Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and routines as full members of families, communities, and society.  

(DEC & NAEYC, 2009)

Inclusion means integrating children with disabilities with their peers in the activities and routines of home, education, and community settings.  

(AOTA, 2015b)

“Inclusion is a social justice issue—all children and youth with disabilities have a right to live, learn, play, and work alongside their typical peers.”  

(AOTA, 2015b)

OT practitioners have the knowledge and skills to offer inclusion strategies.

“As many early childhood teachers and providers do not have specialized disability certifications, instruction should be delivered in consultation with and under the supervision of professionals with specialized training and certifications, such as occupational therapists, physical therapists, and speech-language pathologists or other related services providers…”  


The core principles of occupational therapy support delivery of early intervention service in natural environments and contexts whenever possible.  

https://www.aota.org/EI-FAQ

References


“I think OT is a great profession to initiate the push for inclusion because we [practitioners] look at children in context. We can advocate for inclusion by explaining to daycare providers how we need to see the child in his or her classroom in order to provide best service.”

—Occupational therapist

“You may run into people who are a little uncomfortable and don’t know how to act. We can help them learn that it’s okay. She’s just like any other child. Usually it’s just as easy as saying that your expectations are that she learn what the other kids learn but that it just might take her a little longer or you might need to approach it differently.”

—A child’s dad
Occupational therapy practitioners (OTPs) are an important part of interprofessional teams to promote inclusion.

According to the American Occupational Therapy Association (2015a), occupational therapy’s distinct value is “to improve health and quality of life through facilitating participation and engagement in occupations, the meaningful, necessary, and familiar activities of everyday life.”

OTPs contribute to inclusion by collaboratively working with stakeholders and community partners (e.g., educators, caregivers, organizations). Occupational therapy focuses on participation by promoting inclusion in natural environments in a variety of ways:

- Building community engagement by offering equal access for children and families to participate with peers
- Modifying the environment and/or the activity to remove barriers to full participation
- Facilitating social and emotional development
- Aligning with family-centered priorities to build skills and to empower/engage families
- Grading child-directed activities that are part of the child’s everyday routine
- Increasing access and opportunities for playful learning
- Preparing for early childhood transitions from home to school
- Meeting family goals and aligning with state accountability measures
- Building school readiness skills such as level of attention and positive behavior
- Increasing early literacy skills and closing word gap disparities
- Adhering to universal design for learning (UDL) and universal design (UD) principles
- Providing a range of assistive technology strategies and tools to enhance participation
- Supporting milestones for growth and development and offering surveillance for early signs of delay
- Aligning with mandates for least restrictive environments (IDEA, 2004 Part B) and natural environments (IDEA, 2004, Part C)

Settings for OT Services

Inclusive, integrated OT services customize strategies for individuals with more significant needs through direct services or support overall design and programming through consultative services. OTPs promote inclusion across settings such as:

Daycare

Modifying the environment so a child can be at the same level as playmates in order to participate in activities such as snack time and social activities.

Preschool

Co-leading activities with a preschool teacher to promote self-regulation and social function.

Community Settings (e.g., park, playground, grocery store, library, museums, pediatrician office, YMCA)

Partnering with a library to offer a community group to promote child-parent/caregiver bonding through early literacy activities; grading summer camp activities and promoting social interaction with peers.

Home

Coaching parents on ways to facilitate social interactions among siblings and/or other family members.

Inclusion may improve early childhood outcomes.

“The desired results of inclusive experiences for children with and without disabilities and their families include a sense of belonging and membership, positive social relationships and friendships, and development and learning to reach their full potential.”

(DEC & NAEYC, 2009)

The U.S. Department of Health and Human Services and U.S. Department of Education (2015) released a joint statement that “…all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations.” (p. 1)

Research supports the benefits of inclusion.

(Green, Terry, & Gallagher, 2014; Strain & Bovey, 2011)

Occupational therapy practitioners recognize that inclusion in early childhood experiences, such as daycare and preschool, is important for later participation in school activities. A parent wanting to change how their child is able to participate is most likely to consider strategies for the activity or peer group.

(Benjamin, Lucas-Thompson, Little, Davies, & Khetani, 2016)

“He was playing with blocks and peers came over. He was able to stay at the table and play with his peers. Prior to [inclusive OT practices] he would have walked away when approached by his peers. It helps other kids [too] … they were calling his name and calling him over, they were learning how to interact with him.”

— Occupational therapist