Products or outputs of the project

The proposed project will produce **specific "outputs"** and will also initiate **a process** to enable local communities to continue to evaluate current levels of service for children who are identified with disabilities or at-risk for developmental disabilities and their families and to respond to barriers to social inclusion in their communities. Below we list the specific kinds of "outputs" within the two objectives of the project that we anticipate producing and then discuss each one in further detail.

Products or outputs for Objective 1: Building community capacity

Phase 1: Identification of barriers to social inclusion

This proposal will examine and identify the barriers to social inclusion faced by children with disabilities and their families. This information will be collated and distributed to parents, professionals and government agencies as a means of calling attention to these barriers and the formation of a prioritization for addressing these barriers. In our case studies, interviews and focus groups we will consider the **intensity and frequency of these various barriers** and the ways in which families have responded to these barriers. Examples of some of the barriers that will be cited include, but are not limited to, the following.

- lack of screening, diagnostic and referral programs for vulnerable children and their families
- lack of "specialized" services for vulnerable children with specific disabilities and their families
- lack of services for "typical" children that can accommodate vulnerable children and their families
- fragmentation of existing services
- long wait time for services
- lack of communication among and continuity
- disruptions to family work patterns
- other illness or disruptions to family life and stability
- accessibility and transportation to services
- cost factors
- poverty

Rarely do barriers exist in isolation from one another and when they are experienced in combination the impacts on the families and children are multiplied exponentially. The addition of information from the HELP Community Asset Mapping Project and results on local results on school readiness will help provide an accurate an in-depth profile of the barriers to social inclusion.

For example, poverty in and of itself is a powerful barrier to full social inclusion but it's impact is felt even more strongly when poor families have a child with a serious disability and they live in a community with few family or child

resource supports. Frequently, for example, social and recreational programs that serve **'typical' children** do not lower barriers to inclusion for example. There are also barriers of quantity and quality within the realm of **specialized programs** for children with disabilities. These programs, usually targeted for children with very specific disabilities within the low incidence range (for example, autism, cerebral palsy, multiple disabilities), are few and chronically under-funded thus limiting their accessibility to many families.

Phase 2: Creation and dissemination of information from Phase 1

The outcomes from the consultation phase of the project will include the **community surveys and questionnaires** that will be developed. In addition the **community asset maps** will provide detailed visual information on services in the communities. The surveys and questionnaires will be easily adapted to other communities and the maps will serve as examples to other communities that wish to enter into this process. All these materials will be available **in print, on CD Rom and in downloadable formats from the Web and will also be translated in a number of different languages.**

Materials for **parents** will include guidelines and suggestions on a number of different topics.

- We will update and add material on at-risk parents to our existing brochure entitled "*Understanding the Early Years"***,** a user-friendly document currently distributed through hospitals and other agencies. This brochure gives parents suggestions for ways of observing their children at different stages of development and some "early warning signs" that they should be aware of.
- Parents will also receive **information on community services**, how to contact these services and a suggested list of questions that may wish to raise with these services.
- A set of community maps will complement these informational brochures.
- Copies of the **Ages and Stages Questionnaire**, a widely used checklist used to guide observations of children's development will be made available to parents.
- **Posters** that can be posted in community settings, malls, libraries and schools alerting parents to the availability of all of these materials and where to go for further information.

Materials for professionals will include the materials listed above for parents as well as the following:

- Two WEB early identification and early intervention **courses** that can be used both used both in pre-service and in-service professional development programs. The materials will be created in WEB CT format, traditional video distance education and face-to-face formats.
- **Guidelines f**or various agencies for both at-risk children and "typical" children on the barriers to social inclusion for vulnerable

children with specific suggestions as to how their programs can work to eliminate these barriers.

- **Workshops and seminars** for parents and professionals.
- Professionally prepared **"press kits"** that can be used by parents and professionals to help raise awareness of the challenges to social inclusion through the media.

Another "outcome", although not really a physical "product" will be the creation of local **intersectoral tables of parents, professionals and government agencies** that will begin work during the life of this project and which will then continue into the future as a vehicle for ongoing community planning and mobilization. These tables have proven to be valuable tools that facilitate the discussion, reflection and planning process needed to enhance community capacity building. The model for these tables is the very successful network of community intersectoral tables established by HELP around the issue of kindergarten readiness.

Products or outputs for Objective 2: Knowledge creation and dissemination

A number of specific outputs will be created by this project that will be designed to to promote knowledge creation and dissemination of information, strategies and resources to assist at-risk children and their families. It is fair to say that these outputs will be based upon input *from* and will be designed to be effectively implemented *within* the community. The aim is to provide the best possible range of services to all members of the community, targeting those who are most in need: families living in poverty, with children who are at risk or identified with disabilities. In terms of **knowledge creation**, the starting point is the promotion of a universal screening system that will help identify children at risk for develomental disabilities, **developing a data management system** that will facilitate the work of early intervention specialists and researchers. The data management system is to be linked to a **cross-agency information system** (that will ensure privacy and confidentiality) to track the development of young children with identified disabilities/at risk for developmental disabilities from infancy to school age so that professionals in the different community agencies working with the _hil_ and families can a)work as a team and b) ensure continuity –and avoid replication or duplication of services, even if or when the family moves to a different community or province.

In terms of **knowledge dissemination**, several products are listed below that aim to reach professionals community workers, parents and all interested and contributing members of each community: 1) A **website** with a links/information re existing programs and resources; chat rooms where parents and community workers and professionals can post/exchange information and share their experiences (links to translate information in several languages) 2) A **resource book** available to the community compiling existing services/programs available through the different agencies (**available in several languages**) 3)

Electronic and print **materials to assist parents** of vulnerable children to be aware of **early signs of vulnerability** and how to contact appropriate early identification and intervention agencies 4) Electronic and print **materials to educate parents**, professionals and community agencies on ways of identifying and reducing barriers to social inclusion. 5) Electronic and instructional materials to assist in the **professional training of early intervention specialists** in a variety of modalities (e.g., classroom instruction, practicum placements, distance education.) 6) Electronic and instructional materials to inform **child care professionals, preschool and elementary school teachers** about the nature and consequence of early vulnerabilities and their implications for classroom practice. 7) **Translation of materials** (online and electronic translations to other languages prevalent in the community: Chinese, Vietnamese, Punjabi, Spanish, Arabic –available for parents and for community agencies/schools that provide services/instruction in these languages.

Who will be the immediate and long-term beneficiaries of the project?

The beneficiaries of this project are children with disabilities, their families, the professionals with whom they work and public policy officials in health and social services. These benefits will accrue through the accomplishment of both key objectives in the project (**Building Community Capacity** and **Knowledge Creation and Dissemination**). While the project is being conducted in British Columbia, the outcomes, materials and strategies will be useful in other communities in other jurisdictions.

Children with disabilities, living with their parents or while in care:
- Will be screened, diagnosed and identified earlier in their lives.
- Will gain access to early intervention programs.
- Will gain access to programs and facilities from which they had previously been excluded.
- Will benefit from better educational and instructional materials given to parents and professionals.
- Will benefit from guidance given to parents/foster parents regarding accessing appropriate programs for their children and by their parents becoming more effective advocates on their behalves.
- Participate in longitudinal observations to asses their longer-term encounters with social exclusion
- Will have a continuum of child-centred services ensured, for both children living with their biological parents and for children in care

Parents/Guardians of children with disabilities:
- Will learn to identify early signs of problematic development in their children.
- Will be able to access appropriate professional assistance for their children and their families.
- Will be able to advocate more effectively for their children.

- Will be able to facilitate communication among different professionals treating their child.
- Will be able to identify barriers to social exclusion and
- Will develop strategies for overcoming this exclusion.
- Will learn ways of coping with the demands and stresses of living with a child with disabilities.
- Will ensure that services and programs are continued if and when the family moves or the child is place in a different home setting, in the case of children who are in care

Professionals who work with the children and their families:
- Will receive pre-service and in-service training to assist them in:
    - Identifying, diagnosing and referring children to appropriate programs.
    - Communicating with professionals from other disciplines.
    - Identifying the family demands and stresses of living with a child with disabilities.

    - Providing support, guidance and appropriate referrals for families living with a child with disabilities and ensuring a continuity of service referral, and if at all possible, programs across the Province.
    - Alert families to barriers to social inclusion.
    - Provide a range of alternative strategies parents might use to address these barriers.
    - Helping the child make transitions from home-based programs (e.g., IDP) to preschool programs to public kindergarten programs.

Public policy officials in health, education, social, community and recreational services:
- Will learn to identify the barriers to social inclusion in health, education, recreation and other programs and facilities.
- Will be able to plan for and respond to the needs of the most vulnerable families within the context of their unique community characteristic/structure
- Will generate systems and services that are cost-effective and that are evidence-based.