An Integrated Early Childhood Curriculum

By Rebecca S. New
2005 KITS Summer Institute Presenter

What should children learn and how ought they best learn it? Most would agree that schools should teach children how to do things that our culture values—that is, to read, to compute mathematical problems, to communicate effectively. And yet such a response in a pluralistic society such as the Unites States is much less simple than it might appear. What do we mean, after all, by the phrase “communicate effectively”? Does this mean that all children should learn Spanish, sign language, and computer skills? Discussions about curriculum (content and method) lack integrity if the discussants cannot also respond to these two related questions: Who says so, and why? Using an integrated curriculum approach, educators of young children can address these issues by respecting the critical need to justify decisions associated with educational imperatives.

An integrated curriculum emphasizes the necessity of making explicit connections between learning experiences in an educational environment and children’s whole lives, including their experiences both inside and outside of the classroom. What follows are four broadly defined qualities that might characterize an integrated curriculum that seriously acknowledges its responsibility to young children who are growing up in a pluralistic democratic society.

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Refocusing our Perspective Based on the Available Evidence

Five teams in Kansas are participating in an initiative entitled "Implementing Evidenced-Based Practices in Early Childhood Intervention: Coaching in Early Childhood" facilitated by M’Lisa Shelden and Dathan Rush. These teams include Flint Hills Special Education Cooperative, Geary County Infant-Toddler Services, Northeast Kansas Infant-Toddler Services, Infant-Toddler Services Network of Riley County, and Shawnee County Infant-Toddler Services. The KITS newsletter will continue to include information about this initiative and the availability of other training opportunities as they are offered. Below is an excerpt, reprinted with permission, from Shelden & Rush, 2005.

Looking back on our careers as early interventionists, particularly as we moved from center-based services to supporting families in natural learning environments (circa 1990), we realized early on that kerplunking what we'd always done in the clinic into families' living rooms didn’t make sense. We soon learned that being in a family's home provided us

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NEWS FROM KDHE
Hello from Topeka and the Kansas Department of Health and Environment (KDHE) Infant-Toddler Services. This is an exciting yet challenging time in Kansas right now, as we are in the midst of three initiatives being developed to promote evidence-based practices in the field of early intervention. I’m going to briefly discuss these initiatives and provide the links for more information.

As many of you know, the Office of Special Education has given the state of Kansas the task of developing a child and family outcome measure for infants, toddlers and preschoolers with disabilities. These measures will be used at the local and state level to provide accountability to the Office of Special Education. We are working with the Early Childhood Outcomes (ECO) Center to develop and implement our outcome measurement system. Along with the Kansas State Department of Education, we have selected the assessment tools, sent a survey to all Part C coordinators as well as Special Education Directors, and are in the process of finalizing these selections and sending them to the field for input. Training on the outcome measurement system will occur in the Spring of 2006.

For more information: www.fpg.unc.edu/~eco/index.cfm

Another initiative, Caring for Infants and Toddlers with Disabilities: New Roles for Physicians (CFIT), is based upon a model that addresses a universal challenge in early intervention and the involvement of physicians in community early intervention systems. This training provides pediatricians and family physicians with the information and skills they need to be participants on community-based early intervention teams.

State planning for this initiative has been going on for approximately six months with a collaborative team of physicians, parents, state personnel and local network coordinators. An introductory seminar (via interactive television) will introduce physicians to the concepts of: 1) a community-based, interdisciplinary, interagency early intervention approach; 2) family-centered services; and 3) the Independent Study process. This seminar will take place on Friday, April 28, 2006 from 7:00 - 10:00 a.m.

For more information: www.coachinginearlychildhood.org/

Our last exciting initiative at KDHE is Evidence-Based Primary Coaching which involves five early intervention teams (see list of teams on page 1 in Refocusing our Perspective Based on the Available Evidence article) who are currently changing the way they practice.

Coaching in Early Childhood is affiliated with the Center for Dissemination and Utilization at the Orelena Hawks Puckett Institute. The focus of this initiative is to investigate the characteristics and utilization of coaching to promote the adoption, use of, and adherence to evidence-based natural learning environment practices for children from birth to age three and their families.

For more information: www.coachinginearlychildhood.org/

Please do not hesitate to contact any of the staff at Infant Toddler Services (785-296-6135) as we continue to be committed to making Kansas a great place to raise infants and toddlers with special needs.

—submitted by Deanna Peterson, Part C Coordinator, KDHE Infant-Toddler Services

Lead in Children’s Lunch Boxes?
The Center for Environmental Health issued a press release on August 31, 2005 regarding the potential dangers of lead in vinyl lunch boxes. See http://www.cephca.org/lunchboxes.htm or http://www.msnbc.msn.com/id/9591140/ for details.
### The Collaborative Calendar of Events (kskits.org/ktc/)

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<th>DATE</th>
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<tr>
<td>11/17-18/05</td>
<td>Kansas Head Start Association Annual Conference, Wichita</td>
<td>Mary Baskett, 913-422-1700</td>
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<tr>
<td>11/18/05</td>
<td>Vision Screening &amp; Assessment, Salina</td>
<td>785-628-6128, ahecnorthwest.kumc.edu</td>
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<td>12/3/05</td>
<td>Our Combined Voices: Making a Difference for Children with Disabilities, Statewide Inclusion Conference, Wichita</td>
<td><a href="mailto:lei@familiestogetherinc.org">lei@familiestogetherinc.org</a></td>
</tr>
<tr>
<td>2/11/06</td>
<td>Families Together Statewide Conference, Kansas City</td>
<td><a href="mailto:lei@familiestogetherinc.org">lei@familiestogetherinc.org</a></td>
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<tr>
<td>3/19-21/06</td>
<td>Kansas Fatherhood Summit, Wichita Marriott</td>
<td>Tammy Aguilar, 785-368-6350, <a href="mailto:TXA@srskansas.org">TXA@srskansas.org</a></td>
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<td>4/26-28/06</td>
<td>KSDE Annual Conference/TDAP Conference, Wichita</td>
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<td>4/28/06</td>
<td>Caring for Infants &amp; Toddlers with Disabilities (CFIT) Physician’s Training, ITV sites across Kansas</td>
<td>Deanna Peterson, 785-296-2245, <a href="mailto:dpeterson@kdhe.state.ks.us">dpeterson@kdhe.state.ks.us</a></td>
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<td>6/20-23/06</td>
<td>KITS Summer Institute, Manhattan</td>
<td>Misty Goosen, 785-864-0725, <a href="mailto:mistyg@ku.edu">mistyg@ku.edu</a></td>
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### Other Training Calendars:

- KCCTO child care or CDA advisor trainings: http://www.kccto.org/training.htm
- Families Together Family Enrichment Weekends, Parent Networking Conferences and Mini-Conferences: www.familiestogetherinc.com
- Children’s Alliance Training Team: www.childaly.org/training/training.html
- KACCRRRA: www.kaccrrra.org
- Capper Foundation: www.capper.org
- Council for Exceptional Children: www.cec.sped-org/pd
- KSDE Student Support Services: online.ksde.org/calendar.asp

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**Refocusing our Perspective continues from page 1**

with a wealth of critical information and also heightened our sense of responsibility. We began to understand that using the family's/child's interests, routines, rituals, and priorities was the venue for promoting the child's existing abilities and learning new skills. By providing therapy to the child and giving homework for parents to perform in our absence or embedding activities and exercises into daily life, we were actually disrupting well-established, meaningful learning opportunities (Raab & Dunst, 2004). We found that what we were doing or telling the parents to do was very often our priority not theirs. We also recognized that most of our therapy and recommendations did not take place within the context of naturally occurring activities. As we focused on the child as the direct recipient of our instruction/therapy we were sending the message that the child needed something that only we could do. Unfortunately, our efforts emphasized our importance and inadvertently diminished the significance of the fundamental role that families play in relation to child learning.

As we continued to clarify our ideas and look for research to support or refute our practices, we found the Dunst (2000) article, "Revisiting rethinking early intervention," particularly useful. This article defines the framework for reconceptualizing our role as practitioners working in early intervention and especially in supporting parents in natural learning environments. Based on considerable evidence about child learning and...
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1) Inclusive of All Children and Connected to Their Lives

When children’s learning in school is linked to their lives outside the classroom, their interests are multiplied and they often seek additional opportunities to pursue related activities. Curriculum must thus embrace the classroom environment as a place in which children can find traces of their past experiences as well as their current interests, plans, and activities, emphasizing the need for connections and continuity among the children, their activities, and their multiple (home and school) contexts of their learning and development.

Providing high-quality inclusive and heterogeneous classrooms provide the opportunity for children to learn from one another. Children have an opportunity to learn from and with others. They learn to accept and support one another, recognizing that everyone has something to give and receive, a preferred value in a democratic society.

2) Challenging to Children and Adults

The American “obsession with self esteem” (Beane, 1997) has somehow been interpreted to mean that children should be given more opportunities to succeed than to fail and that perhaps it would be in their best interest if we don’t ask too much of them. This type of educational attitude does little to capitalize on the vast learning potentials of children. An integrated curriculum respects children’s capacities and motivation to learn by providing short and long term opportunities that matter and do not go on for no particular reason.

Single subject classroom activities are selected to stretch children’s imaginations and problem-solving abilities, even as problems themselves invite children to work hard together to find solutions. Such a curriculum entails a more sophisticated understanding of mastery motivation than has previously dominated the field, with recognition of both the social and intellectual properties of the problem or task that are essential to evoking the “I think I can!” response in young children (Hauser-Cram, 1998).

3) Communal and Collaborative

Perhaps the most essential quality of an integrated curriculum is its communal and collaborative nature. A major role of the curriculum to create a classroom community is to promote a coming together of parents and teachers, and therefore nurture the collaborative and reciprocal relationships of the school and larger community.

Establishing such a community is not an easy task. Parents and teachers face numerous obstacles to effective partnerships, including different interpretations of parental versus professional expertise and a lack of administrative support for true parental engagement within the cultural context of schools. These concerns are exacerbated in settings characterized by ethnic, socioeconomic, and political differences regarding the aims and characteristics of high-quality early childhood programs. In addition, teachers are often hesitant to invite controversy into discussions of the early childhood curriculum, especially when the contributions are from groups already suspected of having alternative
perspectives on how best to care for and educate young children. However, these types of discussions open participation in the negotiation of issues of public concern that make for a much more vibrant curriculum in the end.

4) Courageous

As teachers help children solve social and intellectual problems, respond to children’s creative and emotional responses to classroom events, plan and implement projects that represent multiple learning opportunities for diverse learners, they are teaching young children powerful lessons in what and how knowledge, behaviors, and relationships are essential to a safe and inclusive learning community.

This interpretation of the curriculum necessitates a recognition that virtually all pedagogical decisions carry moral weight, including those required when teachers must balance their concern for accurate subject matter knowledge with concern for the students, including but not limited to the process of learning. For a curriculum that integrates not only bodies of knowledge but also consumers of such knowledge, teachers are faced with perhaps the most difficult task, go public with their understandings and hopes for children. This form of advocacy requires teachers to be skilled at observing and recording children’s learning and be more willing to share their findings with others, each of whom is likely to have his or her own set of opinions and understandings.

These four broad categories help educators to understand the “essentials” of a truly integrated and appropriate curriculum. Such a curriculum is based on the belief that children have the right to learn about what is of interest to them in a manner that insures that they will also develop those skills and understandings that are critical to their participation in a larger society. The curriculum acknowledges the adults responsibility (parents and teachers) in the negotiation of educational goals and strategies that reflect common ground among diverse points of view, and it respects teachers’ capacities to use what they are learning about children and what they believe in as catalysts for public conversations about the purposes of an early childhood education.

Editor’s note: This article is a summary of a larger book chapter written by Rebecca S. New. For a complete version see:


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effective helpgiving as well as considerable effort in changing our mental models and practices, we learned to:

- Appreciate what children and families can do instead of dwelling on what they can’t;
- Build on parent knowledge and skills instead of creating dependence on us as professionals;
- Help parents identify and access desired resources instead of assuming the need for and benefit of professional services;
- Recognize child and family strengths instead of emphasizing the problems; and
- Support family priorities and interests instead of dispensing professionally-driven recommendations.

As we share these reflections and research evidence with therapists, teachers, and service coordinators we often hear statements such as, "Well, I know what I’m doing with the child is working," or "I can see that the child is making progress," and "I’m the only person with the skills and knowledge who can do what I do for the child." We counter these statements (and many more like them) by asking questions to promote reflection about evidence-based practices.

- What evidence do you have that the intervention you’re using or recommending works?
- What evidence do you have to demonstrate that the child would not have made the same progress without the intervention(s)?
- How does what you’re doing address the purpose of early intervention, which is to promote parent competence and confidence in helping the child learn and grow?

- How do you know if your interventions are consistent with child and family interests, priorities, and routines or if these interventions have a negative impact and actually impede a family’s ability to participate in interest-based, real-life activities?

Our responsibility as practitioners and service coordinators working in early intervention is to use available evidence to refocus the lens through which we have traditionally viewed and interacted with children with disabilities and their families. In doing so, we stop telling and doing and start listening and building the capacity of family members to support their child’s development. As suggested by disciplines across the field of early intervention (Dinnebeil, McInerney, Roth, & Ramaswamy, 2001; Hanft & Pilkington, 2000), our role clearly emerges as a coach to the adults in the child’s life to maximize their confidence and abilities so that child learning and development of new skills occurs naturally as a part of everyday life (Dunst, Hamby, Trivette, Raab, & Bruder, 2000).


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References:

What’s New and What’s Possible with Early Childhood Information Services

Did you know that Kansas provides a way for early childhood special education and early intervention staff and families to have direct access to research-based information in order to meet the needs of young children?

In late 1999, Kansas Inservice Training System (KITS) recognized the need for expanded access to information services in order to further the technical assistance that was offered to Part B and Part C personnel. To meet this need, the Early Childhood Resource Center (ECRC) was written into the KITS grant and moved to its present location in Parsons. With the change of location also came the expansion of access to the holdings through the Internet. The entire collection of resources can be searched, browsed and requested through online access. If you’re not Internet savvy, our friendly personnel are more than willing to walk you through the process.

Housed in Parsons, but serving the state, the ECRC is ready and waiting to help meet your information needs. The ECRC maintains a collection of materials specifically focused on early childhood special education, and also has access to many academic databases that allow us to provide literature searches on diverse research-based topics relevant to the early childhood special education field.

The ECRC is always willing to consider requests for specific items to add to our collection. A list of new items added is constantly updated on our website, or you can request to be emailed directly when new items are added.

The ECRC continues to explore new ways to meet the information needs of the early childhood special education field, including using new technologies to deliver content more quickly and discussion forums around specific resources. If you have ideas or suggestions for ways the ECRC can meet your information needs, please don’t hesitate to contact us. We are at your service!

—submitted by Tammie Benham, KITS Early Childhood Resource Center, 620-421-6550 ext 1638

Contact ECRC:
620-421-6550 ext. 1651
800-362-0390 ext. 1651
Email: resourcecenter@ku.edu
web: kskits.org/ecrc/
fax: 620-421-6550 ext. 1791
Mailing address: 2601 Gabriel Parsons, KS 67357

New Materials Available for Check-out from the KITS Early Childhood Resource Center

All resources added to the Early Childhood Resource Center have met or exceeded requirements for being research-based as defined in our collection development policy. For more information, check out website at kskits.org/ecrc/html/policy

- What Do We Know about Early Childhood Education? Research Based Practice
- Preschool Education Programs for Children with Autism (2nd ed.)
- Brigance Preschool Screen II
- Getting the Most out of your Partnerships: Using Knowledge Management and Communities of Practice
- Houghton Mifflin Pre-K: Where Bright Futures Begin (curriculum)
- Educating Young Children: Active Learning Practices for Preschool and Child Care Programs
Recognition of Application of Best Practice

Kansas Inservice Training System, Kansas State Department of Education’s Student Support Services, & Kansas Department of Health and Environment’s Infant-Toddler Services are requesting applications to recognize programs across the state that have incorporated innovative components of best practice into their programs. An amount of $1000 will be awarded to up to three Part C programs and up to five Part B programs identified as demonstrating best practices by a panel of early childhood professionals in our state.

Applications have been mailed to all special education directors and Community Network coordinators and can be requested by contacting Robin Bayless at 620-421-6550 ext. 1618 or rbayless@ku.edu or applications can be downloaded at http://kskits.org/html/bestpractice/ep.html.

Applications must be postmarked on or before Friday, January 13, 2006. The announcement of the recipients will be made during the general session at the KDEC Conference in Overland Park, March 2, 2006.
Early childhood curriculum models also vary in terms of the freedom granted to teachers to interpret implementation of the model's framework. Some curriculum models are highly structured and provide detailed scripts for teacher behaviors. Others emphasize guiding principles and expect teachers to determine how best to implement these principles. Curriculum models, regardless of their goals and the degree of flexibility in their implementation, however, are designed to promote uniformity across early childhood programs through the use of a prepared curriculum, consistent instructional tech