teacher demonstrates the skill desired or has the children demonstrate the skill.

**Naturalistic interventions:** Collection of practices including environmental arrangement, interaction techniques, and strategies based on applied behavior analysis principles. These practices were designed to encourage specific target behaviors based on learners' interests by building more complex skills that were naturally reinforcing and appropriate to the interaction.

**Peer mediated strategies:** Procedures that involve using peers to promote the behavior of a child with disabilities. This may involve having a peer model a specific behavior to be imitated. Alternatively, this may involve having the children tutor the child with disabilities.

**Positive Guidance:** Providing clear limits to children through active listening, I-messages, and conflict resolution then following up with conversation.

**Prompt fading:** Teacher prompt was removed when teaching children specific skills; a systematic procedure for removing prompt.

**Prompting:** Any assistance or help given to assist children in knowing how to do a given behavior to perform a target behavior. They can be verbal cues, gestures, and models of target behavior, pictures, and physical prompts.

**Recall and Rehearsal with Closed Questions:** A direct instruction strategy that provides information or asks a specific closed question with an expected response. For example, “Look at the colors. What color was this?”

**Reinforcement:** A consequence for a behavior that increases the probability that the behavior will occur more frequently. Positive reinforcement involves adding something (praise, access to a toy). Negative reinforcement involves removing something from the environment.

**Scaffolding with Open-ended Questions:** A developmentally appropriate practice that teachers use to provide assistance and support to enable each child to extend learning by asking open-ended questions.

**Social narratives:** Interventions that describe social situations in some detail by highlighting relevant cues and offering examples of appropriate responding. They were aimed at helping learners adjust to changes in routine and adapt their behaviors based on the social and physical cues of a situation, or to teach specific social skills or behaviors.

**Socio-contextual strategies:** Naturalistic that involve children and others in authentic situations or contexts. It includes using social interactions, child to child, teacher to child to increase communication, socialization. Teachers interact with one child or a small group.

**Systematic instruction:** A direct practice that carefully constructs interactions between students and their teacher. Instruction was based on assessment and an instruction was implemented on the specific goal or target.

**Time delay:** Teacher waiting for child to initiate behavior, often during interactions and play. Constant time delay refers to adult prompting and then on subsequent trial delays the assistance (fixed). Correct responses were reinforced.

**Visual Cue systems:** The use of visual stimuli, objects or pictures, to communicate to children what behaviors were expected or a signal changes in activities and identify upcoming activities.

**APPENDIX K**  
**CATEGORIES AND CODES SHEET**

<b>Categories of Practice</b>	<b>Child Focused Practices</b>	<b>Educational Experiences</b>
Implicit Practices	Activity-Based Interventions (ABI) Acknowledgement and Recognition (AR) Integrating concepts Play (ICP) Correspondence training (CT) Scaffolding Open Quest. (SO) Individualizing Adapting (IA) Incidental teaching (IT) Socio-contextual strategies (SCS) Expansion (E) Group contingencies (GC)	College Course and Instructor Family practice and/or Relationship Mentor/ Supervisor Observation Field Experience Practice with Trial and Error Training and Workshops
Explicit Practices	Embedded instruction across routines (EI) Corrective feedback (CF) Guidance and redirection (GR) Social narratives (SN) Visual Cue Systems(VCS) Positive Reinforcement (PR) Recall Rehearsal closed questions (RR) Peer- Mediated Strategies (PMS) Modeling (M) Prompting (P) Prompt fading (PF) Time delay (TD) Mand-model procedure (MMP)	College Course and Instructor Family practice and/or Relationship Mentor/ Supervisor Observation Field Experience Practice with Trial and Error Training and Workshops