



Athlone Institute of Technology

An evaluation of supports for children with disabilities in mainstream preschool.

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Signed Declaration

I declare that this research dissertation and the research involved in it are entirely the work of the author. The work, or part of it, has not been submitted for a qualification to any other Institute of Technology or any University. Where the work of other people has been used full acknowledgement has been granted in the form of referencing.

Signature.....

Date.....

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Abstract

This study set out to evaluate the supports' for children with disabilities in mainstream preschool. It examined the knowledge and experience of childcare practitioners' who work with children with disabilities and explored the attitudes and concerns of staff towards the possible future intake of children with disabilities into their service. The researcher ascertained the information for this study by selecting a qualitative approach in the form of semi-structured interviews as it allowed participants' to speak freely about their views and experiences and provided an in-depth knowledge to the researcher. This study was conducted with six childcare practitioners' working in the same organisation. The level of qualifications' and experiences' varied from each individual childcare practitioner. The sample was select using a combination of purposive and convenience sampling. After each interview was complete the recordings were transcribed. The results were then thematically analysed.

A review of the literature in relation to education for people with a disability was investigated. It evaluated research and reports regarding disability and its history, the past education provided to children with a disability, challenges faced and the techniques in use by teachers' to educate these children. Historically the provision of services has illustrated that individuals' with disabilities, especially intellectual disabilities, have been subjected to marginalisation, exclusion by society and exposure to unhuman conditions (Sheerin, 2009). In contrast, Rose et al (2010) highlights that there has been significant changes and developments in ascertaining an inclusive school environment. In order to combat the issue of limited places for children with disabilities in mainstream preschool The Supporting Access to the Early Childhood Care and Education (ECCE) Programme was proposed (Inter-Departmental Group, 2015).

The results displayed that the practitioners' had a clear understanding of disability. The professionals' experiences of working with children with a disability varied. Four of the six participants had first-hand experiences while one participant had a personal awareness, the other participant had no experience to date. The participants' in the study indicated that supervision and communication were supports that were beneficial to staff when working with a child with a disability. Confidence in communication between staff and management was recognised by the childcare practitioners'.

However, it is clear from this study that the childcare practitioners' desire more supports to be present in the preschool environment.

This research concluded with recommendations for the introduction of compulsory training courses to allow practitioners' to view the situation from the Childs' perspective and in turn possibly require less support from management. A recommendation for the piloting of new proposed programmes to instil confidences among staff. A final recommendation was made regarding on-going research in order to monitor supports available to practitioners'.

Introduction

This research study set out to examine the supports for children with disabilities in the education system, in particular pre-school education. It examined the supports in place through the views and experiences of childcare practitioners' in the area of preschool education. Hanrahan (2005) notes that there has been a major universal shift; an individual's impairment is no longer the focus of attention but the structural barriers that exist in society and politics. Barriers included discriminatory attitudes of individuals at all levels towards persons' with a disability and lack of information and knowledge which contributes to the ongoing neglect of their right to education (Winter & O`Raw, 2010). The Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability is a model of varying levels of support (Inter-Departmental Group, 2015). However, there is a notable void in the current research which fails to incorporate childcare practitioners' views and experiences in relation to existing supports and the proposed model.

The aim of this research is to evaluate the supports for children with disabilities in mainstream preschool. Specifically:

- To evaluate the knowledge and experience of childcare practitioners' who work with children with disabilities.
- To examine the supports currently in place for childcare practitioners' who work with children with disabilities.
- To explore the attitudes and concerns of staff towards the possible future intake of children with disabilities into their service.
- To make recommendations on the supports provided to childcare practitioners' when working with children with disabilities.

This research study is divided into five sections. The first section outlines and introduces the research study. The second section reviews the literature related to disabilities and the educational supports provided to children with disabilities. Section three provides the rationale for the study along with the methodology used. In section four, the findings from the research conducted will be highlighted. Finally, section five discusses the results from the previous section with that of the existing literature,

recommendations for the future are made and a conclusion on the relevant points of the study.

This study, whilst it is one of a small scale, illustrates the value of evaluating the supports for children with disabilities in mainstream pre-schools by seeking the views and experiences of childcare practitioners' who work on the front line in this sector.

Literature Review

Introduction

“We learn to talk by talking, we learn to read by reading, we learn to write by writing and we learn to include by including” (Bunch, 1999, p.9).

This chapter provides a review of the literature in relation to education for people with a disability. It evaluates research regarding disability and its history, the past education provided to children with a disability, challenges faced and the techniques in use by teachers to educate these children. The literature is reviewed through areas that specifically address the purpose of this research.

Disability and its history

People with disabilities have existed and will exist in society (Linton, 1998). The World Health Organisation (2015) defines a disability as an umbrella term, covering impairment, activity limitation and restrictions. Historically and currently it is a complex phenomenon as it is not just solely a health issue but one which reflects the individual's body and their interaction with aspects of society in which they live. Toolan (2003, p171) states that people with a disability “have historically been problematic through medicalisation, they can be or maybe detained from society”. In Ireland the medical model of disability was given preference. This model focuses on a persons' impairment and how these impairments affect functioning (Watson & Nolan, 2011). The provision of services through this model has illustrated through history that individuals with disabilities, especially intellectual disabilities, have been subjected to marginalisation, exclusion by society and exposure to unhuman conditions (Sheerin, 2009). The introduction of the social model has aimed to improve the quality of life for individuals' with disabilities. This model shifts attention from the person's impairment towards the structural barriers in our environment, social, cultural and political norms (Hanrahan, 2005).

The move towards a community based approach has reduced the rate of institutionalisation. In 1961, Ireland was the leading country in the world with regards to institutionalising people with a disability (World Health Organisation, 2015). In a modern society multiple models of disability are in use universally. Examples include the

Empowering Model, the Moral Model or the Economic Model of disability (Langtree, 2015), which have all been recognised. Each Model has a different approach and set of priorities. Therefore, it can be suggested that communities choose different models in order to maintain their cultural and social norms but also to remain in keeping with the political and financial structures in existence within their society. The idea of heterogeneous approaches and frameworks can also be linked with that of different professionals i.e. their ideologies, skill set and values (Barsch, Klein & Verstraete, 2013). Approaches and theories are in functioning in order to meet the needs of those with a disability such as the rights based approach, person centered approach or the triad of impairments.

The National Disability Strategy Implementation Plan (2013) is the most recent document to provide a plan to maintain this ideology of change in Ireland. The Disability Federation of Ireland (2012) recorded that five percent of children aged 0-14 years have a disability. This is a small percentage from the overall population of children in Ireland. This small composition of population has been reported and highlighted to have been facing barriers in attending a mainstream preschool.

Past Educational provision for children with disabilities

Inclusive education has been promoted internationally as a concept for more than a decade. In Ireland this concept was established with the enactment of the Education for Persons with Special Educational Needs Act 2004 (Oireachtas, 2004). Stemming from this piece of legislation The National Council for Special Education was established in 2005 (Winter & O`Raw, 2010). Its purpose was to overcome the multiple barriers that were preventing the full participation of children with disabilities in education. Barriers included discriminatory attitudes of individuals at all levels of society towards persons' with a disability and lack of information and knowledge which contributes to the ongoing neglect of their right to education (Winter & O`Raw, 2010). These societal complexities stretch far beyond the capacity of the classroom or school environment. This is supported on a larger scale by statistics that indicate in the Asian Pacific region, less than 10 per cent of children with a disability in developing countries are in school (Calderbank, 2009). In the Irish context, the Department of Education and Science

(2001) issued a report illustrating a similar statistic stating that 1.6% of the overall school-going population attending primary level education had a disability. At an earlier stage the number of children with a specific learning disability were 0.34%, children with a physical disability were 0.16% and those with a “borderline mental Handicap” were 0.20% of the total number of children attending mainstream education (Department of Education, 1993, p. 261). Therefore, the evidence illustrates that there is a low attendance of children with a disability in mainstream schooling. Interestingly, in a report issued by the Department of Education (1993), a recommendation was made regarding children with disabilities receiving ongoing assessment throughout pre-school years. However this has still not filtered into regular practice.

Challenges faced by children with disabilities in education

On a global scale, state concern for children with disabilities is a recent sensation (Topliss, 1979), which has not even reached priority in some jurisdictions. Our societal view of children with disabilities needs to be developed drastically. McDonnell (2003) points out a significant flaw in our system. Surface change has occurred and will continue to do so but deep structures remain in existence i.e. power, dominance and subordination. Rohan (2008) notes that in order to over through the concept of marginalisation, the principle of normalisation was first introduced. This term of normalisation first originated in Scandinavia with the purpose of reforming the institutional based services which were being provided for people with disabilities (Bronston, 1973). The notion of normalisation was to encourage integration for those with a disability. While this concept has transcended to most countries, its effectiveness still has to be witnessed in reality.

The Ontario Human Rights Commission (2016) recognises multiple key areas where children with disabilities face issues. Inadequate funding has been noted as a primary delay across the spectrum of educational services which is placing children at a disadvantage. Linked to this issue is the physical inaccessibility of schooling properties which pose physical barriers to these children. The process of long waiting lists for funding, professional assessment and delays in the provision of special educational programmes are all factors creating. The Ontario Human Rights Commission (2016)

recorded that there is a common breach of confidentiality, which is a major flaw in the Canadian system. There are similarities to Ireland with respect to the waiting list crisis which applies to virtually all sectors across the board. Negative attitudes and stereotypes, ineffective dispute resolution mechanism and lack of individualisation assessment are all mitigating factors (Ontario Human Rights Commission, 2016). In Australia similar barriers were highlighted such as access to school building, discrimination of schools and principals attitudes, lack of options and interestingly a lack of training and knowledge of teaching staff (Hastings, 1996). A similar finding was reported in Ireland stating that supports and awareness are needed in relation to teacher training and teacher education with particular focus on emotional behaviour difficulties (O`Caollai, 2014). The importance of inclusivity was yet again noted, the physical placement of a child in classroom is not sufficient.

Techniques in use by teachers to educate children with disabilities

The HELIOS programme was one of the major European initiatives to develop guidelines for good practices in educational integration for children with special needs. Representatives' from numerous countries were involved and multiple key areas were highlighted as being of significance. These categories included; legislation and human rights, administration- school structures, whole-school approach, class teacher and individual approach, support services and resource centres, parents', cooperation, staff development/ training, transition, role of special schools and the use of new technologies (Lamoral, 1996). These categories are evident in the majority of policies ascertaining to the practices and skills requires for teaching children with a disability. The Department of Education and Science (2007) adapted the above categories into the measures to enhance effective teaching in an inclusive environment (Appendix 1).

Reynolds, Zupanick & Dombeck (2013) recognise there are key strategies to teaching children with special needs or learning difficulties. The first should be to break learning exercises into smaller steps, each step beginning introduced individually not to overwhelm the person. The second recommended strategy is to modify and be creative with regard to the teaching approach, avoidance of complex lengthy directions should be maintained, instead encourage the child to perform the task. Thirdly, the use of

visual aids when teaching is vital especially with those who have an intellectual disability. This allows them to comprehend what is expected of them. A fourth teaching strategy is to provide the child with immediate and direct feedback. This allows them to make connections between the teachers' response and their behaviour. Wehmeyer et al (1998) indicates the importance of teaching self-determination to children with disabilities.

Supports in place for children with disabilities and their effectiveness

In theory there are multiple support mechanisms in place to facilitate children with learning disabilities in mainstream schools. Hannon (2006) recommended that strategies for changing attitudes should firstly be implemented. These interventions should include tackling negative attitudes through a disability awareness training programmes, legislative intervention against discrimination and the importance and richness of diversity should be highlighted at a national level. Phillips (2012) introduces further concepts to support children with disabilities. Evidence based research supports the theory of investing in Early Childhood Disability Programme (ECD), especially children at risk of developmental delay. The ECD programme is believed to lead to improved rates of growth and development and ensures later educational programmes to be effective. This programme enables children with disabilities to attend mainstream schooling at a later stage. A combination of approaches such as target based programmes and parenting interventions, including home visiting programmes, may help parents' and professionals' to detect developmental delays early, improve children's development and ensure school readiness (Phillips, 2012).

In Ireland the Early Childhood Care and Education (ECCE) scheme provides two years free education to all children aged between 3 years 2 months and 4 years 7 months regardless of family income (National Council for Special Education, 2014). Similar to the ECD programme, the purpose of the ECCE programme is to provide school readiness for children while also identifying children who may have a learning difficulty. However the majority of placements given to children attending mainstream schools are to those who have little to low levels of need or disabilities.

Need for more change

Griffen (2013) notes that the majority of parents' who completed a survey in 2008 reported they were either satisfied or very satisfied with the support they received as a family unit from the school their child with special needs attended. The most common support provided to children with special needs was the allocation of resource teaching hours followed by the provision of a Special Needs Assistant (SNA). Accessing SNAs' for children with special needs was highlighted as an issue for parents' that engaged in the research study (Griffen, 2013). The study also revealed other major issues for children with disabilities and their parents' in the process of engaging in education. The application process for supports and resources was identified as difficult for almost half of the participants', while other parents' recognised that students' deemed to have greater needs were often prioritised for psychological assessment over others (Griffen, 2013). 'Intransigent enrolment procedures' was another issue which parents' wishing to have their children attend mainstream school believed was an obstacle resulting from the lack of confidence that teachers' and principals' have in their ability to meet the needs of students' (Rose et al, 2010). While there are significant barriers for children with disabilities in engaging in the education system in Ireland, Rose et al (2010) highlights that there has been significant changes and developments in ascertaining an inclusive school environment.

In order to combat the issue of limited places for children with disabilities in mainstream preschool, Minister for Education and Skills Jan O`Sullivan, Minister for Children and Youth Affairs Dr James Reilly and Minister of the Department of Health Kathleen Lynch, announced a new programme focusing on providing further supports to children with disabilities attending mainstream pre-school (Merrion Street, 2015). The Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability is based on model of support varying across seven levels from non-complex to complex cases appears to be well designed (Appendix 2). Funds of approximately 17 million were secured to support this programme in 2016 (Inter-Departmental Group, 2015).

Kotter (1995, p.59) recognises that `the change process goes through a series of phases that, in total, usually require a considerable length of time`. Interestingly there appears to be a lack of direction or urgency in implementing change within the education system. Creating a vision, communicating the vision, empowering others to act on the vision, creating short term wins and institutionalising the new approach are all required for the successful transformation of any approach or system (Kotter, 1995). In the proposed programme there appears to be a lack of literature asking key stakeholders' for their input regarding how they feel the environment should be set up to create an inclusive and equal atmosphere suitable for all levels of ability. Nursing bedside handovers are an example where all the above elements were evident in effecting successful change in the system (Kassean & Jagoo, 2005). The key stakeholders' were also involved in and communicated with during the process. At the initial stages of the programme it was clear what training the nursing staff would require in order to successfully implementing the change, in contrast to this the Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability fails to identify what exact training will be required for existing childcare practitioners'.

Current Study

The literature at a national and international level illustrates techniques provided to parents' of children with disabilities and also childcare practitioners' when working with these children. Nonetheless, there is a requisite for qualitative research that will evaluate the supports for children with disabilities in mainstream preschool on foot of the announcement of the Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability.

Specifically the objectives of this study are too;

- To evaluate the knowledge and experience of childcare practitioners who work with children with disabilities.
- To examine the supports currently in place for childcare practitioners who work with children with disabilities.

- To explore the attitudes and concerns of staff towards the possible future intake of children with disabilities into their service.
- To make recommendations on the supports provided to childcare practitioners when working with children with disabilities.

This study proposes to investigate the attitudes of pre-school teachers' towards providing Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability and the skills the childcare practitioners' feel they need in order to be competent in their role. The literature review has given an overview of the background of disability in Ireland and looked at the literature which is relevant to this research project and outlines the overall aim and objectives of the research.

The next section of this research will present the methodology and permit the reader to follow the researcher through the path of this research process.

Methodology

Introduction

This section discusses the methodology used in this research study. The purpose of a methodology is to provide an insight to the reader of how the research was conducted. This section documents the approach selected for this research. It provides details on the participants, ethical considerations and the processes undertaken throughout the research. The quality of this research will also be discussed.

The research question

The research aims to evaluate the supports for children with disabilities in mainstream preschool. The objectives of the study are:

- To evaluate the knowledge and experience of childcare practitioners' who work with children with disabilities.
- To examine the supports currently in place for childcare practitioners' who work with children with disabilities.
- To explore the attitudes and concerns of staff towards the possible future intake of children with disabilities into their service.
- To make recommendations on the supports provided to childcare practitioners' when working with children with disabilities.

Research design

The researcher explored both a quantitative and qualitative approach for conducting the research. Numerous research methods were considered along with their advantages and limitations prior to commencing the research. The correct approach is crucial to the success of any research study. Tracy (2010) recommends that in order to achieve quality in research a variety of mechanisms should be used; their combination will depend on the context of the research and also the preference of the researcher.

A qualitative approach to research was selected for this study, in the form of semi-structured interviews. This research method was chosen as it allows the participants' to

speaking freely about their views and experiences. An in-depth knowledge and understanding of the experiences of the participants' was crucial to the success of the study. Hoffmann (2013) explains that researchers' do not want an interview to resemble an interview itself but rather like a conversation. This allows the participants' to become relaxed and speak openly with the researcher. Semi-structured interviews allow for specific information to be elicited on the research topic while also allowing for information and knowledge subjective to the participant to be expressed freely (Bryman, 2004). This freedom of expression is also related to the interviewer during the process. Quantitative research methods do not allow for the researcher to ask follow up questions to seek clarity on information from the participant. Essentially quantitative research limits the possible way in which a research participant can react to and express appropriate social behavior (McLeod, 2008). It has been suggested that questionnaires can gather data in a similar way to interviews (Bryman, 2004). Due to the low response rate associated with questionnaires, this method was also discarded.

In contrast, qualitative research delves deeper into the interactions, processes, lived experiences and belief systems that are found within individuals' institutions and in everyday life (O`Leary, 2004). Achieving quality through a qualitative research method is gained by a worthy topic and credibility of the study (Tracy, 2010). Qualitative research through the form of an interview affords the opportunity to the researcher to "see through the other`s eyes" (Bryman, 2004, p. 338). Interviews conducted using broadly stated questions related to the specific research topic can create rich descriptive data that illustrate a clear picture (Kvale & Brinkmann, 2008; Strauss, 1998). The efficient and effective use of interviews as a mechanism in qualitative research has the ability to probe and examine areas of experience of the respondent in a respectful manner (Bell, 1999). Therefore qualitative interviews which allowed the respondents' to express their views and experiences openly were deemed the most suitable option. Interviews as a tool for gathering data also allowed for flexibility during the interview discussion.

The interview schedule acted as a guide for the researcher which consisted of open ended questions. This allowed the participants' flexibility and granted the opportunity for

in-depth conversation on particular topics. Semi-structured interviews are conducted with an open framework which allows for focused, formal, two-way communication (Cohen, 2006). Guess et al (1985) highlights that the interviewer needs to be conscious of and alert to, body movements, facial expressions and gestures as a form of communication during the process of an interview. The use of visual aids such as pictures or symbols along with questions that are phrased clear and simple can assist in overcoming any barriers which may prohibit the participants' understanding or involvement in the interview process. The researcher needs to be aware of alternative systems of communication that the respondents' may prefer to use (D'Eath, 2005). Both verbal and non-verbal communication is crucial to the success of any qualitative piece of research (Bryman, 2004). During the interview process each participant was observed. Body language and gestures were recorded along with any change in the participants' tone of voice.

Focus groups were considered for this research. Dowling (2014) recommends that each meeting should be facilitated by a discussion moderator and also be recorded by an observer. Due to the scale of this research it would not have been feasible to gain the voluntary participation of an observer for the duration of this research study. The dominance of talkative members of the group (Dowling, 2014) may lead other participants' to become withdrawn from the process and not share their experiences. A time constraints was another reason why this approach was discarded as it would have been difficult to set up a focus group session considering the childcare practitioners' worked similar shifts within their organisation and identifying the knowledge of participants' would have proven difficult as they all had a varying level of qualification. The research aims to gain an understanding and knowledge of the supports available to children with disabilities in mainstream preschools, therefore face-to-face interaction was required to access the childcare practitioners' experiences.

Participants

A sample is a subset of people that are interested in the research i.e. the population that is studied in the research project (Trochim, 2006). Qualitative research is less concerned with representative sample or making generalisations as each individuals view and opinion will differ. A non-probability sampling technique was applied in the form of purposive sampling. Non-probability as a method of sampling does not involve a random selection while purposive sampling has a predefined group the researcher is seeking (Trochim, 2006). The sample selected to participate in the research study was a convenience sample meaning those who participated were accessible and conveniently available to participate in the research and ultimately it is not a representative sample. Bryman (2004; 33) states that “purposive sampling is essentially strategic and entails an attempt to establish a good correspondence between research questions and sampling”.

The manager acted as a gatekeeper who informed staff about the research study. Permission was then granted by management to access the contact details of the sample of participants' who displayed interest in the study. The participants' had different qualifications and levels of experience in the sector of childcare which was relevant to the topic been researched. A small sample of six participants' was obtained to gain sufficient information for this research study. Three of the participants' had achieved a level 5 in childcare, two participants' had a level 8 in early childhood education and care and the other participant had achieved a level six in childcare.

Materials

In order to conduct successfully the semi-structured interview sessions, the participants' were provided with an information sheet and consent form (Appendices 4 and 5). The purpose of both documents was to inform the participants' about the study and the procedures involved. An interview schedule (Appendix 3) was designed which acted as a guide during the interview process to keep the conversation and questions focused on the relevant topic.

An audio recorder was used during the semi-structured interviews. All participants' agreed to have their interviews recorded by signing the consent form. Observations

were made and noted throughout the interviews to ensure the participants' were at ease when discussing the topic, but also to assist in supporting the data.

Ethical Considerations

Ethics is something that evolves and changes all the time. Codes of Ethics are a statement of basic ethical principles and guidelines which aim to reduce and resolve ethical issues that may arise in the conduct of a study. There are two ethical codes commonly used in research to maintain ethical standards, the Nuremberg Code (1947) and the Belmont Report (1979). Beins (2004) notes that the principle of the Nuremberg Code is to balance the possible risks to participant's against the benefits. The Nuremberg code can also be referred to as the outcome based approach. The Belmont Report also known as the principle approach is concerned with respect for persons, beneficence and justice. Informed consent and transparency of the aim of the research reduces the possibility of harm to the participants' involved in research. Hoffmann (2007) recognises that seeking participants' consent also grants them power in the process of the research, specifically where interviewing is the method being used to gather data. Engaging in qualitative research is not compulsory (Clark, 2010), therefore respondents' dignity, anonymity and welfare must be protected by the researcher.

Research imposes a duty to protect and respect the privacy, dignity and welfare of all participants' involved in the research process. In order to facilitate and maintain these ethical standards all participants' were provided with information sheet (Appendix 4) which documented the details regarding the aim of the research and the process that was involved. A voluntary consent form (Appendix 5) was also provided to participants'. The respondents' were reassured that their consent could be withdrawn at any stage of the research process and their identity would remain anonymous as no information would be presented in the final research document that would breach confidentiality. Prior to commencing each interview all participants' were re-informed that they could terminate the interview at any point. Observations were made throughout each interview to ensure that the participants' were not upset or unsure about their consent. The participants' were informed that the data was solely for the benefit of the research and would be destroyed.

Procedure

In order to gain an insight into and evaluate the supports for children with disabilities in mainstream preschool, the researcher facilitated interviews with six childcare practitioners' currently working in a preschool.

The interviews were conducted face-to-face in a semi-structured format by the researcher with one participant at a time. Prior to the commencement of each interview, it was re-stated by the researcher that all data gathered was confidential. Each participant was informed that the audio recording would be transcribed and submitted with the research but this process would be conducted in a manner where anonymity would be maintained at all times. The participants' were reminded that a copy of the transcript would be saved in a protected electronic file on a computer and also a typed version stored in a locked filing unit.

The interviews consisted of fourteen fundamental questions. The interviews were carried out in an office of the organisation where there were no distractions for the interviewee or interviewer. The interviews were conducted at times convenient to participants' and each interview lasted approximately twenty-five minutes. When interviews were completed the participants' were offered the opportunity to contribute to or omit any information they had provided. A copy of the transcript relevant to each individual participant was offered, all of which declined.

Data Analysis

Once each interview was complete the data collected was transcribed and observational notes were written up to capture the richness of the data. Both the transcripts and observational notes were read to check for any typing errors made and to gain an understanding of the data collected. A thematic analysis approach was used which seeks to unearth the themes salient in the data (Attride-Sterling, 2001). After numerous times reading the transcripts common themes began to emerge and were established based on the semi-structured interviews. The data gathered was coded, which is a mechanism of achieving thematic analysis. Once clear themes had been established further analyses produced a subset of themes which resulted in rich

information. Tracy (2010) argues that information and data rich in description is important in order to achieve credibility in qualitative research.

Quality of the Research Study

Hoffmann (2007) notes that inexperienced researchers should not expect perfection from the outset of the qualitative research process, it requires skill. In recent years, concerns regarding how to assess and judge the quality of qualitative research has been noted (Mays, 2000). Flyvbjerg (2006) notes that qualitative research can often be referred to as a broad theory which will cover all topics researched under this technique. This is not correct as the majority of qualitative studies conducted are small scale projects and their findings cannot be generalised beyond the scope of the research context itself (Jackson, 2015). It can be suggested that qualitative research is important in highlighting areas in need of further research. Tracy (2010) states that both the reliability and validity of a qualitative research study are characteristics that prove difficult to measure.

Reflexivity requires the researcher to display sensitivity to the participant's culture and knowledge. A tool for achieving this is sincerity from the researcher. Honesty and transparency in relation to the researchers' bias, goals and mistakes in the research is crucial (Tracy, 2010). Inexperience of conducting interviews was a factor which was given great consideration as there are specific skills required to achieve a successful result. The points set out in the literature were reflected upon at numerous stages of the research and a clear understanding of the topic was gained prior to the research commencing.

Conclusion

To conclude, this section outlined the method employed to gather and analyse the research data. Within this section the research design, participants', materials used, ethical considerations, analysis of the research data and the quality of the research were discussed. In the subsequent section the themes that emerged from the semi-structured interviews will be presented.

Results

Introduction

This section describes the findings that were produced from semi-structured interviews which aimed evaluate the supports for children with disabilities in mainstream preschool through the experience and knowledge of childcare practitioners’.

Method of Analysis

In order to analyse the findings a thematic approach was used to identify and catagorise re-occurring themes which emerged from the semi- structured interviews. Thematic analysis assists researchers’ to move their analysis from a broad reading of the data towards discovering patterns and developing themes (Boyatzis, 1998). Therefore “codes”, phrases or words act as labels for sections of the data (Joffe & Yardley, 2004). Thematic analysis allows the researcher to increase their understanding by delving deeper into the data and gaining appreciations for the findings (Boyatzis, 1998).

Numerous themes emerged during the course of the interviewing process. This research study focused primarily on the re-occurring themes and those that were related to the research. For the purpose of presenting the results of the research, each participant will be referred to as participant one to six. The numbers were randomly assigned to the interviewees’ in order to protect their identity.

The themes that emerged will be presented under the following headings:

- Post qualification training of practitioners’.
- Childcare practitioners’ understanding of disability.
- Experience of working with children with disabilities.
- Supports currently in place for childcare practitioners’.
- Childcare practitioners’ perspective on future change in the classroom.
- Barriers to implementing change.

Individual factors

The table below displays the information participants' provided about their educational qualification and the length of time in their existing post.

Participant	Educational qualification	Length of time in current post
One	Level 5 Childcare	3 years
Two	Level 5 Childcare	2 years
Three	Level 5 Childcare Level 6 Assisting with special needs	1.5 years
Four	Level 8 Early Childhood Education and Care	1 year
Five	Level 8 Early Childhood Education and Care	2 years
Six	Level 6 Childcare	6 months

Theme One - Post qualification training of the childcare practitioners'.

All the participants' had engaged in extra training courses; however there were similarities and differences between the participants' skills. Three participants' who had a similar understanding of what a disability was had completed an introductory course to autism. Two of these participants' had the same level of qualification; the other participant had achieved a higher qualification. A further two participants had also completed the autistic awareness course. This was illustrated by participant two stating *'I have completed my level 5 in childcare but I have done a communications course aimed at people with hearing impairments and I have also completed a course that introduced us to Autism'*. Participant one had *'finished a fetac level 5 in childcare and an induction course to autism'* where as participant five who had also completed a course in autism had *'level 8 in childhood education and care'*. Participant three had achieved a *'level 5 in childcare and a level 6 in assisting with special needs'* and had also completed *'a three night autism awareness course'*. Interestingly participant four

who had achieved a *'level 8 in early childhood and education'* listed a variety of course which she believed was extra training and was of benefit when working with children with disabilities. She explained that she had completed an *'eight week course around autism, a communication course for people with sensory difficulties, manual handling, fire safety training'* as well as having *'a healthy and safety certificate'*. Participant six had completed an *'introductory course to disabilities which was based on practical teaching rather than all theory'* however she was going to be completing a *'course specific to autism as requested by management'* in the coming days. Training in the area of autism was evident among five of the six participants' with the remaining participant obliged to complete the course in the future.

Theme Two - Childcare practitioners understanding of a disability

The participants' explored their understanding of disability with the guidance of the interview schedule. A number of similar responses and definitions were provided by the participants' from whom this theme emerged. All of the six participants' described their understanding of a disability in the same manner however some individuals provided more details regarding their knowledge.

Participant one and five explained that *'a disability is a physical or mental condition that limits a person's movement, senses or activities'*, participant two restated this but added that *'it can effect a child or adult'*. Participant three stated a disability is *'someone who needs extra help to complete things, they may have a physical, mental or intellectual disability. They might be born with a disability like a hearing impairment or the person may develop the disability for example a car accident causing someone to be paralysed'*. This participant developed the point further by stating the cause of a disability. Participant four explained that *'a disability is an impairment that an individual may have which can prevent them from engaging in an certain activities either physically or psychologically depending on their capacity. A disability can be acquired by an individual or it can be with them form birth'*.

Theme Three - Experience of working with children with disabilities

All participants' provided information about their experience of working with people with disabilities. Similar experiences' emerged and were explored. Two of the six participant said they had no previous experiences working directly with children with a disability, however one of these participants stated she had a personal awareness of a disability.

Participant four had the most experiences and worked with a variety of people with a range of disabilities. She explained that she had *'worked voluntarily with the brothers of charity for a number of weeks with people who had autism and Down syndrome. One child has acquired a brain injury in a car accident'*. She discussed that the most challenging work she had engaged in was *'when working alongside the family member of the child who had acquired their disability'*. Both participants' one and five said they had no experience of working directly with children with a disability, however participant one stated she was aware she has a family member with a physical disability but has never meet him. She explained that her *'cousin has a physical disability and is cared for by professionals in a residential home, but I've never meet him'*. Participant three expressed that she had worked with an autistic child *'who is about two and half years old and was recently diagnosed'*. Participant two also stated she worked *'an autistic child ages two and a half'* as did participant four who said *'I work with a girl who is about two and a half that has autism'*. While all the participants' had experiences that differ and were all valuable in their own respect, participant six had worked as a healthcare assistant prior to commencement in her current position as a childcare practitioner. She explained that she had *'worked with individuals with spin bifida and mild intellectual disabilities'* she also stated that she had worked with people with *'Parkinson's'* and in her opinion this was a disability as *'the condition limits the brain function of people and in turn can restrict their ability to respond in numerous ways such as speech or movement'*.

The participants' had a wide variety of experience with three of the six participants having worked with individuals with autism. One participant had an abundance of knowledge of working with physical disabilities. Two participants' had no work experience but participant one expressed her desire to change this as she stated that

she *'hopefully will get experience in the future'* which was reinforced by participant five expressing her *'interest in working in this field if the opportunity arose'*.

Theme Four - Supports currently in place for childcare practitioners'

All participants' explored the supports in place that assist in working with children with disabilities. They considered how effective these supports are and if they were aware of other supports' available in another organisation. The main similarities that were discussed were communication, an awareness of autism and clarity of roles or duties.

Participant one discussed the importance of communication between staff, management, parents and the children. She stated *'good communication with parents, families and practitioners' is absolutely key in assisting to diagnosing a child, which we recently did'*. She discussed that it can be difficult to maintain a good setting for children if there is a breakdown in communication between staff as the *'process of communication needs to be open and present at all time as well as what our job role is'*. She explained how she felt that as a *'child settles in'* the supports and communication between all parties *'gets better'*. She also stated she was unaware of any other specific supports in other organisations other than *'training provided that is suitable to the needs of that setting'*. Participant five stated that *'staff talk to each other'* while participant two expressed that *'communicating with each other is important'*. Participant two also emphasised that the organisation provides training. She explained *'our work place has sent us on training courses related to hearing and verbal communication issues and how to help us with autistic children'*. Participant three provided further information on supports related to children with autism as she said *'her mum is supporting us with what she is doing outside of preschool, this allows us to keep a routine similar to home'*. Participant three was not aware of any other support in another organisation but believed that within her setting *'these are good supports but I feel we could benefit with a county SNA where we could get ongoing support and ideas to create an inclusive setting'*.

The importance of staff support in the classroom was highlighted by two of the six participants as participant four said *'children challenge boundaries and rules which can*

be difficult to deal with'. In this case she believed that *'supervision from managers as well as support from other staff when on the floor is important'*. Participant two supported the fact that children *'test rules'* but added that *'training courses'* are *'very helpful and provide an insight into the child's perspective in the classroom setting'*. Half of the participants (two, five and six) highlighted that they were aware *'funding and grants'* were being provided to other organisations. Participant four stated that *'other practitioners' are provided with mentoring or counselling but the area where the school is has a lot of social issues like poverty and family breakdowns'*. Participant five expressed her awareness of multiple other supports that are available to childcare practitioners' as *'intervention teams, individual education plans, play therapy, speech and language therapy and occupational therapy should be provided to children with disabilities regardless of what preschool they attend'*.

Theme Five - Childcare practitioners' perspective on future change in the classroom

Each participant was asked about the concerns they may have with the possible intake of children with disabilities to their service, how confident they feel about working with children with disabilities and how they propose to facilitate mixed ability classes. One participant expressed she had concerns but the remaining five participants said they had no concerns and discussed their reasons. A common theme identified among all participants' to facilitate mixed ability classes was additional training and education.

Participant four was the only practitioner to have concerns regarding the intake of children with disabilities in the future. She stated that *'there will be practical issues such as teacher- child ratio as a result of this there may be an issue in giving too much time and attention to one child over another'*. Two of the participants' contradicted the issue raised by their colleague as they felt children with disabilities can be excluded.

Participant one explained *'no child with a disability should be treated any different to those who do not have one, a good service will provide for the needs of every child regardless of the circumstances'*. Participant three emphasised this point as she felt *'sometimes children with disabilities are discriminated against as there can be a cap placed on what they can do before they try to do it'*. Three participants' expressed that

they had no concerns as they believed their training to date would assist with any problems that may arise. Participant two stated she had *'no concerns'* while participant six said *'I don't really have any concerns'*. Participant five said *'our training we have completed should assist us if we have any problems'*.

Three of the six participants' expressed that they would be confident in their ability to work with children with disabilities. Participant three explained that she *'would be quiet confident as'* she had *'completed the course in special needs and also the autism awareness course'*. Participant four concurred with what participant three said as she expressed that *'past experiences of working with disabilities has allow me to acquire sufficient skills to face challenges that could potential arise when working with children with disabilities'*. Participant two was *'fairly confident'* provided that *'there is enough staff so children with any disabilities can receive one to one time'*. In contrast to the first three childcare practitioners' confidence levels, two of the remaining three desired more training and the remaining participant was unsure. Participant one expressed her wishes to further her *'education regarding children with disabilities to be better for them'* where as participant five said she was *'not 100% confident but after working in this area in the future'* she would *'gain more confidence and awareness'* of her *'role and duties'*.

There were numerous responses from the practitioners' regarding how to facilitate the mixed ability classes in the future. Each participant suggested a different mechanism of facilitating mixed classes. Participant three suggested using *'the same materials but vary the activity to suit the skills of the child; some children may just need a little help compared to others'*. Participant one also suggested extra help as she recommended that *'spare time of a childcare practitioner should be spent one on one with a child'*. Two of the remaining participants' suggested that they use training they had already completed to facilitate class. Participant two commented on the *'training we have completed thought us how to look out for any signs of oncoming distress and to help the child deal with it before it escalates'*. Participant six suggested that use of *'anxiety management'* course would assist in facilitating the classes. A significant difference of opinion was felt by participant four compared to that of other participants'. She placed emphasis on management proposing the mechanism for facilitating mixed ability

classes, she expressed that *'this will be decided upon by the manager'* but she hoped *'they will consult with the teachers first, they normally do'*. She discussed that her *'biggest concern will be safety for all children; ensuring everyone is enjoying the activities and included'*. She also suggested that the *'child-teacher ratio would need clarity and reassurance for staff'*.

Theme Six - Barriers to implementing change

One of the themes to emerge from this section is that 100% of participants' identified the same strategy for dealing with potential problems they envisaged. Participant one stated *'always calming the situation and uncovering the problems is a key strategy'*. Participant two suggested *'providing quiet areas to talk about any problems the child is having'* while participant five recommended *'allocating time to talk to the children each day'* and participant six stated *'taking opportunities that arise to talk one on one with a child to unravel the potential problem'*. There were numerous ideas provided by participant three and four. Supports directly to the school, ensuring safety of all stake holders and support provided by management directly to staff were required. Participant four stated *'ensuring the safety of all who attend the school regards of ability should be a priority; sufficient child-teacher ratios that will meet each child's needs and finally support supplied directly to staff from the management with clear direction are all strategies I feel will deal with potential problems'*. Participant three believed that *'more supports should be provided to crèches and preschools as most of the diagnosis are done at a young age'* and she felt *'early intervention is key'*.

The participants' were then asked about how supported by the organisation they feel when effecting change. All six participants' agreed that they were supported however they level of support provided by management varied from one participant to the next. Participant three expressed that their *'management are very good at listening to our ideas and always give new strategies a go. They always like trying out new things and are welcome to change'*. Participant one stated *'I would feel confident they would help in any area that needed to be changed'*. Similarly participant two said *'our manager is always willing to help every child or childcare assistant when possible'*. The idea of the management being one of a supportive nature was reinforced by participants' five and

six. Participant five expressed that *'they help us in all situations where change is needed and they encourage us to bring forward new ideas'*. Participant six explained that she was new to the organisation but from her experiences to date they were a supportive organisation. She stated *'I am relatively new to this school but from what I have heard and can see in the daily routines, the managers are very supportive in any situation that help or guidance is needed'*. The remaining participant expressed that the organisation was supportive but that it would fade after a period of time had elapsed. Participant four explained that *'the organisation, like most, support you for the first few weeks but then managers often think staff know everything that is required and what they are doing but they forget that its actually new to us'*. The data demonstrates that all the childcare practitioners feel supported by managers but there is a variation of opinion on the supports.

Each participant then provided details on which practice currently in place they believed needed to be altered in order to benefit them in working with a child with a disability. The practitioners' recommended that a few of the supports needed to be altered, however two of the participants' believed that no amendments were required. Participant six stated that *'everything seems to be running ok at the minute'*, while participant one expressed simply *'none at the moment'*. Four participants' highlighted a variety of areas that required alteration such as supervision, training and the provision of SNAs'. Participant five believed that *'the provision SNAs' and staff mentoring or supervision needs to be looked at; and I don't mean managers' constantly on our back but just check in occasional with the staff to see if we need anything'*. Participant four reiterated the point regarding supervision by stating *'I think supervision needs to be implemented properly in all organisations'*, whereas participant three supported the idea of *'county SNAs'* as they *'could be beneficial to the standards of preschools'* as *'the children are still young and it's hard to come up with ideas all of the time to be inclusive at a young age'*. Participant four also recommended that the child-teacher ratio should be reviewed as she explained that *'the teacher ratio needs to be revised depending on the level of assistance or support a child may need'*. The final practitioner, participant two, suggested *'a lot more training and first aid knowledge would help'*.

Conclusion

During the process of analysis of the data many themes emerged. The themes that emerged were presented under the following headings:

- Post qualification training of practitioners'.
- Childcare practitioners' understanding of disability.
- Experience of working with children with disabilities.
- Supports currently in place for childcare practitioners.
- Childcare practitioners' perspective on future change in the classroom.
- Barriers to implementing change.

Fifty percent of the participants' provided the researcher with a similar response of what their understanding of a disability was, the other fifty percent responded with aspects similar to that of the first three responses however, they provided more details and an in-depth knowledge.

Five of the six participant highlighted that they had engaged in and completed an autism awareness course. Two participants' indicated they had completed communication courses specific to hearing impairments and sensory needs. Manual handling and first aid were also highlighted by a participant as extra training. Five of the six participants' explained they had experience of working with people with a disability and one practitioner had an awareness of someone with a disability.

Each participant stated their confidence in their ability and skills when working with a child with a disability. Fifty percent of the participant said they were confident, two stated fairly confident and not 100% confident while the other participant was unsure. Fifty percent of the practitioners' also said they had no concerns regarding the possible intake of children with a disability as they felt a good service will provide for each Childs' need. The remainder of participants' indicated their concerns regarding child-teacher ratios and the level of support provided to staff by management.

All participants' suggested they felt supported by their organisation when effecting change. One participant believed that the support may fade over a period of time and

another practitioner stated she was new to the organisation but she felt confident in the supports provided by management. While the results appeared to be positive, the participants' believed a few alterations may need to occur in relation to current staff support. The employment of SNAs', revision of child-teacher ratios, supervision, training and knowledge in first aid were indicated as areas that may benefit practitioners' when working with children with disabilities.

This indicates that the childcare practitioners' have a good understanding of disability. Collectively as a group respondents' have a varying level of education and additional courses completed to assisted in their work with children with disabilities. The results illustrate that the supports currently in place are sufficient however some practitioners' feel that they need alteration. This draws a conclusion to the finding of this present research study. The next section will discuss the current literature in relation to the themes that emerged in this study.

Discussion

Introduction

This section discusses the key findings and themes of this research study with that of the relevant literature. Throughout this section the aim and objectives of the study will be highlighted. The aim of this research was to evaluate the supports for children with disabilities in mainstream preschool. The knowledge and experience of childcare practitioners' who work with children with disabilities will be determined. An exploration of the attitudes and concerns of staff towards the possible future intake of children with disabilities into their service will also be discussed. This study will provide recommendations in relation to the supports available to childcare practitioners' prior to the proposed programme implementation. This section will note the limitations of the study and address issues emphasised by practitioners'. The literature relevant to this study will be discussed in line with the appropriate themes that emerged which are listed below:

- Post qualification training of practitioners'.
- Childcare practitioners' understanding of disability.
- Experience of working with children with disabilities.
- Supports currently in place for childcare practitioners'.
- Childcare practitioners' perspectives on future change in the classroom.
- Barriers to implementing change

Childcare practitioners' understanding of disability

Objective one focused on evaluating the knowledge and experience of childcare practitioners' when working with children with disabilities. Participants' were asked to provide their understanding of disability. Upon analysis of the results, it became apparent that the entire body of participants had a good understanding of what a disability was. Some participants' provided a detailed account, compared to others, of what they believed constituted a disability. The literature that was reviewed indicated that a disability is an umbrella term, covering impairment, activity limitation and

restrictions (World Health Organisation, 2015). All of the six participants' described their understanding of a disability in the same manner however some individuals provided more details regarding their knowledge. Three of the participants' that engaged in this research had achieved a fetac level 5 in childcare, one participant had obtained a fetac level 6 and two participants' had a level 8 degree in early childhood care and education. Three of the six participants' described disability with similar responses. Participant one (level 5 in childcare) and five (level 8 Early Childhood Education and Care) explained that *'a disability is a physical or mental condition that limits a person's movement, senses or activities'*, participant two (level 5 in childcare) restated this but added that *'it can effect a child or adult'*. Participant three (Level 5 Childcare & Level 6 Assisting with special needs) stated a disability is *'someone who needs extra help to complete things, they may have a physical, mental or intellectual disability'*. However, two of the participants' had achieved an educational attainment subjacent to that of the participant mentioned above. Interestingly there were comparable sections within the responses' from each participant. Participant four suggested a disability was an *'impairment'*, participant two used the term *'restrict'* and participant five said *'limit'*. Participant three used similar terminology giving the example of *'a hearing impairment'*. Langtree (2015) notes that numerous models of disability has been recognised. Therefore it can be suggested based on the findings of this study that a person's perception of disability depends of the model from which their training stems. The knowledge and understanding of the participants' regarding disabilities could be associated with the level of training each participant achieved. Of the participants' who engaged in the research 66% had completed an *'autism awareness course'*, one participant had completed a course specific to special needs while another practitioner had completed a module in special needs as part of their overall degree in early childhood education and care. Two participants' had completed a course in communication specific to *'sensory impairments'*. It is important to state that the above mentioned training is additional to the participants' qualifications'. This demonstrates a broad skill base which develops the participants' understanding of a disability.

Experience of working with children with disabilities

The participants' experiences of working with children with a disability varied. Four of the six participants' had first-hand experiences, one participant had a personal awareness and the other participant had no experience to date. Participant four had experience of working with '*people with intellectual disabilities, autism, down syndrome and a child with an acquired brain injury*'. Participants' two and three also had experiences of work with individuals with autism whilst participant two also stated she had experience of working '*with a little girl who had a severe physical disability*'. The data suggests that 50% of the participants' had a knowledge and awareness of working with children with autism. The medical model of disability that is predominant in Ireland which focuses on a person's impairment (Watson & Nolan, 2011), is reflected in the responses' and terminology of the participants'. Participant five expressed her wish to work with children with disabilities in the future as she explained she had no experience but '*maybe in the future, hopefully*'. All participants' that engaged in this research had a knowledge regarding disabilities and the minority who had no practical experience of working with an individual with a disability expressed their interest.

Supports currently in place for childcare practitioners'

The Education for Persons with Special Educational Needs Act 2004 introduced the concept of inclusive education in Ireland (Oireachtas, 2004). Whilst analysing the data, there were many supports highlighted by staff in their work with children with disabilities. Communication and supervision were expressed as the primary supports available to the staff working in this area. Participant one stated that '*good communication with parents, families and practitioners that are working with the child*' are crucial for making sure '*we implement a good setting*' while participant three also suggested communication with parents is important as she stated '*her mum is supporting us*' by telling '*us what she is doing outside preschool*'. Participant two highlighted that as a group, staffs were sent '*on a training course relating to hearing and verbal communication issues*'. This indicates the value placed on communication within this organisation. Supervision was suggested as being important by participant four

alongside *'support from other members of staff on the floor'* as playing a key role in the work of childcare practitioners' with children with disabilities. She also expressed that training as a form of support is important but that it can be *'limited at times depending on funding'*. This finding correlates with the findings of the Ontario Human Rights Commission (2016) who recognises that inadequate funding has been a primary delay across the spectrum of educational services, placing children with a disability at a disadvantage.

The six participants' expressed their views on how effective they felt the current supports were at present. Three of the six participants' believed the supports to be beneficial and important in supporting their work. Participant two explained *'they were very helpful and provided an insight in the child's perspective'*; participant five suggested that supports were *'crucial in assisting us to educate all children not just those with a disability'* while participant three stated they are *'good supports'* however she felt *'we could benefit with a county SNA 'that could provide 'on-going support and ideas to be inclusive in the setting'*. The remaining three participants' had varied opinions on the existing supports. Practitioner one suggested the support would *'improve as the child settles in'* while participant four believed that *'children challenge boundaries and supervision may not be there when needed'*. These results coincide with the literature. A similar finding was reported that supports and awareness are needed in relation to teacher training and teacher education with particular focus on emotional behaviour difficulties (O' Caollai, 2014). This was echoed by participants' on multiple occasions throughout the research study. The participants' were asked about their knowledge of supports in other organisations at present. Five of the six participants' were aware of other supports but one practitioner stated she was not aware of any. The practitioners' awareness of external supports varied from intervention teams to grants or funding. Participant two explained that *'Galway childcare committee provides lots of courses and information for all childcare organisations'*. This was reinforced by participant one expressing that *'training in that setting'* was an external support. This finding can be associated to the earlier point made by O' Caollai (2014) regarding training. Two of the participants' highlighted their awareness of funding available to the sector which contradicts the literature as the process of long waiting lists

for funding, professional assessment and delays in the provision of special educational programmes are all barriers highlighted by The Ontario Human Rights Commission (2016). Other external supports indicated in the findings were SNAs', intervention teams, mentoring/ supervision, play therapy, occupational therapy and speech and language therapy. Interestingly the majority of the supports lists by the participants' require professional delivery or training and their provision will be based on funding. Therefore there are still challenges in relation to children with disabilities having their needs' meet in the education sector.

Childcare practitioners' perspectives on future change in the classroom

The concept of inclusive education in Ireland was established with the enactment of the Education for Persons with Special Educational Needs Act 2004 (Oireachtas, 2004). This has been a goal which the Irish educational system has been striving to achieving sense. In 2015, Minister Jan O`Sullivan announced 'The Supporting Access to the Early Childhood Care and Education Programme for Children with a Disability'. This programme aims to provide supports to children with disabilities attending mainstream pre-school for two year with a budget of 17 million secured in 2016 to support the project (Inter-Departmental Group, 2015). The participants' were asked to discuss any concerns they may have and how they propose to facilitate this change in their organisation.

Five of the six participants' expressed that they had no concerns regarding the possible future intake of children with disabilities into their service. Participant two stated she had '*no concerns*' while participant six said '*I don't really have any concerns*'. Participant five said '*our training we have completed should assist us if we have any problems*'. Participant one elaborated and stated '*no child with a disability should be treated any different to those who don't and a good service will provide for the needs of every child regardless of the circumstance*'. Participant three explained she had no concerns but that '*sometimes children with a disability are discriminated against with a cap placed on what can do before they even try*'. This finding is supported by the literature where Hastings (1996) suggests that discrimination exists in the attitudes of schools and principals. The remaining participant also validates Hastings (1996) point regarding

attitudes, as she explains that she believes *'there will be practical issues such as teacher-child ratios and giving too much attention to the child with the disability over another'*.

The analysis of the findings displayed that half of the participants' appear to feel confident about working with children with disabilities in the future. Participant four stated *'from my past experiences of disabilities, I feel I am set up and have sufficient skills to face the change'*. However she added that staff may require additional training in specific areas. Participant three also expressed she would feel *'quiet confident'* as she had completed a course in assisting with special needs and an autism awareness course. Participant two based her level of confidence on having *'enough staff so children with any disability can receive one on one time'*. Three participants' said that they would like to further their education in relation to their work with children with a disability and also that they felt confidence would be gained after a period of time working in the area of disability. Participant six explained that she was unsure regarding her confidence when working with children with a disability. It is apparent from this study that Winter & O`Raw (2010) theory that a lack of information and knowledge contributes to the ongoing neglect of a child's right to education specifically those with a disability, as 50% of participants' connected confidence levels to training.

In order to override the concept of marginalisation and the principle of normalisation (Rohan, 2008), the participants' were asked to consider how they proposed to facilitate mixed ability classes. The participants' identified multiple strategies in order to facilitate the future change. Participant four explained that it *'will be decided upon by the managers'* but she hoped that they would consult with the staff in order for her to express her concern regarding *'the safety of all'* and to seek *'clarity and reassurance'* on the *'teacher-child ratio'*. Participant two proposed to use training she had engaged in previously as she stated *'we have been shown how to look out for any signs of oncoming distress and to help the child deal with it before it escalates'*. Similarly participant six said she would use her *'anxiety management'* training. Both participant one and six identifies strategies that are also recognised by Reynolds et al (2013). Participant one suggested using *'spare time to sit one to one with a child'* while

participant three highlighted using 'the same materials but different levels'. This strategy is supported by Reynolds et al (2013) where they suggest breaking learning exercises into smaller steps using less complex language and providing direct feedback to the child.

The ideology of smaller groups and steps of instruction was also highlighted by participant two when asked to provide strategies for problems they may envisage. She stated '*try to ensure any child with a disability is in a smaller group and in a quiet area where they can relax*'. This idea, while it may be suitable for some children with special needs or disabilities, could be criticised as displaying an attitude focused on marginalisation or segregation. However, the notion of a quiet area was reinforced by participant one who explained '*always keep the situation calm, find out what the problem is and maybe have a quiet area*'. Two of the practitioners recommended that to unravel a problem have time to talk to the children each day and one to one where possible. Participant four suggested that support '*should be supplied directly to the staff from management with clear direction*' and the safety of all should be paramount regardless of ability. Interestingly, participant three recognised the need for '*more support to preschools as most of the time the diagnosis is done at a young age I feel early intervention is key*'. This participant draws on an important point illustrated in the literature regarding assessment. The Department of Education (1993) recommended that children with disabilities should receive ongoing assessment throughout pre-school years however this was not confirmed to be in practice by the participants' in this study.

Barriers to implementing change

The literature highlighted other areas that require change. The application process for supports and resources was identified as difficult for almost half of the participants', while others recognised that students deemed to have greater needs were often prioritised for psychological assessment over others (Griffen, 2013). However, Rose et al (2010) recognises that there has been significant changes and developments made towards achieving an inclusive school environment. The research focused on how supported the childcare practitioners' were by their organisation in effecting change. All six of the participants' expressed that their organisation would support and provide guidance to staff in effecting a change, the level of support varied depending on the

perception of the participant. Participant five expressed great confidence in the organisation as she stated *'they help us in a situation where change is needed and they encourage us to bring forward new ideas'*. Participant one stated she *'would feel confident they would help in any area'* while participant two explained their *'manager is always willing to help every child and childcare assistant where possible'*. This was also reiterated by participant three. The remaining two participants' also recognised that the organisation would support staff, however participant six had little experience with the organisation and participant four believed the support would filter out over a period of time as they would *'forget it's new to us'*. The literature suggested that the change process goes through a series of phases and requires a considerable length of time (Kotter, 1995). One of the participants' in this study highlights that the organisation may not carry out the change process of the required lengthy period. Kassean & Jagoo (2005) notes that in any change situation the key stakeholders' need to be involved and communicated with throughout the process in order for it to be a success.

In contrast to this the Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability appears to have failed to provide information or communicate with a large proportion of childcare practitioners. The participants' in this study were unsure what the implementation of this new programme would mean with regards to their daily work. However upon further questioning the practitioners' believed that altering some existing supports would be beneficial to their possible work with children with disabilities in the future. Two participants' believed that no changes needed to be made as *'everything was running ok at the minute'* however the remaining four participants' contradicted this intuition. Participant two suggested *'a lot more training and first aid knowledge'* would be beneficial while both participants' five and three indicated the provision of an SNA should be considered. Participant five expressed also that regular supervision should be altered or reviewed which was supported by participant four as she explained *'supervision needs to be implemented properly in all organisations'*. The provision of special needs assistants for children with disabilities is highlighted by two participants' as a support which requires alteration. Griffen (2013) in the literature notes that accessing SNAs' is an issue for parents.

Based on the discussion of the findings of this research study it is fair to state that the ultimate goal of any jurisdiction should be to promote equality and create opportunities for change for individuals' with a disability. The knowledge, views and experiences of the childcare practitioners' provide an invaluable insight into what supports' are in place for children with disabilities in mainstream preschools and what issues the participants' envisage in light of the proposed changes in the education sector.

An evaluation of method and limitations of the study

This research study was conducted under a qualitative method of semi-structured interviews which allowed for the research to use thematic analysis technique which provided an in-depth knowledge of the research question. The core interview schedule combined with the use of probing questions allowed the participants' to provide the researcher with clarity on specific topics and acquire a deeper body of knowledge. This study was completed with the use of one single research method, which was qualitative research. While the participants' that engaged in this research were from one specific organisation this study is valuable in its own right as each participant provided a body of knowledge and experience unique to them. This could be viewed as a limitation; however it should not be deducted from the study and its findings.

Weaknesses in the qualitative data collection process such as response bias and poor question structure was considered during this research. In this study weaknesses were eliminated as multiple draft questions were piloted to reduce the possibility of poor questions. A reasonable interview schedule (Appendix 3) was achieved from the support and guidance of my supervisor.

The small scale study was deliberate in order to facilitate the time frame imposed on the research study. The sample selected to participate in the research study was a convenience sample meaning those who participated were accessible and conveniently available to participate in the research and ultimately it is not a representative sample. The sample which was purposive may develop difficulties for future researchers attempting to replicate the study. However the procedure in this research can be replicated but the results will differ as the research sample will also be different. The

credibility of future studies can be achieved through the thick description of information and data (Tracy, 2010).

Conclusion

This study addressed the objectives directly by seeking the views and knowledge of childcare practitioners'. An evaluation of the supports for children with disabilities in mainstream preschool was provided. There was a mixed knowledge base and level of experience among the childcare practitioners' who participated in this study. The attitudes and concerns of staff towards the possible future intake of children with disabilities into their service was also discussed. The six participants' described their understanding of a disability in the same manner however, some individuals' provided more details regarding their knowledge. The participants' experience of working with children with a disability varied. Four of the six participants' had first-hand experience, one participant had a personal awareness and the other participant had no experience to date. Fifty percent of the participants' had a knowledge and awareness of working with children with autism. Communication and supervision were highlighted by the participants' as the primary supports' available to the staff working in this area. The confidence levels of the practitioners' varied, three participants' suggested more training and work experience would be beneficial, while the other three participants' expressed that they were confident in their ability. The response from the participants' regarding the improvements of their confidence levels in their work coincides with Winter & O`Raw (2010) findings. Finally all six participants' expressed their trust in their management to support them in effecting change.

This research will hopefully add to the existing body of knowledge regardless of the fact that it is a small scale study. It proposes to inform management of the supports which staff feel are important when working with children with disabilities.

Finally, whilst the literature available provides an insight into a variety of models of disability, supports available to children with disabilities in school and also the supports which parents' believe their children require in the education system, the reality is that there is no input from childcare practitioners' in these studies which this research aims to correct. Future research is required in this area in order to examine the

implementation and conduct of the proposed programme, Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability. Nevertheless, below are some recommendations, which may further enhance the current and future supports available to childcare practitioners' when working with children with disabilities.

Recommendations

This research highlights the necessity for the introduction of compulsory training courses in relation to disability awareness and a communication course tailored specifically for practitioners' that work with children with a disability at the early years stage of education. It would allow practitioners' to view the situation from the Childs' perspective and possibly require less support from management.

A second recommendation is for the piloting of new proposed programmes prior to their national implementation. This would instil confidences among staff and encourage their commitment to the programme if they feel it has been proven as successful and beneficial.

Finally, research that is on-going has a crucial role to play in the monitor of supports for childcare practitioners' working with all children, not just specifically with the area of disability, as it would highlight inadequate supports and encourage management to focus on and put funding supports that are beneficial.

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Appendices

Appendix 1

Measures to enhance effective teaching of students in an inclusive setting

- A variety of teaching strategies and approaches
- Clear learning objectives outlined at the beginning of the lesson, reference made to them during the lesson, and a review with the students of what has been learned occurs at the end of the lesson
- Formative assessment strategies for identifying the students' progress that are used to help inform teaching approaches
- The content of lessons is matched to the needs of the students and to their levels of ability
- Multi-sensory approaches to learning and teaching
- Materials, including concrete materials, are appropriate to the needs, ages, interests, and aptitudes of the students
- Deviations from lesson plans when unexpected learning opportunities arise do not result in the loss of the original objectives of the lesson
- Appropriate time is allowed for practice, reinforcement, and application of new knowledge and skills in practical situations
- Students are reinforced and affirmed for knowledge and skills learned
- Opportunities are in place throughout the curriculum to enable students to develop language and communication skills (e.g. listening, speaking, reading and writing)
- Opportunities are taken throughout the curriculum to develop personal and social skills
- Students are encouraged to explore links with other areas of the curriculum
- Homework is designed to consolidate and extend, to promote independent learning, to monitor individual students' and class progress, and to evaluate the effectiveness of the teaching and learning

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Appendix 2

Description of levels of support to be provided

Level 1: An Inclusive Culture:

This level is the critical foundation for the model. This sets out that a strong culture of inclusion must be fostered and embedded to support all children's maximum participation in the ECCE Programme. Recommendations include the development of a national inclusion policy for ECCE, the identification of Inclusion Coordinator in each ECCE setting, funding being made available to provide training in inclusion for these and other early years practitioners, and a small increase in capitation for ECCE settings who meet certain criteria to incentivise fully inclusive practice.

Level 2: Information for Parents and Providers:

This level recognises the requirement of parents and providers to have clear, consistent and up to date information accessible to them regarding ECCE services and supports. Recommendations include the development of a national website which is linked from all relevant children's services and the development of information packs which can be provided at local level.

Level 3: A Qualified and Confident Workforce:

This level recognises the requirement to continue to develop a qualified workforce that can confidently meet the needs of all children wishing to participate in the ECCE Programme. It supports the recommendation from the IDG on Future Investment in Early Years and School Aged (Including After-School and Out-of-School) Care and Education to continue to raise the minimum qualification for employment in the sector. It also seeks dedicated funding for formal and informal training and a structure to be put in place to ensure same.

Level 4: Expert Educational Advice and Support:

This level addresses the needs of early years practitioners across the country to have timely access to advice and support from experts in early years education (and disability

in particular) to assist them meet each child's needs. It recommends an enhancement of the Better Start Early Years Specialist Service (EYSS) that was established in 2014.

Level 5: Equipment, Appliances and Minor Alterations Capital Grant:

This level recognises that some children require specialised equipment, appliances, assistive technology and/or that some ECCE settings may require minor structural alterations to ensure children with a disability can participate in the ECCE Programme. It recommends the provision of annual funding, the establishment of a grant and an application process to access these supports.

Level 6: Therapeutic Intervention:

This level provides for access to therapeutic services where they are critical to enable the child be enrolled, and fully participate, in the ECCE Programme. It recommends further enhancement of HSE Therapy Services to enable priority be given to this important aspect of early intervention.

Level 7: Additional Assistance in the Pre-School Room:

This level recognises that a small number of children (approximately 1.0% - 1.5% of those availing of the ECCE Programme) will require more support than is available through Levels 1-6. The IDG recommends the provision of additional capitation to providers where an application process has demonstrated that supports Level 1-6 have not, or will not, by themselves, meet the child's needs. The additional capitation will be agreed with the provider and parent. It can be used by the provider to buy in additional support, to reduce the staff / child ratio, or for other specified purposes, all centred on supporting the pre-school leader to ensure the child's optimal participation.

Reference:

Inter-Departmental Group, (2015). *Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability*, Dublin: Inter-Departmental Group

Appendix 3

Interview Schedule

- Q.1) What is your understanding of a disability?
- Q.2) What is your level of qualification?
- Q.3) Have you received any training when working with children with disabilities?
- Q.4) Have you any previous experience of working with children with a disability?
- Q.5) What supports are currently in place to assist you in your work with children with disabilities?
- Q.6) How effective do you feel these supports are at present?
- Q.7) Are you aware of any other supports that are provided to childcare practitioners who engage in a similar role to yours in another organisation?
- Q.8) Do you have any concerns regarding the possible intake to your service of children with disabilities?
- Q.9) How confident do you feel about working with children with disabilities in the future?
- Q.10) How do you propose to facilitate mixed ability classes?
- Q.11) What strategies for dealing with the potential problems that you envisage can you propose?
- Q.12) When attempting to effect change do you feel supported by your organisation?
- Q.13) Which supports currently in practice do you feel need to be altered in order to benefit childcare practitioners who work with children with disabilities?
- Q.14) What, if any, recommendations would you make for future service provision?

Appendix 4

Information Sheet

An evaluation of supports for children with disabilities in mainstream preschool

To whom this may concern,

I am seeking to find childcare practitioners to participate in my research as part of my Master of Arts in Child and Youth Studies in Athlone Institute of technology. I am trying to conduct an evaluation of supports for children with disabilities in mainstream preschool. The objectives are to evaluate the perspectives of childcare practitioners when working with children with disabilities. I also wish to explore the attitudes and concerns of staff towards the future inlet of children with disabilities into their service.

I would be very grateful if you could take part in this research. I will be using interviews as part of my research which will involve the research and one participant at any given time. In the interview I will ask you about your experience of disabilities and how you feel the influx of children with disabilities will impact upon your working day. The interviews will take place at Stapleton's Childcare centre and will last for no longer than 40 minutes. I will only ask you questions relevant to the research and nothing else.

I would like to tape the conversation. You can stop the interview at any time. If you do not want to answer some of the questions, that is ok.

During the interview I want all participants to feel comfortable and relaxed as all information shared is between you the participant and myself. However if any information is shared that is a concern to me I will have forward this information to the necessary body.

Both your name and that of the organisation in which you work will remain confidential and will not appear on written documentation as confidentiality and anonymity will be kept.

If you like to participate in my research I would be delighted if you could sign the consent for below and also the section to allow me to record the interview. If you decide that you wish to withdraw your consent at any point in the research you may do so.

Any further questions please do not hesitate to contact me at [HYPERLINK](#)

"mailto:A00181799@student.ait.ie" A00181799@student.ait.ie or via telephone on 089-2048080.

Kind Regards

Donna Clarke

Appendix 5

Consent form

An evaluation of supports for children with disabilities in mainstream preschool

I agree to take part in this research regarding the supports for children with disabilities in mainstream preschool. Donna Clarke has explained to me what the study is about and how the research process will be carried out. I am taking part as long as I will not be named in the report or the organisation in which I work. I understand that I can withdraw my consent at any point in the study if I so wish.

Signed _____ Date _____

I give my permission to my have interview audio recorded? YES _____ NO _____

Signed _____ Date _____

