

INTERNATIONAL EARLY CHILDHOOD EDUCATION AND CARE PROFESSIONALS
PRACTICES TO ENGAGE FAMILY MEMBERS OF YOUNG CHILDREN WITH SPECIAL
EDUCATION NEEDS: A COMPARATIVE STUDY OF PROFESSIONAL PRACTICES IN
CHINA AND THE UNITED STATES

BY

JAMI LOUISE SWINDELL

DISSERTATION

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Doctoral Committee:

Associate Professor M. Allison Witt, Chair
Professor Nicholas Burbules
Professor Emerita Susan Fowler
Dean Muhua Wang, Southwest University, Chongqing, China

ABSTRACT

There are growing international efforts to identify best practices, quality indicators, and teacher qualifications and sustainable policy in Early Childhood Education and Care (ECEC). This study explores strategies ECEC professionals in China and the United States implement to engage family members of young children with special education needs. In-depth interviews were conducted with 22 ECEC professionals in China and the United States to explore professional practices and challenges within inclusive ECEC. Constant comparative methods were used to identify patterns and themes across interviews. Professionals had a range of educational backgrounds and experiences working with young children with special education needs and their families. Professionals shared common strategies for encouraging active participation of family members, including on-going communication, family events, parent education programs, parent committees, and family conferences. Professionals also discussed strategies used to individualize services for young children with special education needs. ECEC professionals in the United States and China reported many similarities in practices and common challenges in providing inclusive ECEC.

Keywords: early childhood education and care, early childhood special education, international education, family engagement, special education needs, young children (birth to 8), professional practices

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DEFINITION OF TERMS

ECEC: Early Childhood Education and Care

ECSE: Early Childhood Special Education

SEN: Special Education Needs

UN: United Nations

OECD: Organization for Economic Cooperation and Development

NGO: Non-governmental Organization

EFA: Education For All

OMEP: World Organization for Early Childhood Education

MoE: Ministry of Education

ACEI: Association of Childhood Education International

ACEI GGA: Association of Childhood Education International Global Guidelines
Assessment

IDEA: Individuals with Disabilities Education Act

IEP: Individualized Education Plan

IFSP: Individual Family Service Plan

Chapter One

Introduction

Early childhood is considered a critical developmental period prior to the age children enter compulsory schooling (Huston, 2008; Tag, 2013; Melhuish, 2016). The period of life from birth to entry into primary school can be considered early childhood. Social and cultural influences guide specific age ranges that are included in early childhood education and care (ECEC). In Nigeria, ECEC refers to any preschool education for children from birth to five years old (Salami, 2014). In the United States, ECEC includes child care and educational programs for children birth to seven years of age. In China, early childhood education encompasses the ages from birth to six years old (Kagan, 2018; OECD, 2016). ECEC can take place in formal or informal settings, including family homes, neighborhoods, educational or care centers, or within public school settings.

Table 1

Types of Early Childhood Education and Care Settings

Types of ECEC Settings

For-Profit Private Programs
For-Profit Corporation Programs
For-Profit Corporate-Sponsored Programs
Independent Private Nonprofit Programs
Nonprofit Social Service or Hospital Affiliated
Public Nonprofit Government Sponsored
College and University Affiliated
Military Sponsored Programs
Public School Sponsored Programs
Faith-Based Programs
License-Exempt Center Programs
Licensed Family Child Care Programs
Relative or Kinship Child Care
Non-Relative Care in Child's Home

Note. Adapted from Laughlin (2013) and Fowler, et al. (2008)

Approximately 60% of children under 5 years old attend formal or informal child care in the United States (Corcoran & Steinley, 2019). ECEC programs benefit children, families, employers, and communities by providing safe, enriching environments for children to grow and learn.

Inclusive Education in Early Childhood Education and Care

Inclusive education in ECEC, or early childhood special education (ECSE), supports the participation of children regardless of ability and developmental needs. Florian (2014) describes special needs education as “broad, extending beyond categories of disabilities, to include all children who are in need of additional support” (p. 11). Within this paper, special need education will be referred to as *inclusive ECEC*. Within this paper, inclusive ECEC will focus on children with diagnosed developmental disabilities or that are at risk for developmental disabilities. In cross cultural comparative research, this is an important distinction as nations have a variety of systems for defining inclusive education. In the United States children are eligible for special education services based on thirteen disability categories under the Individuals with Disabilities Education Act (IDEA). Other nations, such as China, may include children from minority groups, refugee children, children living in poverty, or children with a second language as qualifying for special needs education. In order to fully implement an inclusive pedagogy “teachers take account of all kinds of differences in their daily practice” according to Florian (p.15). Building on the definition of special needs education as described by Florian (2013) inclusive ECEC “includes students that are classified as needing something different or additional to others of similar age” (p.11) with the goal of making “educational provisions available to ‘all’ without the stigma of marking ‘some’ children as different” (p.11). Inclusive ECEC can provide opportunities for young children with and without disabilities to learn and

practice new skills as they develop. Inclusive ECSE can also support professionals and families in identifying developmental delays or special education needs early in life, prior to entering the formal school setting (Salami, 2014). Early identification of developmental delays or special education needs allows for families and professionals to provide intentional developmental interventions to support the child's individual developmental needs.

In a study of 164 inclusive and federally funded ECEC (i.e. Head Start) programs in the United States, (Pelatti, et al., 2016) it was found that inclusive programs had higher levels of emotional support. Inclusive ECEC programs were included in this study if at least half of the enrolled students qualified for special education services under IDEA and participated in the same environment as their typically developing peers. Inclusive ECEC programs were found to have higher levels of emotional stability as compared to federally funded ECEC programs. However, federally funded programs had higher ratings of instructional support, such as language modeling and on-going feedback, than inclusive ECEC programs (Pelatti, et al., 2016).

ECEC and ECSE programs may provide overlapping services for young children with or without special education needs. ECEC programs can include children that have identified disabilities but are not receiving special education services. Children with identified disabilities and are receiving special education services can be also participate in ECEC programs. Additionally, some children may be in ECEC programs that have not been diagnosed with a disability, but have special education needs that impact their ability to fully participate in the ECEC program. For example, children with chronic medical conditions may not have a disability, but their medical needs can limit their participation in the ECEC setting.

Children with disabilities may not participate in ECEC programs due to a number of reasons. Children with chronic medical conditions may need to limit their exposure to

communicable disease or have frequent hospitalizations preventing participation in ECEC programs. Children with disabilities may be directly referred to special education services and not attend ECEC programs. Other children with disabilities could be excluded from ECEC programs and ECSE services if families do not receive information and referrals to these services.

Inclusion is built on an understanding of human rights and values equal participation (Czyz, 2016). Czyz (2016) suggests “Social attitudes determine the quality of life of people with disabilities” (p. 304). Social norms, values, and perceptions of disabilities within society influence the inclusion of young children with special education needs (SEN) or disabilities in ECEC programs internationally (Czyz, 2016; Lesko, Ziegler, Mikailova, & Roels, 2010).

Inclusion of young children with disabilities in ECEC programs is a process, inclusive ECEC programs are not strictly the place children with disabilities receive educational services.

Inclusive ECEC programs include a continuum of services from segregated programs (i.e. self-contained, special schools) to full inclusion of children with disabilities in regular classrooms alongside typically developing peers. Globally, nations are at different places on the continuum of inclusive programs in ECEC from non-existent, partial inclusion, to full inclusion of children with disabilities in the general education classroom alongside typically developing peers of the same age (Lundqvist, Mara, & Siljehag, 2015).

Inclusion is defined by Lundqvist, Mara, and Siljehag, (2015) as “participation of children with and without special educational needs and disabilities in the same educational activities, routines, and play and to their provision of support” (p. 3). There are benefits for children with special education needs and typically developing children in the inclusive ECEC setting (Salami, 2014). However, there are also barriers to inclusive programs, such as the

cultural perceptions of disabilities and inclusion; professional experience, education, training; fragmented service delivery systems; and transportation and infrastructure accessibility issues (Czyz, 2016; Pelatti, et al., 2016). Some societies believe there are benefits of segregated education programs, for example in Poland, Czyz (2016) notes “children with special educational needs are best cared for in specialized profiled institutions, they ‘die’ in mainstream schools, even when the schools are implementing a policy of integration” (p. 304). Without a shared definition of inclusion in ECEC programs, there can be misunderstanding on the scope, purpose, and importance of inclusive practices in educational settings (Salami, 2014).

Early Childhood Education and Care on a Global Scale

ECEC has shifted from a traditional family and local issue to an international, global issue as programs and services have expanded to support child development and positive outcomes for young children worldwide. Engdahl (2015) notes that “conditions for childhood vary and change rapidly in our times” (p. 350). The United Nations (UN), the Organization for Economic Cooperation and Development (OECD), and multiple non-governmental organizations (NGOs) advocate and provide resources for ECEC on the global scale. Decisions and policies related to ECEC are increasingly defined by transnational processes which include interactions outside of formal government processes between citizens, NGOs, and other organizations (Hu, Fan, Wu, & Yang, 2017; Tag, 2013).

Global social policy refers to policies related to human interactions and relationships that are not tied to individual nations but transcend borders. Global social policy can be positioned within the local or regional context, recognizing individual perspectives on their reality. Global and national policies are shaped and embedded within each other; global social policy influences national policies and national policies in turn influence global social policy (Tag, 2013).

Universal indicators in ECEC are difficult to quantify and compare between nations as the meaning, importance, and goals of ECEC reflect national priorities and cultural perspectives on childhood and education (Tag, 2013). However, within ECEC and ECSE, knowledge transfer or policy borrowing are often used as nations share successful policies or initiatives to engage policy makers, professionals, and families in inclusive ECEC systems (Otterstad & Braathe, 2016). Experts in global social policy caution against policy borrowing, as each nation will have unique cultural and societal features that impact the way inclusive ECEC programs are organized and operated in order to meet the needs of children, families, and communities.

There are on-going international efforts to define inclusive ECEC and ECSE quality indicators that reflect policy regulations and accountability, professionalism within the workforce, and positive outcomes for children (Otterstad & Braathe, 2016). International processes are defined by Tag (2013) as interactions between nations and government level organizations. Defining competencies, curriculum practices, assessment, and accountability across nations and cultures can be challenging. Standards within ECEC programs cannot be ‘one-size fits all’ or prescribed, this removes families and communities from decision-making and reduces autonomy (Otterstad & Braathe, 2016). Care and education for young children are at the center of international indicators for the well-being of children (Tag, 2013).

International efforts have taken place to establish the importance of the early childhood years, children’s health, safety, and education. Government agencies, NGOs, and other stakeholders have worked together to collaboratively create international guidelines for the care and education of young children (Hu, Fan, Wu, & Yang, 2017). For example, the Salamanca Statement in 1994 supported Education for All (EFA) and inclusive education for children with disabilities (Lundqvist, Mara, & Siljehag, 2015). The UN has established policy documents

outlining children's rights as citizens of the world through the UN Convention on the Rights of the Child (Engdahl, 2015) and promotes ECEC program quality through the UN World Conference on Early Childhood Care and Education and UN World Summits for Children. The UN Convention on the Rights of the Child was adopted in 1989 to establish the rights of children to receive education, protection, and participation. Over 190 nations have signed the Convention on the Rights of the Child, however the United States has not ratified the UN Convention on the Rights of the Child (Bennett, 2001; Hardin & Hung, 2011). The World Organization for Early Childhood Education (OMEP) is an NGO promoting the rights of the child to access high-quality education and care in 70 countries (Engdahl, 2015). The UN Sustainable Development Goals have a specific focus on Early Childhood Education.

Few studies examine ECEC inclusion and quality on a global scale (Fiene, 2013; Hu, Fan, Wu, & Yang, 2017; Salami, 2014). There is not a single definition of quality in ECSE programs or inclusive ECEC programs, measures of quality vary depending on the setting, funding source, and program culture. Child and family characteristics, program characteristics, and community or cultural characteristics influence the interpretation of quality measurements in ECEC programs (Pelatti, et al., 2016).

Early Childhood Education and Care Programs in the United States and China

In China all ECEC programs are administered by the Ministry of Education (MoE). The MoE regulates and monitors ECEC and inclusive ECEC programs. A study examining data of 784 children younger than six years old collected from the 2000 China Health and Nutrition Survey found that only 16 % of children attended center-based child care (Zhai & Gao, 2010). Traditionally, care for children is kept within the family with parents or grandparents as the primary caregivers. In China, the ratio of children to staff in ECEC programs is between 20 and

35 children with two adults in the classroom. In rural areas however, the class size can exceed 60 children due to the lack of qualified professionals (Hu, Fan, Wu, & Yang, 2017). The MoE establishes teacher qualification guidelines for ECEC professionals. Funding and expenditures on ECEC programs vary based on the geographic area, program type (public or private), and other social factors in China (Hu, Fan, Wu, & Yang, 2017).

In the United States, ECEC program quality is impacted by budget pressures and economic downturns. During the recession, funding for ECEC programs decreased (Fiene, 2013; Pelatti, et al., 2016). Funding sources for ECEC programs in the United States do not require minimum health and safety regulations, monitoring, or specific teacher qualifications (Child Care Aware of America, 2013). However, all licensed ECEC programs in the United States are required to meet requirements set forth by the Department of Health and Safety. ECEC programs are being developed at the state and federal level, these programs include Head Start and Universal Pre-Kindergarten programs within public schools. Head Start, a federally funded program for children at risk for developmental disabilities or families in poverty, follows program guidelines that include measures of structural quality and process quality. Head Start staff are required to have additional training in child development and have regular performance reviews based on the Head Start Standards. Universal Pre-Kindergarten programs are typically organized at the state or school district level, Universal Pre-Kindergarten programs follow standards set forth by the state or school district. Some states are establishing early learning guidelines, often focused on cognitive, physical, social-emotional, and language development. Quality Rating Improvement Systems (QRIS) are in place in many states, these systems inform families by providing information on structural and process quality indicators at the program level. QRIS also promotes professionalism in the ECEC workforce and incentives for ECEC

programs to improve services set in evidence-based classroom practices (Buettner & Andrews, 2009; Child Care Aware of America, 2013).

Table 2

ECEC in the United States and China

	United States	China
Number of Children in ages 3 to 5 years in state or federally funded ECEC programs	1,580,000	46,564,204
Percent of Children ages 3 to 5 years enrolled in state or federally funded ECEC programs	20%	36%
Number of Children ages 3 to 5 years old with eligible SEN	462,383	33,575
Number of ECEC professionals	535,622	2,432,138

Note. From Friedman-Krauss et al., 2019; Ministry of Education: China, 2018; National Bureau of Statistics: China, 2018; U.S. Census Bureau, 2018

Perceptions of disability makes it difficult to compare international ECEC systems because the definition of disability differs across cultural groups and eligibility criteria for disability services varies across national policy. Disability is a social and cultural construct, identifying differences in developmental trajectories and the impact of individual development on daily life is influenced by social and cultural expectations. Impairments to intellectual development, differences in physical abilities, and abilities to communicate with others can be perceived as disabilities based on the severity or impact on the individuals independent functioning based on societal expectations. For very young children, developmental delays and disabilities can include cognitive impairments, physical differences, social or emotional difficulties, sensory processing disorders, neurological differences, hearing loss, or medical

conditions that impact development. The wide range of developmental trajectories, cultural perceptions of disabilities, and the impact of disabilities on individual's independence make it difficult to define disabilities across cultures. In the United States and China, there are significant differences in the proportion of the number of young children identified with special education needs, as documented in Table 2. The number of young children receiving SEN services in the United States is higher than the number of children 3 to 5 years old in China that are participating in special education programs, despite there being more children enrolled in ECEC programs in China. This could be due to differences in eligibility criteria or diagnosis of development disability between the two nations. This difference could also reflect cultural perceptions of disability or special education initiatives within national education policy. Education for All Initiatives (EFA) have gathered proponents and grown in scope and reach on the international stage (Tag, 2013). National legislation and regional implementation regulations establish ECEC program requirements within individual nations.

Inclusive ECEC in China

In China, two policies greatly impact the availability, access, and quality of ECEC programs and ECSE programs for young children with and without disabilities. China's One Child Policy impacts the educational landscape, social perceptions of disability, and service provisions for families with children with disabilities. The Compulsory Education Law of 1986 established education for all as a primary goal for the MoE in China.

In 1979, the one child policy was enacted to manage the population growth rate in China. Families were fined for having more than one child or provided financial subsidies if they had only one child (Zhang, 2017). The one child policy included conditions when the family could have a second child such as if the first is a girl, has a disability, or in the case of twins or

multiples. Regional and socioeconomic influences shaped the implementation of the one child policy. Families from rural areas and ethnic minorities could not afford to pay the fine for having more than one child. Families in rural areas also did not have the same access to family planning services as those in urban centers. Parents in urban areas working for government supported industries could lose their jobs for violations of the one child policy. Fertility rates dropped significantly after the implementation of the one child policy, in the 1960s women averaged six children by 2019 the birth rate was 1.69 children per woman (UNESCO, 2019; Zhang, 2017). The one child policy impacted the quality of life, education, and family outcomes in China. From a human capital perspective, the one child policy allowed families to invest more resources into the well-being and success of their child. In one child households the child is more likely to be in good health, have higher educational attainment, and is more likely to attend college than children in multiple child families according to Zhang (2017). Zhai and Gao (2010) found that children without siblings were more likely to attend center-based child care than children with siblings in China. More children with siblings were from an ethnic minority group as compared to only-children in China. In Zhai and Gao's 2010 study, 40% of children had at least one sibling in the family while under 2% of families in China reported having three to five children. In 2016, the universal two child policy replaced the one child policy as a response to the aging and declining population (Zhang, 2017). However, the two child policy is unlikely to dramatically impact fertility rates. Allowing families to have more than one child could impact the number of children in ECEC programs in China and could also lead to increases in the number of children living with disabilities in families.

Inclusive ECEC in the United States

In the United States federal laws under the Individuals with Disabilities Education Act (IDEA) provides children with special education needs and disabilities the right to attend ECEC programs and participate in the least restrictive educational environment. Federal mandates influence structural and process quality in the United States (Pelatti, et al., 2016). In the United States 10% of preschool age children have a diagnosed disability and half of children with disabilities attend inclusive ECEC programs (Pelatti, et al., 2016).

In the United States the oversight and regulatory systems for ECEC programs are operated in a split system. The Department of Health and Human Services is responsible for child care. The Department of Education is responsible for educational programs within public schools and programs receiving federal funding under IDEA. There are no national standards for ECEC or ECSE programs in the United States. Program regulations and requirements are dictated by each state which leads to variations in program quality. However, families are concerned about the quality in ECEC programs. This concern is justified, as reported in 2013, only 16 states met all 20 recommended health and safety practices. States vary widely in quality measures and monitoring practices. California conducts inspections of ECEC programs every 5 years and Vermont does not inspect ECEC programs on an on-going basis (Child Care Aware of America, 2013).

Comparing International ECEC Program Quality

In nations with successful and robust ECEC systems and programs, such as Sweden, the national government has specific initiatives and legislation geared at increasing ECEC accessibility and quality. Nations such as Sweden and Norway have National Curriculum and Standards for ECEC programs that are linked to the primary school curriculum (Otterstad &

Braathe, 2016). This continuum of learning and development through the early years promotes child-centered practices and individual learning goals within the national framework.

Another marker of quality in ECEC and ECSE legislation and policy is the level of financial and sustainable funding support for ECEC systems and programs. In countries with strong social welfare systems, such as Poland and Sweden, ECEC is considered an important investment in society to support parents in the workforce, support the future of the society by providing a quality education for all, and from a human capital perspective (Czyz, 2016).

In Sweden children have a ‘universal right’ to preschool and leisure time centers from one to six years of age, prior to entering primary school. Sweden’s national ECEC policy states it is “each child’s right to education, support and attending a preschool close to home” (Lundqvist, Mara, & Siljehag, 2015, p. 4). Sweden has highly regarded inclusive ECEC systems, however policy makers lack understanding of disability and different needs of children across disability categories. Students in Sweden with intellectual disabilities, deaf, deaf-blind, profound language disorders, visual impairment or additional disabilities often attend a system of specialized schools.

On the other hand, nations that are considered ‘low income’ countries, such as Nigeria, have ECEC and ECSE policies in place, but are not able to fully fund the programs. Salami (2014) argues that while Nigeria does have national policies that support inclusive ECEC programs, the policy is vague and can be interpreted differently by stakeholders. Despite policy language promoting inclusive ECEC programs for young children, the existing educational infrastructure does not support inclusive practices in schools or classrooms. Materials and resources in schools were reported as being outdated or not working by ECEC stakeholders in Nigeria. 90% of ECEC stakeholders in Salami’s 2014 study in Nigeria reported that there is a

lack of qualified staff to support inclusive education in ECEC programs. Stakeholders reported that private schools, which charge family fees, are providing education for children with special needs in their state. However, the majority (76%) reported that private schools do not include inclusive early childhood education programs.

Despite international efforts at EFA in the early childhood years, Sweden, Norway, and Nigeria struggle with lack of research on educational pathways for children with disabilities. Even in model nations, such as Sweden and Poland, there is a need to move beyond legal requirements to authentic inclusion in ECEC programs (Czyz, 2016). In low income countries, policy makers and professionals face challenges to providing basic education for children regardless of disability status. Despite significant progress in creating sustainable ECEC programs, many nations struggle with systematic quality and equity in ECEC and ECSE services due to bureaucratic problems (Czyz, 2016).

Critical Issues in ECEC

Cohesive National Policy and Sustainable Funding

Child Care Aware of America (2013) recommends that funding sources include penalties for states if they do not meet minimum protection for children's health and safety in ECEC programs. Child Care Aware of America also recommends that ECEC programs accepting federal funding use research-based practices to meet quality indicators. Regulations for ECEC programs need to be clear and simple. Child Care Aware of America intends to promote accountability and quality in ECEC programs.

There is a need to identify cost-effective structural and process quality measures in ECEC programs and ECSE services that are sustainable. ECEC policy makers and program directors

need support from experts in the field when considering funding decisions to maximize limited resources (Hu, Fan, Wu, & Yang, 2017).

Professional Qualifications and Training Requirements

Professionals need a wide range of knowledge and skills to meet the individual needs of the children in their care, including students with and without SEN or disabilities (Lundqvist, Mara, & Siljehag, 2015). Hu, Fan, Wu, and Yang (2017) reported that measures of teacher qualification have inconsistent implications for measures of process quality. In the United States Pelatti, et al. (2016) found that the teacher's level of education was significantly related to all measures of process quality (e.g. interactions, emotional support, classroom climate, instructional support, organization, and routines). Therefore, the authors argue that teacher educational level is a predictor of process quality. Studies have found professionals salaries can impact measures of process quality in ECEC programs. Professionalism within the field of ECEC has also demonstrated links to quality in ECEC programs and services (Otterstad & Braathe, 2016).

Pelatti, et al. (2016) found that teachers in inclusive ECEC programs in the United States were more likely to have an advanced degree (at least a bachelor's degree) than federally funded program teachers. However, teachers in federally funded programs participated in more on-going professional development than inclusive program teachers. In a comparative study of quality indicators in the United States and 20 countries using the Child Care Aware Child Care Benchmarks Scoring Protocol, Fiene (2010) found the United States scored the lowest for teacher and director qualifications. The United States had statistically higher ratings on pre-service and in-service training for professionals in ECEC. ECEC and ECSE professionals need

adequate training, knowledge, and skills to provide high quality services for young children with and without disabilities (Hu, Fan, Wu, & Yang, 2017).

Best Practices in ECEC

Establishing best practices in the field of ECEC and ECSE involves a large group of stakeholders, including school administrators, developmental experts, special education professionals, general educators, NGOs, community organizations, government agencies, and parents and community members. Best practices in the classroom should be based on empirical research that demonstrates effective pedagogy and practices to enhance child outcomes and learning. In ECEC and ECSE programs and classrooms best practices include curriculum modification and adaptation (Lundqvist, Mara, & Siljehag, 2015); environmental supports (Lundqvist, Mara, & Siljehag, 2015); team teaching/collaboration (Cate, et al., 2010); individual, one-on-one support (Cate, et al., 2010; Lundqvist, Mara, & Siljehag, 2015); differentiated instruction (Lesko, Ziegler, Mikailova, & Roels, 2010); augmented or alternative communication (Cate, et al., 2010); family-centered practice (Keilty & Trivette, 2017), and child-centered instruction (Cate, et al., 2010). The OMEP explicitly supports child-centered pedagogy based on children's interest, ideas, and daily life (Engdahl, 2015).

Family-Centered Practices. Families play a key role in decision making, service delivery, and therapeutic interventions for young children with special education needs; this is expressed clearly in the federal statutes and state regulations guiding IDEA Part C Services (U.S. Department of Education, 2017). Keilty and Trivette (2017) assert family and child outcomes can be improved when family-centered practices are implemented with fidelity. Researchers have long argued that EI services for children cannot be delivered with fidelity in the absence of family-centered practices (Keilty & Trivette, 2017). Family-centered practices focus on family

strengths, family choice, and collaborative partnerships. Family-centered services are based on respect for the individual circumstances, priorities, and concerns unique to each child and family (Bailey, Raspa, Humphreys, & Sam, 2011; Dunst, Trivette & Hamby, 2007).

Family-centered practices encourage caregivers to be active participants in services with their children (Able, Amsbary, & Zheng, 2017; Bailey, Raspa, Humphreys, & Sam, 2011). Specifically, family-centered practices are designed to build the capacity of families to support the development of their young children in typical routines and natural environments. In summary, family-centered practices are flexible, responsive, capitalize on families' strengths, and engage families as full partners in decision-making and implementation of services for their children. Through the use of family-centered practices, ECEC professionals can facilitate families' sense of competence and confidence.

Ideally, families and EI professionals work collaboratively to determine, guide, and implement services for young children with disabilities. Through collaborative relationships with ECEC professionals, parents can develop skills that will enable them to support their children throughout their lifespan (Burke, Patton, & Lee, 2016; Lee, Palmer, & Turnbull, 2006; Turnbull & Turnbull, 2015; Turnbull, 1988). However, implementing evidence-based practices to achieve parent-professional collaborative relationships that are family-centered remains a challenging endeavor (Bailey, Raspa, Humphreys, & Sam, 2011; Dunst, 2011).

Evidence-based Curriculum and Classroom Practices. It is recommended that ECEC professionals use evidence-based curriculum and classroom practices. Evidence-based curriculum practices are teaching methods, curriculum implementation, and classroom practices that have been established through research to be effective in supporting child outcomes and meeting learning goals. Evidence-based curriculum supports individualized instructional

strategies and differentiation in instruction to meet the needs of individual learners. For children participating in inclusive ECEC programs, educators design curriculum and goals to support typically developing students and students that have special education needs. Inclusive classrooms can support the needs of all learners by individualizing curriculum, creating appropriate and differentiated learning goals, a promoting a classroom culture of acceptance of all learning styles. Inclusive ECEC programs can benefit both typical developing children and children with special education need when using evidence-based curriculum and classroom practices. Evidence-based curriculum and classroom practices include culturally responsive quality indicators from a formal measurement tool or as outlined in national curriculum. When designing inclusive ECEC programs, it is important to include special education experts in creating legislation and policy (Salami, 2014). Special education experts can promote the foundational principles of ECSE which include a participatory, individualized philosophy (Salami, 2014). Curriculum and classroom practices should embrace and include both “indigenous and traditional knowledge” (Engdahl, 2015, p. 351).

In order to examine international ECEC programs and services to establish best practices and quality indicators, current ECEC policy and practice can be compared on a global scale. The impact of current ECEC policy on the outcomes of children and families can be observed in current research, however there are limited studies comparing inclusive ECEC practices on global scale. Critical issues facing international ECEC, including sustainable funding, professional qualifications, and establishing best practices, should be the focus of future research in order to improve service delivery and promote positive outcomes for children and families.

Chapter Outline

In Chapter Two we explore global trends in ECEC and inclusive ECEC through current literature. Tools for examining quality in ECEC programs on an international scale will be discussed, with an emphasis on the application of the Association of Childhood Education International Global Guidelines (ACEI GGA). ECEC programs and services in China and the United States will be introduced. Current literature on international ECEC explores educational reforms, sustainable funding, quality improvements, and professional accountability. This literature review will focus on the history of ECEC and national ECEC policy in the United States and China. The impact of culture and societal expectations on family engagement in ECEC programs and services within the two countries will be discussed. Recommendations for future research will be presented based on the current literature on ECEC programs and services in the United States and China.

In Chapter Three, the methodology for the current study is presented. The purpose of this study is to explore and describe ECEC professional practices used to engage family members of young children with disabilities in ECEC programs and services in the United States and China. The study procedures will be outlined. Participant recruitment and selection criteria will be shared. This study will implement qualitative interviews to collect experiential information from ECEC professionals in the United States and China. Data collection methods will be explained in detail, including the adaptation of the ACEI GGA for the interview protocol and psychometric properties of the ACEI GGA. Data analysis procedures will be described, this study uses constant comparative methodology to examine common trends and challenges facing ECEC professionals in inclusive settings in China and the United States. The significance and ethical considerations for this study will be discussed in Chapter Three.

The purpose of Chapter Four is to share the findings from the qualitative interviews with ECEC professionals in the United States and China. Surprisingly, ECEC professionals in the United States and China shared many common practices to actively engage family members of young children with special education needs in ECEC programs. ECEC professionals in the United States and China discussed strategies to build relationships with families and child-centered instructional practices. ECEC professionals in the United States and China also discussed common challenges and barriers to providing inclusive ECEC programs and services within their respective national educational systems. Discrepant findings and differences in professional practices based on cultural expectations and systematic differences within national education policy will be discussed. Finally, a narrative description of a typical ECEC professional experience will be used to highlight common practices, challenges, and attitudes when working with young children with special education needs and their families.

Chapter Five will review findings as they relate to current research, policy, and practices in international ECEC. Implications for practice, including professional development and global education initiatives will be discussed. Policies for inclusive ECEC programs and services on a global scale will be highlighted. Future research could examine additional quality indicators related to inclusive ECEC programs and services between additional case study countries. Future research could use similar methods to explore other domains of structural or process quality in international ECEC programs. Limitations of this study and suggestions for future research will be presented in Chapter Five.

Chapter Two

Literature Review

Early Childhood Education and Care (ECEC) encompasses complex, multi-layered systems of care for children from birth up to age eight. Internationally, the age range considered “early childhood” depends greatly on the age of compulsory education; for example in China the compulsory age for formal education is 6 years old, while in Hungary the compulsory age for formal education is 8 years old (Józsa, Török, & Stevenson, 2018; Kagan, 2018; OECD, 2016). Therefore, the international ECEC community considers early childhood to be the age from birth to compulsory schooling, roughly 8 years old. ECEC focuses on the care, education, development, and welfare of children before entering more formal, primary educational systems. Internationally, pre-primary education for young children is reflective of national policy, family preferences, and cultural or societal expectations. The purpose of ECEC programs can range from child protection and safety, creating relationships, school readiness, socialization, or developing productive citizens based on the national goals and policies of ECEC (Bennett, 2001; Józsa, Török, & Stevenson, 2018; Kamerman, 2001). ECEC programs can include center-based child care, family child care, preschools, kindergartens, nurseries, and free time centers operated by public or private institutions. Overall, the goal of most ECEC programs is to facilitate and support child development and healthy, positive outcomes for young children.

ECEC professionals include those working in the field to support the development and positive outcomes for young children in ECEC programs and settings. These professionals could include, but are not limited to preschool teachers, kindergarten teachers, child care assistants or aides, child development experts, nannies, self-employed family child care providers, nursery workers, and child minders. Terminology for ECEC professionals is greatly influenced by individual national education policy, professionalism of ECEC, and the setting of ECEC

programs. For example, in France pediatric nurses provide primary care for young children; in the United States preschool teachers primarily work in community-based programs while kindergarten teachers primarily work in public school settings. The pay, salary, benefits packages, promotion opportunities, job satisfaction and staff requirements vary based on national policy, economics, and values placed on ECEC (Moss, 2001).

International ECEC stakeholders represent a wide variety of public agencies and private organizations. ECEC stakeholders represent public schools, private preschool programs, for-profit, non-profit child care centers, community agencies, state and local policy makers, and advocates for ECEC programming and quality. ECEC stakeholders also include community members, regional education agencies, and national educational policy makers (Bergen & Hardin, 2015). ECEC stakeholders in the United States include the local school district, health and safety agencies, disability advocacy organizations, professional organizations; community and regional economic development organizations, state level policy makers, and federal government agencies, such as the Department of Education and the Department of Health and Human Services.

ECEC professionals and ECEC stakeholders work together to create ECEC programs that meet culturally relevant and individualized needs of children and families in the communities. ECEC programs are monitored by ECEC stakeholders on measures of health, safety, access, affordability, and quality. ECEC quality measures are complex, including the frequency, intensity, and sufficient supports to meet the child and family's needs in an affordable, accessible, and culturally responsive program that fosters individualized development through authentic relationships with ECEC professionals (Bergen & Hardin, 2015; Raikes, Devercelli, & Kutaka, 2015).

Research continues to show the impact of quality ECEC on child development, including social and cognitive development, academic achievement, and future school success (Bergen & Hardin, 2013; OECD, 2018; Raikes, Devercelli, & Kutaka, 2015) However, Kamerman (2001) reported that “no country has a sufficient supply” of infant care (p. 263). Although research and ECEC stakeholders advocate for additional funding for quality, accessibility, affordability, and sustainability, ECEC programs and services continue to encounter challenges in providing adequate care and education for young children across the globe.

Global ECEC Trends

Internationally, there has been increased attention to policy, funding, quality, and equitable access to ECEC programs and services for young children (Bergen & Hardin, 2013; Gong & Wang, 2017; Kamerman, 2001). The United Kingdom, India, Portugal, Canada, Chile, and Egypt have made significant improvements to ECEC funding, personnel, and family-centered practices (Fower, Ostrosky, & Yates, 2014). Globally, ECEC programs have experienced increased child enrollment as women enter the workforce globally (Józsa, Török, & Stevenson, 2018; Kamerman, 2001). Global guidelines for quality ECEC programs aim to support young children’s development and create active world citizens (Bergen & Hardin, 2013). In addition to the UN Convention on the Rights of the Child, international efforts to promote ECEC and healthy childhood development include: the Dakar Framework for Action; Education for All initiatives; the UN Millennium Goals; and the UN 2030 Sustainable Development Goals. These international initiatives provide guidance on international best practices and policy frameworks. However, as access to ECEC services for young children increases, access does not always translate to participation in high quality programs (Bergen & Hardin, 2013; Józsa, Török, & Stevenson, 2018; Raikes, Devercelli, & Kutaka, 2015).

Literature Search

In order to establish an understanding of global ECEC professional practices and international influences on adopting research-based best practices a review of the current literature on international ECEC was completed. The search was conducted using Ebsco and Proquest Databases and included databases focused on educational research, such as Academic Search Complete; Academic Search Ultimate; Education Full Text; ERIC; EBSCO Professional Development Collection; SocINDEX with Full Text; Family & Society Studies Worldwide; Sage Journal, PsycINFO; and PsycARTICLES. Search terms included: Association for Childhood Education International, Global Guidelines Assessment, Early Childhood Education and Care, kindergarten, preschool; mainstreaming, inclusion, inclusive education; international, global; China, United States, quality, quality indicators; history, policy, policies, laws, legislation and comparative study. Articles were included in this review based on the following inclusion criteria: (a) published within the past 15 years; (b) published in a Peer-Reviewed Journal; (3) available in English; and (c) ECEC specific. Additional articles were identified through snowball search methods of the references in relevant articles and forward search methods on Google Scholar. Articles were first screened by title, then by abstract, and finally by quality indicators for scholarly research in education.

The review of relevant literature included 22 studies focused on international ECEC professional practices. The studies included child, professional, program, and national data as well as historical and policy analyses. Methodology within the 22 studies included quantitative analysis (Zhai & Goa, 2010), comparative analysis (Fiene, 2013), historical and policy analyses (Fiene, 2002; Gong & Wang, 2017; Otterstad & Braathe, 2016), interviews with children and ECEC professionals (Czyz, 2016; Gong & Wang, 2017; Lundqvist, Mara, & Siljehag, 2015),

surveys of ECEC professionals (Bruder, Dunst, & Mogro-Wilson, 2011; Bruder, Dunst, Wilson, & Stayton, 2013; Czyz, 2016; Lundqvist, Mara, & Siljehag, 2015), classroom observations (Lundqvist, Mara, & Siljehag, 2015), focus groups with ECEC professionals (Nelson, Lindeman, & Stroup-Rentier, 2011; Otterstad & Braathe, 2016), and case studies (Gong & Wang, 2017; Stegelin, Cecconi, & Pintus, 2015). Additionally, meta-analysis of research on ECEC programs and practices were included (Dunst, Trivette, & Hamby, 2007; Tag, 2013; Trivette, Dunst, Hamby, & Meter, 2012).

Two studies used the CLASS to evaluate program quality in China (Hu, Fan, Wu, & Yang, 2017) and the United States (Pelatti, et al., 2016). Li et al., (2014) employed the ECERS-R in China. Five studies implemented the ACEI GGA to evaluate ECEC programs on an international scale (Hardin, Bergen, Busio, & Boone, 2017; Hardin, Bergen, & Hung 2012; Hardin & Hung, 2011; Trube, Li & Chi, 2013).

Limitations Within the Current Research Base

In Zhai and Gao's 2010 review of the China Health and Nutrition Study to examine factors related to child care attendance based on sibling status, data was incomplete for children within the sample. Incomplete and missing data can be a limitation when reviewing large scale surveys and international data on children and child care. Fiene (2013) discusses the limitations of transnational ECEC empirical research due to national regulations for ECEC programs and services not readily available in English, limiting the analysis of international policies. In fact, Fiene (2013) found no statistically significant differences between program quality in the United States and 20 countries, including Norway, Sweden, France, Mexico, Turkey, and Nigeria. Most studies under review used non-experimental designs and most often used observation, interview, or survey data to collect perspectives on inclusive ECEC and ECSE systems and policies.

Generalizations and predictions based on this type of qualitative data, which is culture-bound within its scope, can be limited.

Intent of the Review of Literature

The intent of the review of current literature is to travel through international ECEC policies and programs aimed at supporting equity and access within services for young children with SEN or disabilities. A global analysis of inclusive ECEC policy and practices as they relate to services for children with SEN will be conducted by reviewing current research and policy documents. This study takes a bioecological theory approach to examining systems that interact across the child, family, and society that impact the well-being and education of the child (Sandell, Hardin, & Wortham, 2010; Bergen & Hardin, 2013) while the sociology of childhood will frame the discussion related to childhood across cultures and the variations in expectations for childhood and education across societies (James & Prout, 1997). Bioecological theory emphasizes the transactional relationships between people, their environment, and cultural influences (Bergen & Hardin, 2013). Using bioecological theory in conjunction with the sociology of childhood as a framework, this paper aims to gather a holistic picture of the types of interactions that support inclusive practices in ECEC settings across cultures. Bioecological theory places importance on the interactions within the child's environment, both direct and indirect. According to Bronfenbrenner (1978) the social environment and interactions with others within this environment shape the child's experiences and understanding of the world around them. Bronfenbrenner (1978) states "What place or priority children, and those responsible for their care.. is of especial importance in determining how a child and his caretakers are treated and interact with each other in different types of settings" (p.7). This dynamic relationship and reciprocity in interactions between children and caregivers are especially important in the

ECECE setting. James and Prout (1997) build on the social lives of young children through framing the sociology of childhood as a “commitment to children’s social relationships and cultures” (p. xi). and place emphasis on children as ‘social actors” (p. xi). An analysis of inclusive ECEC programs and quality indicators with a focus on the United States and China will be the foundation of this review. Structural quality and process quality of inclusive ECEC programs will be used to discuss national policy, workforce development, and evidence-based practices in ECEC programs in the United States and China. Recommendation for future research in ECEC and ECSE programs will also be discussed.

International efforts to identify successful practices in quality inclusive ECEC programs and systems can be challenging. While international organizations and policy makers around the globe have initiated conversations and discourse on inclusive ECEC, there are no international frameworks that are agreed upon for measuring program quality and practices in inclusive ECEC settings. Many world leaders in education, educational professionals, and families agree with Kagan’s (2018) statement, “All children are entitled to ECEC services, regardless of their country of origin, family income, home language, or ability” (p. 13). However, inclusive ECEC programs and services are not equally accessible for children across the globe. Two overall measures of quality, structural quality and process quality, can be used to frame discussions about inclusive ECEC program quality on an international scale (Hu, Fan, Wu, & Yang, 2017).

Specifically, this review will focus on structural quality measures related to policy, infrastructure, and workforce development in inclusive ECEC programs and services in China and the United States. Structural quality measures include factors such as the physical environment, financial supports, teacher qualifications and training, curriculum, class size or adult:child ratios, and regulations meeting minimum health and safety protections .Process

quality goes beyond the basic environmental and administrative standards to place emphasis on the experiences of children within ECEC programs, including teacher-child interactions, daily schedules and organization of daily activities, engagement in developmentally appropriate and interesting activities that promote collaborative and active learning in the ECEC classroom (Mashburn, et al., 2008). Process quality in ECEC programs and services in China and the United States will be explored, with a focus on quality measures related to interactions between adults and children, inclusive classroom practices, engagement in learning, and daily routines in the ECEC setting (Otterstad & Braathe, 2016). Three primary measures of structural and process quality that impact the success of inclusive ECEC programs and services were identified in the literature: (a) cohesive national policy and sustainable funding; (b) teacher qualifications and training requirements; and (c) evidence-based curriculum and classroom practices. This review will introduce inclusive ECEC programs, describe inclusive ECEC and ECSE services, examine measures of inclusive ECEC quality, and discussion of best practices in inclusive ECEC services on a global scale. Critical issues and future research on inclusive ECEC programs and services will be presented.

ECEC Best Practices

ECEC programs rely on family involvement to guide discussions and decisions about quality measures and preferred outcomes of ECEC systems. Shared goals and visions for ECEC policies and programs will support social justice efforts of inclusion, access, and equity in sustainable programs for young children and families. According to the 40th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act (2018) the number of children from age 3 to 5 years old receiving services under IDEA has demonstrated continuous growth since 2013. International professional organizations and advocates for ECEC

have created guidelines and recommendations for ECEC programs and services for young children with special education needs. On the international scale, the Council for Exceptional Children Division of Early Childhood has developed Recommended Practices: which include family-centered practices, professional standards, and systematic instruction (DEC, 2014). In the United States, The National Association for the Education of Young Children has also put forth guidelines for high quality ECEC professionals and quality program indicators (Bailey, 2014; DEC, 2014; Gong & Wang, 2017; NAEYC, 2010). The NAEYC Standards have also been applied in ECEC programs in other nations. The Pacific Early Childhood Education Research Association (PERCERA) promotes research, dissemination, collaboration, and professional development within countries such as Mainland China, Hong Kong, Indonesia, Japan, Korea, New Zealand, Philippines, Singapore, Taiwan, Thailand and Malaysia (PERCEA, 2020). Measures of quality in ECEC programs are often culture-bound and difficult to define but typically encompass group size, educator qualifications, parent involvement, and accountable program administration (Józsa, Török, & Stevenson, 2018).

Tools for Monitoring Quality in ECEC Programs

Tools for monitoring structural and process quality in ECEC and ECSE services have been developed and validated for international implementation. A review of tools used by nations, regions, and local agencies will be discussed. The tools for monitoring quality vary in the structure, type of data collection, content areas, and indicators. However, there are many common factors among quality monitoring tools, such as teacher qualifications, staff to child ratios, interaction between adults and children, and classroom organization.

In the United States and China measures of program quality include the Early Childhood Environmental Rating Scale (ECERS) and the Classroom Observation Scale (CLASS). The

ECERS looks at structural quality indicators, while the CLASS examines process quality including interactions between adults and children. The Early Childhood Environmental Rating Scale; Infant/Toddler Environmental Rating Scale; and Family Child Care Environmental Rating Scale include indicators of process quality such as personal care routines, interactions, program structure, and parent-staff partnerships (Cate, et al., 2010; Fiene, 2013; Huston, 2008). Emotional support, classroom organization, and instructional support are the three content areas of the CLASS observation tool that focus on engagement and support in the ECEC classroom. The ECERS and CLASS have been administered in Chinese ECEC programs to assess program quality for research and policy purposes (Hu, Fan, Wu, & Yang, 2016; Li et al., 2014). The ECERS and the CLASS have been found to be internationally valid tools for examining ECEC program quality (Pelatti, et al., 2016; Hu, Fan, Wu, & Yang, 2017).

The National Association of Child Care Resources and Referral Agencies, also known as Child Care Aware of America, has set forth Benchmarks of Quality (2013). The Benchmarks of Quality includes 15 indicators of program oversight and regulations for ECEC programs. The indicators of quality include teacher training and background checks; ongoing health and safety monitoring; and ratio or group size recommendations (Child Care Aware of America, 2013; Fiene, 2002). According to Fiene (2013), the Benchmarks of Quality focus primarily on the “structural side of quality rather than the process side of quality” (p.65). The Benchmarks of Quality measures are used to monitor programs and for programmatic decision making within the United States and on an international scale.

The National Institute for Early Education Research’s (NIEER) Quality Standards Benchmarks for ECEC programs include ten standards: (a) comprehensive, aligned, and culturally responsive early learning standards; (b) curriculum implementation support; (c)

Bachelor's degrees for head teachers; (d) specialized training education and child development for head teachers; (e) Child Development Associates Degrees for assistant teachers; (f) ongoing professional development and coaching for all teachers; (g) maximum class size of 20 children; (h) adult to child ratios of 1:10 in classrooms; (i) screening and referral processes; and (j) continuous quality improvements (NIEER, n.d.). The NIEER Quality Standards Benchmarks are more focused on structural quality than process quality. NIEER receives both federal and private funding to measure quality of ECEC programs at the state level.

The National Association for the Education of Young Children (NAEYC) also has voluntary Accreditation Standards for ECEC programs (Buettner & Andrews, 2009; Huston, 2008). The NAEYC Accreditation Standards focus on structural and process quality centered on developmentally appropriate practices (Huston, 2008). NAEYC Accreditations standards are primarily used as internal monitoring tools for programs and for consumer-awareness initiatives, such as quality rating and improvement scales (QRIS) within states.

The Council for Exceptional Children Division of Early Childhood has set forth internationally recognized Recommended Practices in ECSE and Early Intervention. The DEC Recommended Practices are intended to be used to guide practitioners, policy makers, and parents when identifying appropriate and evidence-based practices in ECSE services. The Recommended Practices encompass ten areas of professional practices that impact child outcomes and well-being. Areas include specific recommendations for leadership, teaming, families, interaction, environments, and families. The DEC Recommended Practices are used for self-evaluation or program monitoring within ECSE programs and services internationally (DEC, 2014). The DEC Recommended Practices are also used for staff development, program improvement, and professional guidelines within inclusive ECEC programs.

On the international scale, the Association for Early Childhood International (ACEI) has established the Global Guidelines Assessment. The ACEI Global Guidelines Assessment (GGA) includes five critical areas of ECEC programs and services (a) Environment and Physical Space; (b) Curriculum Content and Pedagogy; (c) Early Childhood Educators and Caregivers; (d) Partnerships with Families and Communities; and (e) Young Children with Special Needs. Across the five content areas there are 76 indicators of quality in the GGA. The GGA primarily focuses on process quality in ECEC programs. The GGA has been used to monitor program quality internationally and to identify areas of program strength or improvement needed to meet international quality standards.

Table 3

Indicators on Program Quality Measures

NIEER Quality Standards (N = 10)	NACCRRA Benchmarks of Quality (N = 15)	DEC Recommended Practices (N = 8)	ACEI Global Guidelines (N =5)
Comprehensive, Aligned, and Culturally Responsive Early Learning Standards	Background Check	Leadership	Environment and Physical Space
Curriculum Implementation Support	Minimum Education for Directors	Assessment	Curriculum Content and Pedagogy
Bachelor’s Degrees For Head Teachers	Minimum Education for Lead Teachers	Environment	Early Childhood Educators and Caregivers
Specialized Training Education And Child Development For Head Teachers	Minimum Initial Training	Family	Partnerships with Families and Communities

Table 3. Program Quality Measures (cont.)

NIEER Quality Standards (N = 10)	NACCRRA Benchmarks of Quality (N = 15)	DEC Recommended Practices (N = 8)	ACEI Global Guidelines (N =5)
Child Development Associates Degrees For Assistant Teachers	Minimum Annual Training	Instruction	Young Children with Special Needs
Ongoing Professional Development and Coaching	Learning Activities	Interaction	
Maximum Class Size	Basic Health Standards	Teaming and Collaboration	
Adult To Child Ratios	Basic Safety Standards	Transition	
Screening and Referral Processes	Parent Communication		
Continuous Quality Improvements	Staff:Child Ratios		
	Group Size		
	Frequency of Inspections		
	Posting Inspection Reports		
	Oversight Caseloads		
	Licensing Staff Qualifications		

Note. Adapted from ACEI, 2011; Child Care Aware, 2013; DEC, 2014; NIEER, n.d.

For the purpose of this review of the literature on international best practices and quality indicators in ECEC, the Association for Childhood Education International (ACEI) Global Guidelines will provide the framework for discussion on the ways nations are adopting and adapting best practices in ECEC (Stegelin, Cecconi, & Pintus, 2015). The ACEI GGA can be

valuable tool in cross-cultural comparative research in ECEC programs. The ACEI GGA has been used in research and has been found to be reliable and valid tool to evaluate ECEC programs on an international scale. The ACEI GGA has been translated into 14 languages and is available at no cost, making the tool accessible to many ECEC professionals and programs around the world. The ACEI GGA can examine professional practices, identify areas of strengths and areas of potential growth, and to guide future program or policy decisions regarding ECEC programs internationally. The ACEI GGA can be used to examine the philosophies and practices related to the inclusion of young children with disabilities in ECEC programs on an international scale and provides common language and standards for comparative purposes across inclusive and non-inclusive ECEC programs.

ACEI Global Guidelines

The ACEI Global Guidelines were developed in collaboration between the World Organization for Early Childhood (OMEP) and the Association for Childhood Education International (ACEI) as a tool to identify international best practices in ECEC programs and to promote high-quality ECEC programs on a global scale (ACEI, 2011; Sandell, Hardin, & Wortham, 2010; Stegelin, Cecconi, & Pintus, 2015). The ACEI Global Guidelines were developed through collaborative efforts of over 80 professionals across 27 countries. ECEC stakeholders relied on current research, quality measurement tools (e.g. ECERS), and culturally-responsive models to develop the ACEI GGA (Sandell, Hardin, & Wortham, 2010). The GGA has been developed and updated over three editions (2003; 2006; 2011) and there is currently a Fourth Edition under development (ACEI, n.d.).

The ACEI Global Guidelines Assessment (ACEI GGA) is an observation-based measure for ECEC professionals, programs, and policy makers to document quality, goals, and areas of

need in local or national ECEC services. Five domains of program quality make up the ACEI GGA: (a) Environment and Physical Space of Settings for Children; (b) Curriculum Content and Pedagogy; (c) Early Childhood Educators and Caregivers; (d) Partnerships with Families and Communities; and (e) Services for Young Children with Special Needs (ACEI, 2011; Bergen & Hardin, 2015; Bergen & Hardin, 2013; Stegelin, Cecconi, & Pintus, 2015; Trube, 2015). The ACEI GGA was developed as a tool for self-assessment of ECEC programs based on the domains of program quality. The GGA and resources are accessible online at no cost (<https://acei.org/what-we-do/global-guidelines-assessment/>). The ACEI GGA is available in 14 languages, including Chinese, English, French, Spanish, and Swahili. The goal of the ACEI Global Guidelines and Global Guidelines Assessment is to enhance the quality of ECEC programs through on-going assessment for program improvement or as a tool to assess program quality. The ACEI GGA is an evidence-based measure to support data-based decision making in ECEC programs. The ACEI GGA provides 76 indicators of quality in ECEC programs. Indicators such as “the environment stimulates children to play, explore, and discover.” (Environment and Physical Space, Indicator 1.8) and “educators/caregivers use local materials as resources for teaching and learning.” (Curriculum Content and Pedagogy, Indicator 2.26) are rated on a 5-point scale (inadequate, minimum, adequate, good, or excellent) (ACEI, 2011; Hardin, Bergen, Busio, & Boone, 2017). The tool also includes documentation of evidence of indicators, for professionals to note examples of practices based on program standards and cultural relevance (ACEI, 2011).

Application of ACEI Global Guidelines

The application of the ACEI Global Guidelines must be culturally relevant to individual ECEC professionals, regional policy makers, and international organizations. Most importantly, quality guidelines and recommended best practices must be relevant and responsive to the needs of children, families, and communities. “Government policies, local resources, cultural norms and values, and language are among the diverse influences on the definition of quality ECCE” (Trube, 2015, p. 2). In a study of nine countries using the GGA items in Area 2: Curriculum Content and Pedagogy and Area 3: Early Childhood Educators and Caregivers rated high across nations; while other indicators, such as Area 1: Environment and Physical Space related to provision of outdoor play and Area 5: Support for Children with Special Needs, were more variable between nations and often rated low or marked as not applicable (Hardin, Bergen, Busio, & Boone, 2017). The GGA is designed to “represent both the common culture of ECEC services across geographical locations as well as individual differences in services” (Hardin, Bergen, Busio, & Boone, 2017, p. 298). Five areas are identified as critical to high-quality ECEC programs: (a) environment, setting, and resources; (b) developmentally appropriate and culturally responsive curriculum; (c) formally trained ECEC professionals; (d) parent and community engagement; and (e) supports for children with individual differences, including ethnicity, religion, or disability. Internal validity measures across subscales and across countries have determined the GGA is highly consistent across constructs ($\alpha = 0.94$ to 0.98) (Bergen & Hardin, 2015; Bergen & Hardin, 2013).

Summary of GGA Implementation in ECEC Programs

The application of best practices, specifically the ACEI Global Guidelines, by ECEC professionals are influenced by national ECEC policy, the culture of schooling, and the culture of

families in the nation. Cultural beliefs and practices influence national policy and ECEC efforts (Hardin & Hung, 2011). Funding, accountability, and equitable access originate from national ECEC policy and systems-level operations. The role of parents and the culture of childhood within society influence the implementation of ECEC programs and services on the ground (Bennett, 2001). Issues around access and quality of programming for young children with disabilities have been identified in the international research on ECEC policy and practices (Hardin & Hung, 2011). The GGA can be used by practitioners and stakeholders to “evaluate and improve” (p. 297) ECEC programs and services for all children, including those with disabilities (Hardin, Bergen, Busio, & Boone, 2017).

Limitations of the GGA

Hardin, Bergen, Busio, and Boone (2017) reported cultural variations in the evidence provided for each indicator in test of the psychometric properties of the GGA across nine countries. To assess the psychometric properties of GGA in nine countries. (i.e. China, Guatemala, India, Italy, Mexico, Peru, Taiwan, Thailand, United States) Hardin, Bergen, Busio, and Boone (2017) collected data from 678 ECEC professionals from 346 ECEC programs. The ECEC programs were located in urban areas (69.3%) and rural areas (23.3%). Of the 346 ECEC programs, 61.3% of programs enrolled children with disabilities while 38.7% reported they do not enroll students with disabilities or left items in Area 5 blank. The authors reported examples were not as comprehensive or missing from rural areas.

Reviewing specific indicators within the GGA, Hardin, Bergen, Busio, and Boone (2017) note the need for additional research on advocacy opportunities within public policy and service delivery for ECEC providers in nations with low GGA ratings in these areas, such as China and Guatemala.

Theoretical Framework

Bergen and Hardin (2015) emphasize the GGA is a relational and ecological assessment tool that can be used by ECEC professionals and stakeholders for culturally relevant evaluation of ECEC program quality based on internationally identified best practices. Based on sociocultural theory, supported by the foundational work of theorists such as Vygotsky and Bronfenbrenner (Sandell, Hardin, & Wortham, 2010; Bergen & Hardin, 2013) the GGA can serve as a tool for examining ECEC programs with a culturally responsive lens.

Additional foundations of ECEC programs and practices are based on a constructivist approach in which children and families create their own understanding through interactions with the world around them. ECEC programs in China and the United States take a constructivist approach to developing national curriculum, teacher-training programs, and services for young children with special needs (Bailey, 2014; Trube, Li, & Chi, 2013).

Building relationships and promoting participation through ECEC programs can be placed within the theory of family-centered helpgiving (Dunst, Trivette, & Hamby, 2007). Family-Centered Helpgiving theory provides foundational support for ECEC programs that focuses attention on measures of program participation, family functioning, child development, parenting practices, and professional collaboration when examining the quality of ECEC programs and services. Family-centered practices, professional collaboration, and family engagement in ECEC programs greatly impacts child outcomes according to family-centered helpgiving theory (Dunst, Trivette, & Hamby, 2007). Family-centered practices in ECEC programs and curriculum include developmentally appropriate practices, integrating socio-cultural influences, and child-centered pedagogy (Bennett, 2001).

Case Study Countries

Case study countries were selected based on the availability of research and historical reviews of ECEC programs and services. China and the United States were selected based on their GDP, ECEC Policy, and the availability of the native language of the ACEI Global Guidelines (i.e. Chinese and English). China and the United States share common foundational pedagogical approaches grounded in Froebel and European early childhood theory in ECEC programs. China and the United States have diverse economic regions, including rural agricultural areas and high-density urban areas. Both countries have experienced internal migration and increasing diversity of their populations. Traditional educational systems in China and the United States are currently experiencing social shifts in the influence of family and professional roles in education. There is a high need for quality programs based on the increasing number of children in care and on-going movements for quality improvements, inclusive practices, accessibility, and equality in ECEC programs in the United States and China.

ECEC Programs and Service in China

National ECEC Policy: Funding, Accountability, Access

National education policy impacts how ECEC programs and professionals adopt and implement best practices within the GGA. The Ministry of Education (MoE) establishes ECEC policy and monitors ECEC program quality. According to Trube, Li, and Chi (2013) nearly one third of children from birth to age six participate in formal or informal ECEC programs. ECEC services and programs are typically run by the Chinese government or private organizations. The economic conditions of the region can influence the type of services available (Hardin, Bergen, Busio, & Boone, 2017; Li, et al., 2014; Trube, Li, & Chi, 2013). For example, in Shanghai, the wealthiest city in China, most programs are government funded. However, in Kunming, a less

affluent city, programs are primarily privately operated because there are fewer opportunities for government funding (Hardin, Bergen, Busio, & Boone, 2017). The MoE regulates the number of children and teachers in the classroom to include two head teachers and one teaching aide for every 20-35 children in the classroom. However, these ratios are often not within regulatory requirements, as rural schools do not have enough qualified teachers in ECEC and urban areas have too many students based on the demand by parents for ECEC programming (Qi & Melhuish, 2017). To assess program quality issues related to workforce development in China, the ACEI GGA could be used with a focus on Area 1: Environment and Physical Space and Area 3: Early Childhood Education and Caregivers. Area 1 focuses on minimal healthy and safety measures for quality ECEC programs, while Area 3 focuses on relationship-based indicators through interactions between ECEC professionals and children.

Early childhood education in China was established in the early 1900's largely based on foundations of John Dewey. ECEC centers were created in Hubei Province in 1903-1904 by the Qing dynasty. ECEC for children from birth to age six is called preschool (Li, Yang, Chen, 2016; Qi & Melhuish, 2017; Trube, Li, & Chi, 2013). Pre-primary education for children age 3 years to 5 years old in China is called kindergarten. In the 1920's kindergarten programs were created in Shanghai and Nanjing. ECEC curriculum models were inspired by Western educational theorists, such as Montessori and Froebel. Active learning, social development, citizenship education, and a focus on individual learning styles promoted within Montessori pedagogy matched Chinese philosophies related to early learning (Trube, Li, & Chi, 2013). Froebel's approach to education with foundation on building skills through practical work and hands-on materials also supported Chinese expectations for child development for young children in group settings. Chinese scholars developed curriculum models such as Wholeness or

Units Pedagogy and Action Curriculum. Through the 1940's to the 1980's early childhood policy supported civic education, physical health, and group learning. (Qi & Melhuish, 2017; Trube, Li, & Chi, 2013). In 1978 the "Open Door Policy" allowed global partnerships and the influence of diverse, international educational practices (Li, Yang, & Chen, 2016).

The Compulsory Education Law of 1986 was created to provide educational access for all children in China, including those with disabilities and in rural areas. At this time special schools were established for students with specific disabilities, such as sensory impairments (deaf/blind) or intellectual disabilities (Trube, Li, & Chi, 2013). In the 1990's staffing requirements and qualifications for early childhood professionals supported professionalization of the field and ECEC as the foundation for future learning and development. Policy developments throughout the 1990's continued to support educational access for children with disabilities and moved towards including special education in traditional schools. (Hardin, Bergen, Busio, & Boone, 2017; Trube, Li, & Chi, 2013). From the mid-1990's to 2009 in China there was a trend towards privatization of public kindergartens, decreasing funding, and shifting quality monitoring to NGOs. Reforms within the MoE impacted oversight, planning, and policy within ECEC services (Qi & Melhuish, 2017). In a critical policy analysis of ECEC in China, Li, Yang, & Chen (2016) argue that educational reform in ECEC during this period negatively impacted the "quantity and quality of ECEC programs in China" (p. 5). The move from public to private kindergarten programs impacted the training and quality of the ECEC workforce and greatly reduced the funding available to ECEC programs for quality improvements (Li, Yang, & Chen, 2016; Qi & Melhuish, 2017). Since 2010 there has been an increase in attention to ECEC programs and policies with the enactment of the Outline of China's National Plan for Medium and Long-term Education Reform and Development. The reform movement led to public

discourse on ECEC programs and services for young children (Li, Yang, & Chen, 2016; Qi & Melhuish, 2017). Government responsibilities within ECEC systems were outlined to include funding, planning, and monitoring programs and services in collaboration with NGOs. Major goals for ECEC in the National Plan included funding guidelines, teacher salary and benefits, parent responsibilities, universal enrollment, and additional support for programs and services for children in rural areas. Government educational agencies invested 50 billion RMB (approximately USD\$8.3 billion) from 2011-2015 into ECEC programs with a focus on rural and western areas of China (Qi & Melhuish, 2017; Li, Yang, & Chen, 2016). Programs for young children, including early intervention for young children with disabilities and services for children in rural areas, continue to expand throughout the twenty-first century (Li, Yang, & Chen, 2016; Trube, Li, & Chi, 2013).

The Culture of Schooling: Monitoring Quality

The culture of school and schooling within society influences how ECEC professionals' approach and adapt best practices as outlined in the GGA. Social and cultural expectations for schooling and the education of young children can be viewed through quality monitoring systems, national curriculum, and professionalism of the workforce. There is not a national quality monitoring system for ECEC in China. Regional and local quality monitoring typically focuses on environmental or structural components of the program. (Qi & Melhuish, 2017). The Ministry of Education and the Public Health Ministry promote policies that encourage inclusion of children with special education needs (Trube, Li, & Chi, 2013). Pre-primary education professionals in China must have a certification which is achieved by attending college or completing an interview and written exam. ECEC professionals must also take a Mandarin language exam (Hardin, Bergen, Busio, & Boone, 2017). All ECEC professionals in China must

hold a certificate from the Ministry of Education (Gong & Wang, 2017). University training programs in ECEC and special education in China cannot meet the demand, as only six universities offer undergraduate degrees in special education with under 500 graduates per year. Over 260 colleges and universities in China offer ECEC degree programs, some through specialized preschool degree programs known as *xueqian* (Gong & Wang, 2017; Trube, Li, & Chi, 2013). Current law requires pre-service teachers to take coursework in special education. However, special schools for children with SEN often offer lower wages while the work is more complex than teaching in traditional schools (Trube, Li, & Chi, 2013).

National curriculum for ECEC in China has shifted from teacher-directed pedagogy to child-centered practices since the enactment of curriculum reform in 2010, which can be challenging for ECEC professionals to implement. Qi and Melhuish (2017) identified a gap between national curriculum guidelines and daily classroom practices in ECEC programs in China. Pre-service teacher education and in-service training programs for teachers in the field experience challenges to meet the growing need of qualified professionals in ECEC in China. To account for the growing demand for trained professionals in ECEC programs in rural areas of China the Ministry of Education has developed programs to provide additional, intensive training and support for local teachers and volunteers (Gong & Wang, 2017; Qi & Melhuish, 2017). Gong and Wang (2017) reported that rural areas in China partner with NGOs to train additional staff for ECEC programs through training programs such as China Development Research Foundation and Human People to People China. In China *daike*, or substitute teachers, help support the limited availability of professionally trained workforce in rural areas (Gong & Wang, 2017). Another challenge faced by ECEC programs in rural areas is access to funding and resources; it is reported by the Ministry of Education that rural programs have an average of 93

books per classroom, while ECEC programs in urban areas report having at least two times as many books in the classroom (Qi & Melhuish, 2017).

In a study by Hardin, Bergen, Busio, and Boone (2017) ECEC programs in China ranked lowest on measures of program quality on the GGA. Although scores for most areas were in the range of normal, scores were lower for indicators related to access, advocacy, and equality for children based on individual differences such as race, gender, or disability. Indicators related to family-professional partnership (Area 4) and home-school collaboration (Area 4) were also rated lower on the GGA for ECEC programs in China. Indicators related to individualizing curriculum materials and approaches to meet the needs of children were rated lower in China when compared to other nations. ECEC professionals in China noted that advocacy activities for children were “not available” (Hardin, Bergen, Busio, & Boone, 2017, p. 305). Through interviews with Special Education faculty at universities in China, Trube, Li, & Chi (2013) found that ECEC professionals need additional training in diagnostics, inclusive practices, parent partnerships, and advocacy. Professors also commented that ECEC programs in China are becoming more accepting of children with special needs (Li, Yang, & Chen, 2016).

The Culture of Families: Family Engagement in Education

The family culture and expectations of families within society impact how ECEC programs and professionals apply and modify best practices that are culturally relevant to the family. Family traditions and cultural practices in China influence developmental expectations, school-family partnerships, and child outcomes in ECEC. Education is highly valued in Confucian traditions that guide Chinese culture and family practices (Trube, Li, & Chi, 2013). The family-unit is also highly revered in Chinese culture, Trube, Li, & Chi, (2013) refer to the cultural belief of “4 + 2” for each child, interpreted to mean four grandparents and two parents

who are devoting resources to a single child” (p.111). “Traditionally, caring for children with disabilities was perceived as a responsibility of society in China.” (Hardin & Hung, 2011, p. 104). Children with special needs have the right to education; some young children in China attend boarding schools to access appropriate services. In Trube and colleague’s (2013) study, one kindergarten teacher reported:

Our school is a second home to about a third of the children. Their parents work long days, and children are here from Monday until Thursday. Then they go home with the parents. They are happy to go home and they’re happy to come back to school. (p. 111)

In interviews with Special Education Faculty members in China, professors identified the need for additional training in parent education and more opportunities for collaboration between families and schools (Trube, Li, & Chi, 2013). The ACEI GGA could be used to identify current ECEC professional practices, such as methods of sharing resources and information with families on child development and learning (GGA Indicator 4.51). The GGA could also be used to further identify specific areas of need for ECEC professionals in China in regards to parent engagement. Indicators related to Area 4: Parent Partnership could be used to create professional development goals and training opportunities for ECEC professionals to gain competencies in these areas of program quality.

ECEC Programs and Service in the United States

National ECEC Policy: Funding, Accountability, Access

National education policy and state education agency regulations impact how ECEC programs and professionals adopt and apply best practices as outlined in the GGA. The Department of Education provides oversight and regulations for ECEC programs for children in public

preschool or kindergarten programs. Prekindergarten or preschool is not required in the United States; each state determines the required age for children to attend school or be enrolled in an educational program. The United States has a split system for monitoring and regulating ECEC programs. The split system in the United States places responsibility for ECEC programs and ECSE services within different government agencies. As mentioned, public programs for children 4 to 6 years old operating in public school districts are governed by the Department of Education. Private and non-profit ECEC programs for children birth to 6 years old are monitored and regulated at the federal, state, and local level within child and family welfare agencies, such as Maternal and Child Mental Health or the Department of Health and Human Services (Kamerman, 2001). Children from 3 to age 5 years old attend preschool, while children ages 5 and 6 attend kindergarten. The average ECEC program cost in the United States is \$10,830USD annually per child (OECD, 2018). The U.S. Department of Education reported that 60% of children under 5 years old were enrolled in ECEC programs in 2016. However, according to the OECD the United States has lower ECEC enrollment rates than other OECD nations (OECD, 2018).

ECEC programs in the United States are “largely decentralized” (Józsa, Török, & Stevenson, 2018, p. 92). There are significant gaps in access and quality in inclusive ECEC programs in the United States. ECEC services are a mix of public, private, and NGO funded programs with a wide range of organizational structures and instructional methods. Within the GGA, *Area 1: Environment and Physical space* is most closely aligned with state licensing requirements of most states in the United States. State licensing requirements are considered *minimum program requirements* for operating a preschool or child care center in the United States. GGA Indicators that are reflected in the state child care licensing guidelines include

environmental and safety precautions, such as environments that: are free from hazards, including unsafe equipment, pollution, and violence (GGA Indicator 1.1); provide basic sanitation (GGA Indicator 1.2); promote good health practices (GGA Indicator 1.4) and have procedures to protect children from hazards or abuse (GGA Indicator 4.48) (AECI, 2011). State child care licensing guidelines primarily focus on measures of structural quality indicators.

There are no national curriculum guidelines for inclusive ECEC programs in the United States. Preschool programs use a combination of evidence-based practices and teacher-designed curriculum models. Curriculum-based measurement (CBM) and Direct Instruction (DI) are two pedagogic approaches used in inclusive ECEC programs in the United States (Brownell, Sindelar, Kiely, & Danielson, 2010). Other curriculum models including Montessori or Reggio inspired programs, High Scope curriculum, faith-based curriculum, developmentally-based curriculum, thematic curriculum, and teacher-designed curriculum are common in ECEC programs in the United States. ECEC programs in the United States reported using on-going assessments within the program through curriculum checklists, child portfolios, or classroom observations (Bailey, 2014; Hardin, Bergen, Busio, & Boone, 2017). These on-going assessments are typically performed by program directors, curriculum specialist, or other supervisory level staff within the program. The focus on curriculum, pedagogy, and instructional practices are indicators of process quality. There appears to be a gap in inclusive ECEC pedagogy which focuses heavily on discrete cognitive skills and assessment, and international quality guidelines in the GGA which focus on relationships and individual developmental progressions (Bennett, 2001).

Cultural shifts in the perspective of childhood, education, and disabilities have changed education policy and practices in the United States over time. Early preschool or infant schools

in the 1800's were inspired by European educational theorists, such as Frobel, Pestalozzi, and Rousseau (Prochner, Cleghorn, & Drefs, 2015). Early preschool programs emphasized learning through play. The first kindergarten programs were opened in the 1850's in the United States (Gong & Wang, 2017). Early preschool programs provided academic instruction and child care, this changed as day nurseries were established for working parents. Day nurseries and child care programs shifted to primarily providing childminding and safe spaces for children while their family members worked (Prochner, Cleghorn, & Drefs, 2015). Private kindergartens opened throughout the United States during the late 1800's and continue to operate. Public kindergartens were established in the 1950's when the post-war economy relied on maintaining an active workforce. The progressive child study movement and social reforms led the way for child care and kindergarten programs established by social service agencies and other non-profit organizations (Fromberg, 2006). This tradition continues in the ECEC system in the United States with the decentralized and split system for child care, academic preschool, and public kindergarten programs.

The United States does have a history of providing services for children from vulnerable or disadvantaged populations (Józsa, Török, & Stevenson, 2018). Issues around social justice and equity in education were founded in the Civil Rights Movement and efforts to desegregation of schools. These reform efforts led to the *Brown v. Board of Education* (1954) Supreme Court decision to provide equal educational opportunities for all children, regardless of race or ability. Families of children with disabilities also sought educational access and opportunities for students with disabilities. In 1975, the Education for Handicapped Children Act led to the creation of special education programs focused on disability specific needs, with professionals trained to support children with sensory impairments, cognitive impairments, and specific

learning disabilities. (Brownell, Sindelar, Kiely, & Danielson, 2010). Inclusive programs for children with disabilities, including the Individuals with Education Disabilities Act (IDEA) are critical federal mandates within the educational system in the United States (Brownell, Sindelar, Kiely, & Danielson, 2010; Józsa, Török, & Stevenson, 2018). GGA indicators are supported by the inclusive practices in ECEC programs, specifically Area 5: Young Children with Special Needs. Indicators such as “Children with disabilities and other special needs have equal access and equal opportunities in types and levels of program services” (GGA Indicator 5.66) and “Services are delivered within an inclusive environment of special needs children and non-special needs children” (GGA Indicator 5.75) are valued in educational policy in the United States.

Social programs designed during the War on Poverty in the United States focused on programs and initiatives offering whole-family or wrap-around services. The Office of Head Start was created in 1965 to promote school readiness and access to ECEC services for all children. Programs such as Head Start offer family services such as social work, family advocates, mental health consultants, and programs for migrant families. ECEC programs and services are tasked with providing care and educational support for children within vulnerable populations in the United States including children with disabilities, low-income families, homeless families, migrant families, rural families, and families that experience chronic stress or traumatic events in their homes and communities. The GGA specifically seeks information on support provided for families in need (GGA Indicator 6.26). National, publicly funded programs in the United States, such as Head Start, provide access to ECEC services for children and families in poverty, in rural areas, and children with disabilities (Bailey, 2014; Hardin & Hung, 2011). These programs were found to rate higher on measures of the GGA related to supporting

children with special needs when compared to other private child care and educational programs (Hardin & Hung, 2011). GGA Indicators related to partnering with families (GGA Area 4) and young children with special needs (GGA Area 5) are supported through whole-family or wrap-around services in inclusive ECEC programs in the United States.

Non-governmental organizations and professional associations within the United States (Brownell, Sindelar, Kiely, & Danielson, 2010) are working to influence ECEC policy and practices to increase access to high quality inclusive ECEC programming for all children, however not without challenges. Brownell, et al., (2010) argue that the increased complexity and growing responsibilities within the ECEC workforce are not met by current ECEC training programs or workforce preparation programs. ECEC professionals should be prepared to implement evidence-based curriculum, individualize goals and outcomes for children, and have knowledge of special education strategies and practices. The ACEI GGA could be used to evaluate the current knowledge and practices of the ECEC workforce for professional development and policy recommendations. Recently, educational reform movements have shifted towards an academic approach in preschool and kindergarten programs, leaving less time for exploration and learning through play (Stegelin, Cecconi, & Pintus, 2015). However, national and international professional organizations, such as NAEYC and DEC, promote learning through play, child-centered practices, and activity-based instruction. The GGA Area 2: Curriculum Content and Pedagogy calls for opportunities for children and teachers to have both free play time and structured activities throughout the daily ECEC program (GGA Indicator 1.10). ECEC professionals also are tasked with implementing curriculum that is “Flexible, comprehensive plans are implemented that are oriented to the children, family, and cultural contexts” (GGA Indicator 2.19). The current climate of inclusive ECEC programs and

curriculum trends tend to move ECEC professionals in the United States away from providing more flexible, play-based, culturally relevant curriculum in ECEC.

The Culture of Schooling: Monitoring Quality

The culture of schooling and values placed on education for young children influences the way that ECEC professionals implement internationally identified measures of quality and best practices in ECEC services and programs in the United States. The lack of nationally agreed upon quality indicators, standardized curriculum goals, and professionalism of the workforce impact the way ECEC professionals' approach and apply best practices in their work with young children and families. . There are collaborative efforts currently underway by DEC and NAEYC to build awareness and professional status within the ECEC workforce. Some states require lead teachers to have at least a bachelors degree and many programs encourage their staff to complete the Child Development Associates Credential to meet quality standards and licensing requirements. Measures of ECEC program quality in the United States depends on the funding source and setting of services provided. There are no national standards or quality guidelines for inclusive ECEC programs in the United States. Each state determines the regulations for child care, preschool, kindergarten, and other inclusive ECEC settings. States have basic health and safety requirements for public and private child care and kindergarten programs focused on structural quality. These minimum safety guidelines are monitored by state or local officials but do not focus on measures of process quality such as instruction, interaction, or curriculum in ECEC programs. States have designed and adopted learning standards and quality indicators for ECEC programs. These quality rating systems are a mechanism to improve program quality and provide consumer information on available ECEC programs. States, such as North Carolina and Washington, use a quality rating system. Despite the required state-level quality rating systems,

ECEC professionals report they would like additional support to implement recommended practices and a framework for best practices in the classroom (Nelson, Lindeman, & Stroup-Rentier, 2011). There is not a national curriculum for inclusive ECEC programs in the United States. Instructional quality and learning goals vary depending on the setting and organization of the program. While a national curriculum model would provide educators and families with standardized and evidence-based outcomes for young children, it is important that educators are able to individualize curriculum goals and outcomes based on the needs of the children and families in their classrooms using culturally-responsive teaching strategies. National inclusive ECEC programs, such as Head Start, use research-based curriculum that is culturally responsive to the population of families and children served in the program. However, funding disparities and differences in quality occur between Head Start programs and inclusive ECEC services across the nation.

In the United States teacher education and qualifications depend on the ECEC setting. ECEC in the United States has not experienced the same level of professionalization as other fields in education (Józsa, Török, & Stevenson, 2018; Bennett, 2001; Moss, 2001) Private ECEC programs may require certifications while publicly funded programs typically require higher education and training in child development. ECEC professionals have a range of backgrounds, levels of experience, and training in child development and education. Most ECEC professionals in the United States complete a two- or four-year pre-service training program (Stegelin, Cecconi, & Pintus, 2015). Kindergarten teachers in the United States are required to have at least a bachelor's degree to teach in the public school system. The United States has over 1000 teacher education programs (Fromberg, 2006; Gong & Wang, 2017; Hardin, Bergen, Busio, & Boone, 2017). ECEC teacher education programs in the United States place emphasis on

developmentally appropriate practices, assessment, parent partnerships, and supporting students with special needs (Stegelin, Cecconi, & Pintus, 2015). In a study of ECEC professionals (N = 1668) and professional development, Bruder, Dunst, Wilson, and Stayton (2013) found that the more pre-service training professionals participated in the more competent and confident they felt in the classroom. This study also found the number of years ECEC professionals had worked in the field influenced perceptions of competence in professional responsibilities. In a separate study of ECEC professionals (N = 1892) Bruder, Dunst, and Mogro-Wilson (2011) reported that participants rated themselves as more confident than competent in implementing high quality recommended practices in the classroom. These findings expose a gap in ECEC professionals reported understanding of best practices and actual use of high-quality practices in classrooms. The GGA could be used to identify specific areas of practice that professionals are familiar with and implement in inclusive ECEC programs and identify areas of improvement to increase the use of best practices in inclusive ECEC services.

Stegelin, Cecconi, & Pintus (2015) used the ACEI GGA to evaluate ECEC professional preparation in the United States and Italy. Using a case study approach, the researchers recruited undergraduate students in the United States and 32 ECEC professionals in Italy to implement the GGA in their programs. Across the 16 programs evaluated using the GGA in Italy, professionals found the GGA to be useful, clear, and complete. The majority of professionals (M = 6.46 on a 10 point scale) found the GGA to be easy to use. Professionals in Italy and students in the United States both felt the GGA would be time consuming to implement, but felt the GGA was practical for programmatic evaluation and self-reflection. The undergraduate students in the United States found the GGA to be interesting and useful for cross-cultural comparisons of ECEC programs. The students also compared the GGA to the ECERS classroom quality rating scale, finding the

qualitative nature of the GGA a benefit over the more quantitative data collected in the ECERS. The undergraduate students related the GGA to efforts to improve classroom practices and communicate with families in the ECEC setting.

In focus groups ECEC professionals in the United States reported the need for clearly defined roles and responsibilities in the field. To implement recommended practices in focus groups with ECEC professionals the United States, Trivette, Dunst, Hamby, and Meter (2012) examined 29 studies of ECEC professional's beliefs and use of recommended practices in the classroom. The authors found that although the professionals intended to use best practices; when observed the ECEC professionals tended to overestimate actual implementation of best practices in the ECEC setting. There is a culture of assessment, testing, and accountability in public inclusive ECEC programs in the United States which impacts the pedagogical decisions ECEC professionals make in daily classroom instruction. In a case study of pre-service ECEC professionals in the United States using the GGA in coursework, pre-service ECEC professionals found the GGA helpful in understanding ECEC quality indicators and best practices in the global context. Pre-service professionals also reported benefits to using an environmental assessment and culturally responsive indicators in the GGA to support parent-family partnerships and collaboration. The pre-service professional valued the qualitative nature of the GGA. However, they also reported concerns in the amount of time to complete the GGA (Stegelin, Cecconi, & Pintus, 2015).

The Culture of Families: Family Engagement in Education

The role of families and family culture greatly influences inclusive ECEC services and professional practices in the United States. Inclusive ECEC programs are adapting a family-centered approach to designing and implementing services for children and families, shifting

away from an expert-clinical model. The care and education of children in the United States is a shared responsibility of the family, state, and society (Moss, 2001). In the United States, the family was primarily responsible for the care and education of children with disabilities until 1975 when national education policy provided provisions for free and appropriate education for all school age children with special needs. In 1986, these provisions were extended to children from three to five years old. In 2004 the Individuals with Disabilities Act (IDEA) was reauthorized to provide special education services for children from age three to 21 years old, prioritizing inclusive practices, parent engagement, and individualization of services. Services for young children with special education needs and their families are served under IDEA Part C, which provides services for children birth to age 36 months old. At three years old, service delivery moves to Part B of IDEA and services for children with disabilities and special education needs are provided by the local public school district.

Children with special education needs typically begin services in their local neighborhood school or within specialized schools based on the severity of their disability and family preference. Under Part B of IDEA children with disabilities or special education needs and their families have the legal right to a detailed, outlined service plan, known as an Individualized Education Plan (IEP). The IEP process is another area in the United States educational system where the ACEI GGA could be applied. *Area 4: Partnerships with Families* and *Area 5: Young Children with Special Needs* could be used to assess professional practices during special education planning and implementation. GGA indicators “Children with disabilities and other special needs have equal access and equal opportunities in types and levels of program services” (GGA Indicator 5.66) and “Staff members and/or specialists individualize, adapt, and modify to meet the individual educational or care needs of children with such needs”

(GGA Indicator 5.71) directly influence the service delivery plan and implementation of services for children with disabilities and special education needs in inclusive ECEC programs. The service delivery plan is created through a collaborative process during an IFSP meeting. Parents, general educators, special educators, para-professionals, discipline specific therapy providers, school counselors or social workers, and school administrators work together as part of a multidisciplinary team to discuss the child's current level of functioning, family goals and priorities, developmental and academic goals, appropriate supports for meeting individualized goals, and to identify professionals on the IEP team to deliver direct therapeutic services or interventions as appropriate based on the child's needs and family preferences.

Families in the United States are increasingly diverse and represent cultures from across the globe, including China. ECEC professionals report feeling unprepared to meet the needs of diverse families in ECEC programs (Hardin & Hung, 2011). Based on international quality indicators in the ACEI GGA, it is critical that professionals are able to respect and incorporate family culture, promote the values of individual families, and provide culturally relevant learning opportunities for children and families. Area 4: Partnerships with Families in the GGA highlights the importance of cultural responsiveness in curriculum. Overall, GGA Indicator 3.42 states that ECEC professionals should "respect children, their culture, and family practices" (ACEI, 2011).

Conclusions and Future Research

There are limitations related to the data collected related to ECEC programs and services for children with special education needs or disabilities. Gong and Wang (2017) compared ECEC programs in the United States and China using case study interviews of ECEC faculty in 3 states in the U.S. and from 3 regions in China along with a historical analysis of ECEC programs in both countries using policy documents. Gong and Wang (2017) conclude there is a lack of

comparative research between China and the United States focused on curriculum content, quality indicators, academic standards, provisions for young children with disabilities, professional development, and pre-service education requirements for ECEC programs and services.

Implications

There is a need for additional economic investment on a national and global scale (Hardin, Bergen, Busio, & Boone, 2017). Children with disabilities experience inequalities in ECEC programs and services, impacting opportunities to learn with typically developing peers in high-quality settings with appropriately trained teachers (Hardin & Hung, 2011). National ECEC policy and regional interpretations of ECEC policy, specifically for children with disabilities can place undue burden on families and other community resources. In a study of 151 ECEC centers in China, Guatemala, Taiwan, and the United States, Bergen and Hardin (2013) found that private ECEC programs rated higher on GGA indicators as compared to public ECEC programs, most likely due to additional resources and funding for materials and teacher training in private ECEC programs. Gong and Wang (2017) suggest that the United States create a centralized and integrated system for workforce development and training for ECEC professionals. Training programs and certifications should be honored across states and states should standardize qualifications for ECEC professionals based on the setting of services (Gong & Wang, 2017; Kagan, 2018).

There is a need for professionalization of ECEC field (Moss, 2001). High-quality, trained professionals are needed to provide the level of care and education for young children expected by families in many nations. In China, Trube, Li, & Chi (2013) recommend more general education programs and two-year certificate programs in China should include coursework in

special education. Additionally, the researchers recommend direct experience with young children with special education needs and advocacy training for professionals should be included in pre-service programs for ECEC professionals in China. Professional development programs in China could incorporate additional internships or student teaching experiences to increase future ECEC professional's competence in implementing recommended practices (Gong & Wang, 2017). Li, Yang, and Chen (2016) also suggest there are continuing challenges in accessibility, affordability, and accountability in ECEC programs in China. There is a need for research and policy guidance related to provisions of ECEC services, cultural influences in ECEC programs, and local teacher education and curricular reform (Li, Yang, and Chen, 2016).

Gaps exist in national and international quality monitoring and evaluation processes related to curriculum, education, welfare, and development of young children in ECEC programs in China and the United States. Neither China or the United States have a national quality monitoring initiative. There are differences in quality between public and private or 'for-profit' ECEC programs in China and the United States (Qi & Melhuish, 2017). Gong and Wang (2017) suggests that China and the United States use national professional development standards set forth by NAEYC to ensure highly-trained ECEC professionals in the workforce. The ACEI GGA could be used to identify areas of need and gaps in ECEC policy and practice in the United States and China. The ACEI GGA could be used to examine issues of rural and urban disparities, equity/accessibility, funding/resources, and quality in ECEC programs in China and the United States.

Future Research

The GGA can be used in future research to inform policy on a local, regional, national, and global scale. The GGA can also be used to conduct research to directly identify areas of

program practices or quality measures on individual child and family outcomes. The GGA could be used by programs, stakeholders, or policy makers to identify areas of need and current practices in ECEC services designed to support the needs of young children with special education needs or disabilities. The GGA provides a tool for researchers to examine ECEC programs and practices within and across nations (Hardin, Bergen, Busio, & Boone, 2017). Additional research on evidence-based practices that are culturally reflective of the children, families, and programs is needed to inform policy makers, stakeholders, and ECEC professionals on an international scale (Trube, Li, & Chi, 2013).

Future research can build on the foundation of sociocultural theory in ECEC to examine the appropriateness of a social justice approach to research related to policies and programs, accessibility, inclusive practices, family involvement in ECEC services. Raikes, Devercelli, and Kutaka (2015) recommend additional research on measures of ECEC quality across settings and context. Similarly, Bergen and Hardin (2015) suggest that research on the reliability and validity of the GGA should be expanded to include Africa, Asia, the Middle East, and South America. Józsa, Török, and Stevenson, (2018) suggest expansion of ECEC programs in developing countries and global efforts to establish quality indicators will support progressive and accountable ECEC systems.

Shared goals, different approaches and strategies based on socio-cultural and political influences, the culture of schooling and the culture of families influence ECEC policy and practices on a national scale. Comparative studies of ECEC policies, programs, and practices on an international scale can lead to advances in national and global efforts to improve outcomes for children and families. Challenges to establish internationally agreed upon measures of quality in ECEC can be confronted with evaluation tools that are culturally responsive, flexible, and

grounded in developmental theory. Positive and healthy outcomes for young children as they grow and develop in the early years of life prior to entering formal educational systems is a shared goal “within and across” nations. National policy, the culture of schooling, and the culture of family influence how ECEC professionals adopt and adapt indicators of quality in ECEC programs. Research on international professional practices and quality indicators can influence ECEC policy and systems based on culturally responsive and family-centered principals which are valued internationally in ECEC services. Cross-national studies can be used to see the big picture and trends within ECEC programs and services. Researchers can address critical questions relevant to the global needs in ECEC programs. Cross-national studies can also support reflection on strategies that are successful at supporting internationally identified best practices and quality indicators in ECEC (Moss, 2001). Using reliable and valid tools to measure ECEC program quality, such as the ACEI Global Guidelines Assessment, on an international scale can inform policy makers, stakeholders, professionals, and families when making decisions about ECEC programs and services.

Chapter Three

Methods

This is a descriptive and exploratory study examining the strategies used by international Early Childhood Education and Care professionals (ECEC professionals) to engage families of children with special education needs (Voght, Gardener, & Haeffele, 2012). The study used semi-structured interviews with ECEC professionals in China and the United States to explore practices, policies, and professional development that support parent-professional partnerships in early childhood education and care settings on an international scale. The study has been approved by the University of Illinois Institutional Review Board (see Appendix B).

This chapter will discuss the methodology implemented to collect information about professional practices in ECEC in the United States and China. This chapter will include the study design, data collection methods, and data analysis process. The procedures and documents used in this study will be shared and will include participant recruitment, informed consent, and interview protocols.

Purpose Statement

The goal of this study is to better understand the training, practices, barriers, and challenges of international ECEC professionals when working with students with special education needs and their families. This study implemented a systematic, qualitative interview design with a complementary demographic survey. The interview included nine semi-structured questions to understand program policies, professional practices, and strategies used by ECEC professionals to support children with special education needs and their families. The interview questions have been designed to collect in-depth information on the lived experiences of international ECEC professionals and the complex interactions which they engage in when supporting children with special educational needs and their families. This study uses a

phenomenological approach to describe these interactions and experiences of ECEC professionals. Using this approach, an explanation based on the experiences of participants was created to identify emerging constructs or theories on family engagement practices used by ECEC professionals in China and the United States to engage family members of children with special education needs (Leavy, 2017; Voght, Gardener, & Haeffele, 2012).

The following research questions guided this study:

1. What types of formal and informal training do ECEC professionals receive prior to working with children birth to eight with special educational needs and families?
2. What are the shared experiences of international ECEC professionals working with children birth to eight with special educational needs and families?
3. What are the barriers or challenges international ECEC professionals face working with children birth to eight with special educational needs and families?

Overview of Study

Qualitative methodology recognizes that individuals have multiple perspectives of their environment and experiences. Therefore, qualitative methodology employs an emergent design that develops and evolves throughout the process of data collection, analysis, and reporting (Creswell, 2014; Creswell & Poth, 2018). Qualitative methodology is used to understand and make meaning from multiple perspectives of participants who may view or describe the same phenomenon differently based on personal experiences and ability to articulate their behaviors or practices (King, Horrocks, & Brooks, 2019). Qualitative methodology uses both an inductive and deductive process to make meaning out of individual's experiences (Brantlinger, Jimenez, Klingner, Pugach, & Richardson, 2005; Creswell & Poth, 2018; Leavy, 2017).

Qualitative methodology has been used in educational research to document personal accounts of educational practices and multiple perspectives on educational policies (Brantlinger

et al., 2005; Tobin, 2014). “Educational ideas” and “psychological concepts” can be explored using qualitative methodology (Creswell & Poth, 2018, p. 76). Phenomenology has been used to explore “what” and “how” individuals experience specific events or activities in their lives (Brantlinger et al., 2005; Creswell & Poth, 2018, p. 75; Moustakas, 1994). Qualitative inquiry requires the researcher to gather rich, descriptive data from participants using rigorous and systematic methods of data collection (Creswell & Poth, 2018). Phenomenology gives meaning to the experiences of individuals at the conscious level but does not aim to explain the causes of their experience (Brantlinger et al., 2005; Creswell & Poth, 2018). Qualitative methodology has been used in educational and disability research to describe the experiences of those participating in special education services and document the practices used within special education programs (Brantlinger et al., 2005).

Early childhood education and care professionals have many responsibilities in their role as caregivers and developmental specialists. In the field of early childhood education and care, a wide range of professionals support families by providing developmentally appropriate activities, sharing information on child development, identifying areas of growth, and supporting the family’s interactions with their children. This study will focus on the strategies ECEC professionals use to support families when their child has a special need or disability. Qualitative methodology will be used to gather information on the professional’s training and experience supporting families of children with special needs across roles and settings. Qualitative methodology will be used to learn about ECEC professionals lived experience. Qualitative methods allow the researcher to detail the meaning and complexity of interactions between ECEC professionals and families. Qualitative research can be used to examine the experiences of a small number of individuals to develop explanations and explore specific phenomena in

context (Creswell, 2014). Phenomenological studies aim to describe the experiences of those who participate in the phenomenon under study on a regular and on-going basis (Creswell, 2014). An inductive approach will be used to identify patterns and themes within the data. Qualitative methods promote exploring the process and the outcomes to build understanding of the phenomenon under study (Creswell, 2014). To promote high quality data collection in phenomenological research *fairness* and *authenticity* will be supported by consent procedures, providing access to the final reports, and maintaining confidentiality (Lincoln & Guba, 2013). Additionally, phenomenological interviews are conducted as reciprocal conversations between the researcher and participant to build common understanding of the phenomenon in the naturally occurring environment (Creswell & Poth, 2018; King, Horrocks, & Brooks, 2019; Leavy, 2017; Lincoln & Guba, 2013).

Position of Researcher

In qualitative research the research team relies on their own personal experiences and stances within the study and when interpreting the data (Brantlinger et al., 2005; Creswell, 2014; Lincoln & Guba, 2013; Leavy, 2017). Therefore, it is important for the researcher to position themselves within the frame of the research. This study relies on the experiences of participants to build a case for future directions and areas of support for ECEC professionals working with families of children with special education needs in the early childhood education and care setting (Creswell, 2014). Interview questions have been developed based on current research and tools used in the field to identify practices areas of support for early childhood education and care professionals. Interviews are one of the most common methods of data collection in qualitative research (King, Horrocks, & Brooks, 2019). The researcher is a “human instrument” in qualitative, phenomenological research (Lincoln & Guba, 2013, p. 68).

As a researcher, I recognize the importance of philosophical assumptions and interpretative frameworks to situate research questions, methods, and analysis within qualitative research. This study takes an ontological approach to conducting qualitative research by placing value in multiple perspectives and differing perceptions of reality when collecting information from individuals on their lived experience (Creswell & Poth, 2018). Additionally, a post-positivist and social constructivist lens was used to frame research protocols and during interpretation of the data (Creswell & Poth, 2018; Leavy, 2017). Post-positivist and social constructivist approaches recognize the various perspectives and interpretation of reality when systematically collecting data on individuals' interactions with others within their world. Process, context, and logical inquiry are critical when conducting research with individuals based on a post-positivist, social constructivist framework (Creswell & Poth, 2018).

Creswell and Poth (2018) describe disability theories as an alternate framework when examining social inclusion and education for individuals with disabilities. Disability theory and interpretative frameworks can be used when exploring the experiences of educators, parents, and children with disabilities (Creswell & Poth, 2018). Disability theory recognizes the unique lived experiences of individuals with disabilities while placing emphasis on the social construction of disability and human difference. Disability research must place importance on the impact of data collection methods and reporting in the lives of participants, specifically individuals with disabilities. Disability research also places emphasis on advocacy, social justice, and the advancement of the rights of individuals with disabilities (Creswell & Poth, 2018).

Reflexive Statement

I have worked with children, families, and teachers from diverse cultural backgrounds for over 15 years as a classroom teacher in child care centers associated with several universities

across the Midwestern United States. In this role I was able to observe and practice strategies to meet the needs of children and families in the classroom setting. I have also acted as a consultant, professional development provider, and adjunct instructor allowing me to support future and practicing early childhood professionals in designing culturally responsive classrooms and implementing teaching practices to support diverse children and families. In this direct work with children, families, and teachers, I have witnessed successes and challenges for early childhood professionals when working with a diverse range of families from multiple cultural backgrounds.

I am a white, middle-class early childhood professional development specialist and special education researcher. This lens and my experience in the classroom setting with diverse families and teachers guides my interest in this topic. While I have primarily worked within American, democratic systems, I take a wide worldview and value the perspectives of other cultures and national education systems. I have had the opportunity to work with teachers and pre-service teachers from nations across the globe through my participation in professional organizations and international study abroad programs. I have visited, observed, and participated in classrooms across China, Hong Kong, Macau, and Singapore. I have worked with visiting scholars from France, Macau, China, Hong Kong, South Korea, Taiwan, and the United Kingdom. These rich cultural exchanges with other teachers, students, and families have led me to think about ECEC and Special Education in a global context.

This study has required me as the researcher to constantly reflect and monitor my own bias, assumptions, values, feelings, experiences throughout the research process. The research process itself has also impacted my own understanding and beliefs about ECEC, special education, family systems, and disability across cultures and educational systems.

Participants

Participants were selected using purposeful, targeted strategies (Voght, Gardener, & Haefele, 2012). Keeping with the purpose of the research to identify strategies used by ECEC professionals in China and the U.S., participants were targeted for recruitment. The participants in this study were selected based on their willingness to share their experiences with the research team through interviews and were drawn from a specific population of ECEC professionals working with directly with young children and families within target countries.

Twenty-two early childhood education professionals from the United States and China were interviewed using the interview protocol adapted from the ACEI GGA. Nine ECEC professionals in the United States and 13 ECEC professionals in China participated in virtual interviews. According to quality indicators for qualitative research, the number of participants can vary depending on access and interest (Brantlinger et al., 2005). The number of participants was determined based on the recommendations of Creswell & Poth (2018) to include heterogeneous groups of 3 to 15 individuals in phenomenological research.

Participants included ECEC professionals that provide direct support to children ages birth to age eight within a formal education, developmental, therapeutic, or community settings. These programs included both public and private programs and community organizations. Professionals included child care providers, preschool teachers, primary/elementary school teachers, behavior specialists, social workers, special educators, and early intervention therapists. Participants had many roles within the field of ECEC, this reflects the diversity of professionals working with young children with special education needs and their families. In the United States and China, many professionals collaborate and work across systems to providing family-centered, community-based, or educational and developmental programming to meet the needs of children and families. Despite differences in the roles or titles of ECEC professionals, all

professionals in this study self-identified as an ECEC professional that worked directly with children and families. Participants had a range of educational backgrounds, from high school degrees to graduate-level degrees. Of participants from China, six were currently working on degrees related to education, while in the United States one participant was currently enrolled in a higher education program. Three professionals in the United States and five professionals in China had degrees in special education. All professionals in the study worked directly with children from birth to age eight years old and their families.

Table 4

Participant Demographics

Participant ID	Role	Degree	Major	Teaching Certificate	Prepared to Work with Children with SEN
CHN1	Education	Bachelors	Primary Education	X	No
CHN2	Education	Bachelors	Primary Education	X	No
CHN3	Education	Bachelors	Primary Education	X	No
CHN4	Special Education	Bachelors	Elementary Ed	X	No
CHN5	Special Education	Bachelors Masters	Management Special Education	Autism Certificate	No
CHN6	Special Education	Bachelors	Special Education	X	Yes

Table 4. Participant Demographics (cont.)

Participant ID	Role	Degree	Major	Teaching Certificate	Prepared to Work with Children with SEN
CHN7	Child Care	Bachelors		X	No
		Masters	Preschool Education		
CHN8	Education	Bachelors	Preschool Education	X	Yes
		Masters	Education		
CHN9	Special Education	Bachelors	Information and Computer Science In progress: Special Education	Autism Certificate	Yes
CHN10	Special Education	Bachelors	Preschool Education	X	Yes
CHN11	Special Education	Bachelors	Pedagogy	X	No
CHN12	Special Education	Bachelors	Special Education	X	Yes
CHN13	Special Education	Vocational College Degree	Special Education: Focus on Autism	X	Yes

Table 4. Participant Demographics (cont.)

Participant ID	Role	Degree	Major	Teaching Certificate	Prepared to Work with Children with SEN
US1	Psychology	Associates	Early Childhood Education		No
		Bachelors	Science and Psychology		
		Masters	Social Work		
US2	Education	Bachelors	Elementary Education	X	Yes
US3	Special Education	Bachelors	Child Development and Human Environmental Science		No
US4	Special Education	Bachelors	Communication Disorders and Speech Pathology	X	Yes
		Masters	Elementary Education with specialization in Early Childhood Education		
		Masters 2	Behavior Analysis		
		Doctoral	Instructional Leadership		
US5	Special Education	Bachelors	B: Early Childhood Special Education	X	Yes
		Masters	Early Childhood Special Education		

Table 4. Participant Demographics (cont.)

Participant ID	Role	Degree	Major	Teaching Certificate	Prepared to Work with Children with SEN
US6	Special Education	Bachelors	B: Elementary Ed and Early Childhood Education	X	Yes
		Masters	Early Childhood Special Education		
US7	Early Intervention	Bachelors	Family Consumer Science focus inn Family Service		Yes
		Masters	Early Childhood Special Education		
US8	Social Work	Masters	Social Work		Yes
US9	Child Care	High School	Associates in Progress: Early Childhood Education		No

Selection Criteria

To qualify for participation in this study, participants must: (1) be an early childhood education and care professional working directly with children in an early childhood education and care setting, including developmental or therapeutic settings; (2) work primarily with children from birth to age eight; (3) be able to read and respond to questions in English or Mandarin Chinese; and (4) have reliable access to the internet, computer, and online tools to participate in the demographic survey and access the virtual interview platform. Participants were excluded from the study if they have not worked directly with children in an ECEC setting or have primarily served as program administrators, social service representatives, medical

doctors, or similar roles that are not providing direct developmental or educational services for young children. Participants physically located in the EU/EUA were not be eligible for this study due to General Data Protection regulations (See <https://gdpr-info.eu/>). Participants locations were screened using the demographic survey prior to scheduling an interview with the research team. Inclusion criteria and exclusion criteria were assessed by the research team as part of the preliminary data analysis. No specialized knowledge was required to screen participants. Any screening questions that did not filter out participants based on their role early childhood education and care were addressed and invalid data was removed from the data set.

Participant Recruitment

Participants were recruited using systematic and purposeful sampling (King, Horrocks, & Brooks, 2019). Gatekeepers within the ECEC system were contacted by the lead doctoral researcher to gain access to participants; gatekeepers included university faculty, professional organizations, and administrators of ECEC programs (Creswell, 2014; Creswell & Poth, 2018; King, Horrocks, & Brooks, 2019; Lincoln & Guba, 2013). Insiders provided support through information sharing about the study to gain access to ECEC professionals in China and the United States. Using insiders to gain access to participants provided a level of trust and provided an additional level of screening of participants that were likely to meet inclusion criteria (King, Horrocks, & Brooks, 2019). Advertising was also used to recruit participants. Recruitment flyers were distributed through personal networks, professional organizations, and social media (King, Horrocks, & Brooks, 2019) (See Appendix B). The number of participants was reliant on the interest of ECEC professionals in China and the United States who met demographic qualifications that volunteered for the interview. Nine professionals in the United States and 13 professionals in China provided contact information in order to participate in this study.

Incentive

Participants in the interviews were provided with a copy of the book *Working with Families of Young Children with Special Needs* edited by R.A. McWilliam (USD\$38.40) as an incentive for sharing information with the research team. Interview research is by nature relational, incentives were used to show appreciation for the time and effort of the participants. The incentive provided was not used to persuade participation but provide tangible compensation out of respect for the participant (King, Horrocks, & Brooks, 2019).

Setting

This study was conducted in the United States and China. The interviews were conducted face-to-face or virtually using an online meeting platform. The online meeting platform was accessible to all members of the research team. The DSR facilitated each interview. Interviews were recorded and transcribed for analysis. Face-to-face interviews were recorded, transcribed, and translated. The research team conducted interviews in a consistent location, with limited distractions and limited background noise. The participant will have the choice to select the location for the face-to-face or virtual interview. Easy access to the virtual interview platform for participants was managed by the research team by sending instructions on how to enter the virtual interview and allowing the participant to select the location of the interview. Participants were notified of the length and expected timing of the interview during recruitment and informed consent procedures (Creswell & Poth, 2018; King, Horrocks, & Brooks, 2019). Interview design highlights the importance of setting, context, and consistency. It is important to set the stage for comfort and trust in the interview process. (Voght, Gardener, & Haefele, 2012). The interviews were conducted in the participant's native language with a research assistant (RA) who was also a native speaker. All RA's participated in training on the research project, research process,

professional interviewing guidelines, interview protocols, and reporting procedures. The training session was led by the lead doctoral student researcher to promote consistency, professionalism, and fidelity of reporting measures across the research team.

Instruments

ECEC Professional Demographic Survey

The demographic survey was used to collect information about the professional's educational background, role in ECEC, hours spent working directly with children, and geographic location. The demographic survey is based on the Brass Tacks (1990). The demographic survey contained 19 questions. The demographic survey acted as a screening tool for interview participants. The demographic survey was administered through Survey Monkey™ (See Appendix D).

Qualitative Interview

Semi-structured interview questions were used for the virtual and face-to-face interviews (See Appendix E). The interview questions have been modified from the Association for Childhood Education International Global Guidelines Assessment (GGA) Third Edition (ACEI, 2011). Specific areas of focus for the interview protocol from the GGA included the following domains: Early Childhood Educators and Caregivers; Partnerships with Families; and Young Children with Special Needs (See Table 1 for Alignment of Interview items and the ACEI GGA Items, Areas, and Subcategories). The GGA was developed in collaboration between the World Organization for Early Childhood (OMEP) and the Association for Childhood Education International (ACEI) as a tool to identify international best practices in ECEC programs and to promote high-quality ECEC programs on a global scale (ACEI, 2011; Sandell, Hardin, & Wortham, 2010; Stegelin, Cecconi, & Pintus, 2015). Internal validity measures across subscales

and across countries have determined the GGA is highly consistent across constructs ($\alpha = 0.94$ to 0.98) (Bergen & Hardin, 2015; Bergen & Hardin, 2013). Hardin, Bergen, Busio, & Boone (2017) established reliability and validity of the GGA and systematic, worldwide validity studies have been conducted for the GGA.

Psychometric properties of the ACEI Global Guidelines Assessment

The application of the ACEI GGA strives to achieve “balance between sensitivity to cultural differences and meaningful constructs that are reliable and valid across cultures” (Hardin, Bergen, & Cecconi, 2014, p. 235). The instrument was pilot tested by research teams and ECEC professionals in Texas, California, North Carolina, Nigeria, China, and translated into Spanish to pilot in Chile. The consensus method is used to translate the assessment tool into additional languages with the support of native-language educators (Trube, 2015). Reliability and validity were established in 2003 and 2004 in Colombia, Guatemala, India, Hong Kong, Kenya, Korea, Macau, Mexico, People’s Republic of China, Peru, Russia, the United States, and Venezuela (Trube, 2015). Internal consistency and criterion validity were established (ACEI, n.d.). The GGA was revised in 2006. In 2007 and 2008 a second reliability and validity pilot study was conducted at six sites across four countries (Guatemala, People’s Republic of China, Taiwan, and the United States) involving 168 programs and 336 ECEC professionals (Hardin, Bergen, & Hung, 2013). The GGA was found to have strong internal consistency (0.97) and internal consistency within each subscale (0.89-0.92). Moderate positive correlations based on Person’s (r) were reported for each subscale ($r = 0.46$ - 0.70) and for the total GGA ($r = 0.62$) (Hardin, Bergen, Busio, & Boone, 2017). In 2010 and 2011 a Rauch analysis based on the GGA 2nd Edition was conducted, resulting in 12 items being removed and another seven items rephrased (Bergen & Hardin, 2015; Bergen & Hardin, 2013). From 2012 to 2014 a systematic,

worldwide reliability and validity study was conducted by Hardin and Bergen which included the nations of India, Italy, Mexico, Peru, and Thailand (ACEI, n.d).

Interview Protocol

The interview protocol includes nine interview questions with clarifying probes included to clarify or expand upon responses. The interview was conducted in the interviewee's native language with an RA that is a native speaker of the language. Following the interview, the research team members translated and transcribed the interviews into English. A second native speaker RA reviewed the recording, translation, and transcription for accuracy. All research team members that acted as translators for this study completed the IRB required Certificate of Translation. A copy of the interview transcription or a summary of the interview was sent to the interviewee in their native language to check that the interview was accurately represented and they agreed with the transcription or summary as one level of trustworthiness in the data (Bratlinger et al., 2005).

This study strived to meet quality indicators within interview studies based on five principles set forth in Brantlinger et al. (2005): (1) appropriate participants were purposefully identified, effectively recruited, and selected in adequate numbers to represent the population of interest; (2) interview questions were appropriate, reasonable, clearly worded, not leading, and sufficient for exploring the domains of interest; (3) adequate procedures were used to record and transcribe interviews; (4) participants were represented sensitively and fairly in all reporting; and (5) appropriate and sound measures were used to ensure confidentiality.

Pilot Demographic Survey and Interview

The demographic survey and interview were completed by two international ECEC professionals. The international ECEC professionals were identified within the research team's

personal networks and contacted via e-mail and We Chat to participate in the pilot procedures. The pilot demographic survey and interview were completed by the DSR in English and by the RA in Chinese.

During the pilot interview, the DSR completed cognitive interview procedures to identify any areas of improvement for the interview questions. The DSR asked the interviewee if there were any questions that were confusing or needed clarification. The pilot interviews lasted approximately 45 minutes. Following the pilot interview, the DSR and RA debriefed and identified any areas of the interview or demographic survey that needed to be modified or changed based on the cognitive interview. Based on the pilot interview and cognitive interviews minor revisions were made to clarify question prompts.

Study Procedures

Interested participants were contacted by the research team via professional listservs, social media, email, or WeChat (See Appendix F). Interested participants received an email or WeChat message with the study procedures clearly outlined, the consent form in their native language, and a link to the demographic survey. If the participant met the eligibility requirements and were interested in participating in the interview study, they completed the demographic survey and used a separate link to schedule the virtual or face-to-face interview. As demographic surveys were completed and schedule requests were received, the research team contacted participants to schedule individual virtual or face-to-face interviews. The demographic survey and interview schedule was set up using unique links that were not connected in order to protect participants confidentiality (See Appendix G). Participants will be notified and contacted for scheduling after completing the demographic survey (See Appendix H).

For each interview, the researcher first reviewed the purpose of the study and the study procedures. The researcher also introduced themselves and shared their background including their country of origin and credentials. The researcher proceeded to ask permission to begin recording the conversation and began recording prior to reading the consent procedures to the participant. The researcher then explained the rights of the interviewee to confidentiality. Following the consent procedures and answering any participant questions the interviewee provided verbal consent to continue with the interview (See Appendix I). At this point, the researcher checked to ensure that the recording had started. The researcher thanked the interviewee for their time and participation in the study. The researcher explained how to use the tools in the virtual meeting room as needed. The researcher explained the interview process, expectations, and timeline. Next, the researcher started the interview, moving through the semi-structured questions and probes to clarify as needed. Follow up questions were used to expand or clarify as necessary. At the conclusion of the interview, the researcher thanked the interviewee for sharing and discussing their work with young children and families. The interviewee was asked to share their contact information and e-mail for follow-up and to provide incentives (See Appendix J). The research team member documented the interviewee's contact information on the Interviewee Follow Up Form (see Appendix K) and saved this information in a secured, online filing system (BOX) separately from the interview recording, transcript, and summary. The researcher also uploaded the video file of the interview into a secure BOX folder, videos will be destroyed 6 weeks following the completion of the study. Any identifying information was removed from interview transcripts. Any identifying information was collected through the demographic survey, interview, or transcript was removed and was not connected to the participant's contact information in any way.

Interviews were numbered with a unique identifier to protect the identity and confidentiality of participants. Program names, locations, or associated community organizations were removed from transcripts during a review of the data prior to data analysis. The only information on location will be the country or region of the interview participant (King, Horrocks, & Brooks, 2019). Translated and transcribed interviews were uploaded to a secure BOX folder. Study related data is stored on a password protected computer in a HIPAA compliant cloud filing system (BOX). Only members of the research team have access to data collected. Data will be kept for five years following data collection and then will be deleted (Creswell, 2014).

Data Analysis and Interpretation

The primary data for this study is the participant interview responses. Data analysis was completed by the Doctoral Student Researcher (DSR) and the RA. As interviews were completed, the DSR reviewed the transcriptions and translated transcriptions of the interviews. The DSR acted as the primary coder. The DSR and the RA read and reviewed each transcript individually to identify categories and potential themes. The first two transcripts were reviewed by the DSR and RA using open coding to establish potential categories and themes. Interview data was identified within the categories to establish coding units. The researchers identified the unit of analysis within the interviews would focus on sentence level data. The research team discussed the use of multiple codes per unit of analysis, it was determined that one or two codes would be used per sentence to support consistency and ICR calculations (Olson, et al., 2016).

Interviews were analyzed sequentially. NVIVO software was used to assist the research team in analysis. This study employed quality indicators within data analysis for qualitative research based on the recommendations of Brantlinger et al. (2005, p. 202) including steps to

ensure findings were sorted and coded in a systematic and meaningful way. Segments of the interviews were assigned to codes within the coding framework. The coding frame was modified repeatedly as interviews were analyzed. The coding frame was expanded and adjusted using constant comparative methods as interviews were coded. Analysis was data-driven as constant comparative methods were used to establish categories and themes within the interview data.

Constant Comparative Analysis

In coding individual interviews, constant comparative methods were used to identify emerging themes and commonalities shared among ECEC professionals. Constant comparative methods as outlined by Olson, McAllister, Grinnell, Gehrke Walters, and Appunn (2016) were used to analyze the interview transcriptions. Constant comparative methods of analysis “adds richness to the analysis by prompting deeper analysis.” (Olson, et al., 2016, p.26) Constant comparative analysis uses a clear, flexible, and iterative process to create descriptions of the coding scheme. Constant comparative methods promote reporting data beyond just coding frequencies. Qualitative content analysis is a process of placing meaning within a group of data through a “systematic description of data through coding” (Schreier, 2014, p.173)

Throughout the data analysis procedures researchers interpreted participants reports of strategies used to engage with families of young children with disabilities in the ECEC setting (King, Horrocks, & Brooks, 2019). Emergent constructs and shared meaning were recorded based on significant statements from interviews across participants (Creswell & Poth, 2018; Lincoln & Guba, 2013). The researchers identified and developed clusters of meaning from participant interviews to develop textural descriptions of what individuals experienced and structural descriptions of how individuals contextualize their experiences (Creswell & Poth,

2018). Moustakas (1994) refers to the rich, descriptive interpretation of participant experiences created through qualitative inquiry as *essence descriptions*.

Coding Design and Development

Qualitative research methodology encourages an iterative and inductive coding procedure which lends to emergent design, the results of the data collected can change and evolve throughout this process (Creswell, 2014; Leavy, 2017; Voght, Gardener, & Haeffele, 2012). Content analysis of the interview transcripts allowed for a close review of themes and common strategies used by professionals (Brantlinger et al, 2005; Olsen et al., 2016). Content analysis is also known as thematic coding (Schreier, 2014). Pattern analysis within and across interviews was conducted to identify commonalities among participant experiences.

Codes were established and modified as interviews were analyzed. A priori codes were established based on the research questions, original codes included educational background, family engagement strategies, experience working with children with special needs, and challenges. As the research team analyzed interviews, codes were expanded to include general strategies used with all families, strategies specific to families with children with special needs, general child-centered practices, child-centered practices for children with special needs, diversity, and peer interactions. The code for educational background became more focused by including both formal educational or training and background working with young children.

Codebook Development. The DSR and RA collaborated to create a code book with initial categories and themes by comparing coding created based on the first two transcripts. From this discussion, the DSR created preliminary code book with descriptive labels for analyzing future transcripts. The DSR and RA recoded the first two transcripts using the code book (Savin-Baden & Major, 2013). Coder reliability analysis will be run on NVIVO. At this

point, any codes that were not at 95% agreement will be discussed and updated as necessary. The updated code book was used to analyze future transcripts. For each transcript, the DSR and RA first coded independently. Next, the DSR and RA met to compare coding for individual interviews, discuss the coding frame as related to emerging data, and examine reliability within coding. The coding frame was flexible and adjusted repeatedly in this phase of analysis as codes were refined. Codes were specific to phenomena based on research questions and emerged as common experiences were identified. Codes were expanded, condensed, or renamed in order to manage data quantity while promoting robust data analysis (Creswell, 2014; Leavy, 2017; Olsen et al., 2016; Schreier, 2014).

Ten codes were used to identify specific practices, types of training or background, issues of diversity, and challenges faced by the professionals (See Table XX. Codebook with Definitions). From the 10 codes, these were condensed into four categories to create a visualization of the shared experiences of ECEC professionals in China and the United States (See Figure 1. Condensed Coding Scheme).

Table 5

Codebook with Definitions

Code	Definition
Challenge	Includes references to difficulties in service delivery, systematic barriers, and interactions with families or collaboration with other professionals.
Family Engagement Strategies for SEN	Includes references to creating IFSP/IEP, IFSP/IEP meetings, and IFSP/IEP communication with parents. Includes methods for working with families and encouraging family participation.

Table 5. Codebook with Definitions (cont.)

Code	Definition
Strategies for Children with SEN	Includes strategies for working with gifted/advanced learners, IEP strategies used in the classroom for the child, and collaboration with others to support service delivery. Includes instructional strategies used to individualize or engage children in program activities.
Formal Education and Training	Includes formal education at college or university, internships, student teaching, observations, and coursework.
Background working with children	Includes work with all children in general education classroom, volunteer, babysitting, family, or job experience.
Personal experience with children with SEN	Includes work with individuals with disabilities or special needs, special education, or inclusive classrooms. Includes volunteer, babysitting, family, or job experience with individuals with disabilities.
General Strategies for children	Not specific to children with special education needs, but strategies used for all children.
General Strategies for families	Strategies used to engage all family members and parents, not specific to families with children with special needs.

Table 5. Codebook with Definitions (cont.)

Code	Definition
Diversity (cultural, linguistic, ethnic, or socioeconomic) in classroom/program	Examples of providing support for diverse families including accommodations or modifications. It also includes examples of classroom materials used to support diverse classroom environments.
Peer Interactions	Strategies to promote inclusive environments for children with special needs, promoting acceptance from typically developing peers, or preventing bullying of children with special needs.

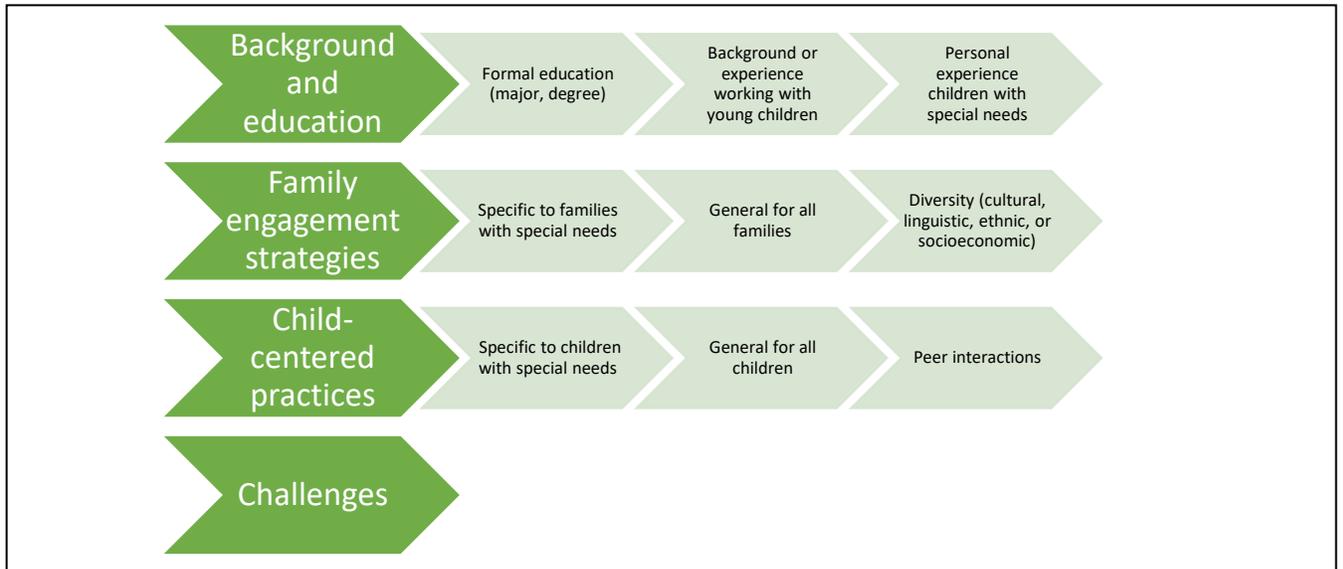
Throughout this process, the DSR recorded notes in a reflective journal and through research memos shared with the research team. When all transcripts were coded, the research team identified trends and any areas that had more than one code. This process identified overall themes and grouped codes into larger themes. Broad themes shared by ECEC professionals (individual codes) were used to generate meaning within larger patterns and themes across interviews (Leavy, 2017; Olsen et al., 2016; Savin-Baden & Major, 2013).

Commonalities among participants include strategies implemented and challenges ECEC professionals encounter when providing educational and developmental services for young children with special education needs and their families. All professionals from the United States and China, regardless of educational background or current role, emphasized the importance of building and nurturing reciprocal relationships with family members and young children with special education needs. ECEC professionals in China and the United States shared the importance of communication with families, various modes of family participation, and instructional strategies used to individualize services for children and their families in ECEC

programs. Based on the information shared in the interviews, four themes emerged. ECEC professionals discussed (1) Training, Background, or Personal Experience in ECEC (2) Family Engagement Strategies, (3) Child-Centered Practices, and (4) Challenges to Inclusive ECEC.

Figure 1.

Condensed Coding Scheme



Data Quality

This study implemented five strategies suggested by Brantlinger et al. (2005) to support credibility and trustworthiness in the data collected and the conclusions of the study. Collaborative work took place between the research team throughout data collection and analysis in order to support conclusions that are not biased and findings that are accurate based on interrater reliability. Multiple efforts were made to triangulate data collected for credibility (Leavy, 2017). First, data triangulation was employed by using multiple sources of data to support findings. Second, investigator triangulation was in place with multiple investigators and the use of peer debriefing throughout data collection and analysis. Additionally, multiple levels of member checks were used to establish trustworthiness in conclusions. The first level of

member checks included transcription checks by respondents and the second level of member check will include sharing findings with participants to conduct interpretation verification of conclusions reached by the researchers. Thick, detailed descriptions will be shared in reports, including quotes and research notes in order to provide adequate detail and describe findings. Disconfirming evidence, themes, and categories which are not consistent with other findings will also be shared when reporting findings and conclusions to establish credibility and trustworthiness (Brantlinger et al., 2005).

Ethical Considerations

This study implemented qualitative methodology to collect information from professionals working with young children with disabilities and their families. Therefore, the research team took many steps to ensure that ethical standards in research were upheld. Multiple strategies were in place during data analysis to validate findings including triangulation by comparing perspectives of multiple participants, and through presenting discrepant information that contradicts themes to share individual perspectives that may not align with overall findings (Creswell, 2014).

To prevent ethical issues within data collection, the research team was proactive in explaining the role of the researcher during informed consent procedures (King, Horrocks, & Brooks, 2019). Anticipated ethical issues included the role of the researcher in cross cultural research; building trust with participants; respecting cultural norms and treating each participant equally; and ensuring the privacy and confidentiality of the data collected (Creswell, 2014). Efforts were made by the research team to protect the rights and minimize risk of all participants (King, Horrocks, & Brooks, 2019).

Findings and conclusions from this study will highlight quotes and detailed descriptions of experiences of individual ECEC professionals when engaging with family members of young children with disabilities (Creswell, 2014). Insight into the experiences of ECEC professionals when working with parents of children with disabilities can be valuable to administrators, policy-makers, and professionals and parents of children with disabilities (Creswell & Poth, 2018). However, this study does have limited generalizability as this is not the purpose or intent of qualitative research methodology (Creswell, 2014).

Qualitative methodology and interviews do have limitations based on the nature of data collection (Creswell, 2014). First, the interviews could be influenced by the presence of the researcher (Creswell, 2014). The information collected through interviews could also be limited based on the ability of the participant to explain and provide examples of their professional practices (Creswell, 2014). Finally, the interviews might not capture the actual practices of participants, as interviews are an indirect data collection method when compared to observations of actual practices (Creswell, 2014). Future studies could include direct observations of ECEC professionals' interactions with family members of children with disabilities in the ECEC setting.

Significance of Study

Given that the field of early childhood education and care has expanded while becoming recognized as a profession, there is a need to establish a research base on professional practices and caregiving standards that promote the inclusion of very young children with special education needs and their families in ECEC settings. While there is evidence on the positive outcomes for young children with disabilities participating in inclusive ECEC programs (Bergen & Hardin, 2013), research is currently emerging on international initiatives to promote early

childhood special education and inclusive practices on a global scale. There are also recommendations for professional practices within early childhood education and care, specifically focused on early childhood special education, however the evidence on how these practices and strategies are implemented in ECEC classrooms worldwide is lacking.

This study will attempt to gather information on the strategies ECEC professionals use to engage family members of young children with special education needs in the ECEC setting. The goal of this study is to examine practices used by ECEC professionals in China and the U.S. to gain an international perspective on parent engagement and to compare culturally-relevant practices used by professionals when supporting children with disabilities and their families. When we know the strategies that are being used by ECEC professionals to engage families of young children with disabilities, we can provide recommendations for professionals and policy makers that can positively impact the experiences of families in ECEC settings and the outcomes for young children with disabilities that participate in ECEC programs. Gaining an understanding of the family engagement strategies that ECEC professionals are using or are *not* using can guide professional development opportunities that can impact future practices implemented in the ECEC setting. Pre-service preparation programs and in-service trainings can be developed to support the implementation of recommended and evidence-based strategies to fully engage family members of young children with special education needs in their child's educational and developmental services.

When developing policy and practice guidance for ECEC programs, experts can use the findings of this study to support the need for additional training and funding for inclusive ECEC professional development. Policy recommendations based on this study could include specific culturally responsive strategies that can be used by ECEC professionals across ECEC settings to

promote family involvement in inclusive educational programs. Through improvements in practices implemented in ECEC programs and explicit, research-based strategies promoted in ECEC policy, children with disabilities and their families could have improved experiences and reach targeted outcomes. This study aims to fill the gap in the international comparative research in ECEC programs and policies related to family engagement and professional practices in early care and educational settings. This study will contribute to the research base and highlight specific professional practices used by ECEC professionals to engage families in their child's developmental and educational services. Understanding how early childhood education policy and practices are implemented by professionals in the field can lead to additional efforts in teacher education, identifying evidence-based best practices, and policy recommendations for other nations as they develop early childhood education and early childhood intervention systems.

Chapter Four

Findings

This chapter will examine international ECEC professional's shared experiences and barriers or challenges when working with children birth through eight with special educational needs and their families. Similarities in professional practices, including family engagement strategies, child-centered practices, and collaboration with other professionals will be discussed. Challenges and barriers to providing inclusive ECEC programs and services in China and the United States will be highlighted. Although ECEC professionals in the United States and China reported many professional practices that are common in both countries there are cultural and systematic differences within inclusive ECEC programming that will be discussed.

The goal of this chapter is to illustrate similarities and successful practices ECEC professionals use when working with families and young children with special educational needs by sharing direct quotes and examples from interviews with ECEC professionals from China and the United States. The focus of this discussion will be on ECEC professional's background and training, family engagement strategies, child-centered practices for children with special education needs, and challenges to supporting children with special education needs and their families. ECEC professionals in China and the United States did discuss strategies used with all families and children, not specific to children with special education needs, which will be highlighted as necessary.

Training, Background, and Personal Experiences (R1)

Professionals working directly with children with special education needs and their families reported a wide variety of career pathways, educational backgrounds, and perceptions of preparation based on their formal education and training.

Limited Formal Training in Special Education

The majority of ECEC professionals did have a degree related to early childhood education or preschool education, four professionals in China held degrees in Early Childhood Education and Preschool Education and six professionals in the United States had degrees in Early Childhood Education or related fields. Ten professionals in China held teaching certification, which is obtained upon completion of undergraduate degrees in education. However, fewer had specific training in special education or early childhood special education (CHN = 5; US = 3). ECEC professionals described a variety of pathways into the field, including two professionals that discussed having previous careers outside of the field of education. These professionals had undergraduate degrees in management and computer science but obtained Master's degrees in Special Education.

ECEC professionals in China and the United States reported additional training from community or government organizations. In China professionals reported working with the regional “Disabled Persons Federation” and in the United States professionals reported working with the regional “Area Education Agency” for on-going training in ECEC and ECSE. Some professionals had additional certificates, licenses, or training specific to working with children with special educational needs, for example, three professionals in China were trained in Applied Behavior Analysis, Play Therapy, Parent-Child Interaction Therapy, or Pivotal Response Treatment. Seven professionals held teaching certificates or licenses through the Disabled Persons Federation. Professionals in China also reported having certification to work with young children with autism, training in VB-MAPP (Verbal Behavior-Milestones Assessment and Placement Program), the ASQ (Ages and Stages Questionnaire) and AEPS (The Assessment, Evaluation, and Programming System). In the United States, one professional

reported training in Applied Behavior Analysis (ABA). Four professionals in the United States had additional training or certification in infant mental health, reading, general education, or nursing.

Required Coursework. ECEC professionals in this study had a range of career pathways and educational backgrounds. When discussing pre-service preparation, professionals mentioned specific course work that supported their current work with young children with special education needs and their families. Half of the professionals indicated that pre-service coursework did not fully prepare them for working with families of children with special education needs (CHN = 7; US = 4).

Professionals reported having completed coursework in child psychology, child development, mental health, family communication, methods/pedagogy, developmental and educational psychology, assessment, and early intervention during their formal degree programs. One professional working on their Associate's degree in ECEC mentioned that coursework specific to working with young children with disabilities was an elective, but they felt it would "be good to have." She also noted disability education was discussed in many of her classes. (US10)

Professionals voiced differing opinions on how formal education and coursework prepared them to work with young children with special education needs and their families. One professional with a Master's degree in social work said

As I went through my education, learning how to assess families and ask all the questions that need to be asked, in various different ways to find the answers that you're looking for, especially in a time of crisis. I think that the school prepared me very well for it. (US9).

The same participant noted that her formal education “prepared me very well for working with families, but to specify medical needs or developmental needs, very minimum, maybe one class for developmental in undergrad.”

Similarly, a professional in China with a Master’s degree and teaching certificate stated, I have not received pre-service preparation to work with children birth to eight with special educational needs and their families and have not been taught how to educate children with special needs. This topic was only mentioned a few times when I was a graduate student. Since I study Primary Education, I am not really familiar with Special Education.

Likewise, a professional in China reported,

I did not receive any pre-service preparation or formal education that prepared me to work. I learned more about methodologies and theories of special education. Therefore, I have not received any pre-service preparation.

Another ECEC professional in China noted the need for additional coursework in special education in higher education, “graduate schools in mainland China have not provided enough special education courses.”

Professionals in the United States and China reported their formal education did not help them feel fully prepared to work with young children with disabilities and their families. According to one ECEC professional in the United States, regardless of educational backgrounds “a lot of times teachers feel like they don't know something, they don't have degrees.” (US4) Despite holding degrees and teaching certificates in preschool, primary, or general education, professionals reported few courses related to working with children with special education needs.

Limited Exposure to Working with Children With Special Needs Prior to Entering Profession

ECEC professionals reported limited experiences working with young children with special education needs and family members before entering the field. During formal educational experiences, some professionals reported participating in classroom observations, student teaching, and volunteer experiences. However, a common sentiment from teachers related to the importance of hands-on experiences in the classroom or working directly with children and families. For example, a primary school teacher in the United States shared, "You can read all the books, I did all the classes, but what really prepared me was getting out in the field.... I think getting into the classroom, actually seeing what goes on, is really much different than the textbook." (US3)

Based on the limited formal training in special education and the prevalence of children requiring individualized education plans in the United States and China, professionals reported most of their specialized training to support children with special needs occurred during their student teaching, first classroom teaching position, or from outside experiences. Twenty-one professionals reported having personal experience with individuals with disabilities in their families, schools, or communities. Some professionals reported having a family member, close friend, neighbor, or classmate with a disability or special educational needs which propelled their interest and abilities in working with individuals with disabilities as a career.

Ongoing Professional Development

One major finding throughout interviews was the importance of on-the-job training and in-service training to support professional's knowledge and skills when working with children with special education needs and their families. Professionals in China reported working with international experts from the United States and Japan. Professionals in the United States and

China both reported participating in lectures or in-service training from experts in the field of early childhood education or special education.

An ECEC professional in the United States, currently working in inclusive early childhood programs shared,

To be honest, I don't think that they [formal education] prepared me. I remember chapters in books talking about what's developmentally appropriate, but I don't feel like formally that I got a good footing and understanding. It's all been practical experiences with families or children. That has been a big part of my education. And also attending trainings locally and national trainings, also, to understand looking at policies and procedures and how they impact locally. (US4)

Similarly, a primary teacher in the United States discussed self-guided learning and taking the initiative to learn more about how to best serve young children with special education needs and their families, stating, "I look for articles, journals. I reach out to our Area Education Consultants." (US3).

Shared Experiences of ECEC Professionals in China and the United States (R2)

ECEC professionals in China and the United States discussed many strategies used in ECEC programs that support family participation and promote children's development. Common practices for family engagement included family focused events, parent education programs, parent committees, and on-going communication between families and professionals. Strategies for individualizing services based on the needs of the child and family preferences were discussed by professionals in the United States and China. Professionals also reported challenges to communication with families. Professionals in China and the United States shared common challenges and discussed barriers to provide inclusive ECEC programs and services. This section

will focus on the shared and common experiences of ECEC professionals in the United States and China.

Family Engagement Strategies

Parent participation and communication, while taking many forms, was a key theme within interviews with ECEC professionals in China and the United States. In China and the United States, most professionals reported that parent participation was not required in program guidelines or regulations. In the United States, two early intervention therapists explained the program was voluntary and families could 'opt-in or opt-out' of services for their child (US5). A special educator in China working with children under seven years old with Autism reported that parents of all children accompany the child in the classroom. However, this seems to be dependent on the policies and practices of individual organizations. A social worker in the United States described the importance of having flexible approaches to family participation stating,

We find that our expectations may be different for different families. And so it's very hard to, to create guidelines also because every family and every situation is so unique and different, you know, your, your family with this is their first time baby is going to be looking a lot different than another family who has, you know, 2, 3, 4 kids already at home. Or they have other social barriers. So I part of me is like, yeah, I really wish we did [have a policy]. But then the other part of me is like, Well, I'm glad that we don't because we can't have a cookie cutter answer. We can't have the same expectations for every single family because it wouldn't be realistic.

Family Participation. Across the variety of programs and settings examined, only a few professionals interviewed reported formal requirements for parent participation. One early

intervention therapist in the United States talked about the lack of parent participation during home visits with families,

When I go into a home a parent is not always able to sit in on the session. You know, they're either doing something else or they have another child they need to tend to. There're very, very few families where their parent actually sits in session. (US8)

For children with special needs in the United States and China, parents and professionals held required planning meetings to create IFSP, IEP, or other instructional planning documents. It is important to note, in China, children's developmental and educational plans were also referred to as individual education plans (个别教育计划) (IEPs). An ECEC professional working in an inclusive program for young children with autism in China explained how IEPs are developed, "Based on the special needs of children, teachers make different educational plans. This is called individualized education. It provides special needs equal educational opportunities." (CHN4)

Family Focused Events. For all families, professionals discussed open houses, parent educational events, family-fun nights, and parent conferences as needed. One special educator in China working with children with autism and their families shared that the agency organized trips to the zoo, community events, and meals provided at no cost to the family (CHN12). Another ECEC professional in the United States discussed many enrichment activities for the families, including cooking classes, Zumba, and family fun nights (US2). Providing parent training or parent education events to inform families about programs, services, and strategies for young children with special education needs were held at the ECEC program or community level in China and the United States.

Parent Education Programs. Parent education, or providing developmental information and training for family members, was also reported as an important task for ECEC professionals when supporting families with young children with special education needs. An early intervention provider in the United States noted,

We don't realize that we're teaching families as well. We don't look at parents as adult learners, but they really are. We look at family involvement. We look at family engagement. But we really haven't addressed their adult learners and what needs to happen for them to help them. (US5)

In China and the United States, professionals indicated that parent education and information sharing related to disability can be challenging and lead to conflict within the family-professionals relationship. Professionals reported using resources, such as the program director, websites, or videos to share developmental information with families based on their understanding and level of need for support. Professionals described collaboration with other professionals, such as speech therapists or occupational therapists when developing individual education plans for children.

When working directly with families to support their child's development at home, several professionals in China and the United States talked about teaching family members strategies, techniques, and activities to practice at home. Some professionals even referred to this as 'homework'. Other professionals described their role as an expert, but the parent was the implementor,

Some providers come at it, "We're the experts. We need to tell the family what they need to do, and we're going to do everything we can to make sure that they do it."

I come from the background of, "Yes, I'm the expert. Yes, I can give you the

recommendations. I can give you the tools. I can give you the strategies. It's up to you to actually implement them.

Parent Committees. Professionals in China frequently discussed parent committees (N = 8) within the early childhood center which would provide classroom support for teachers, share resources, make recommendations, and host events. However, parent participation seems to be dependent on the policies and practices at individual organizations, as one Special Educator in China reported there was no parent committee for their program (CHN10).

Family Communication. Professionals reported communicating with families in a variety of forms. Forms of communication between professionals and families included on-going, face-to-face communication, and electronic communication through text, email, and apps. On-going and daily communication with families was reported by most professionals and appeared to be a common and valued strategy for family engagement in their child's educational or developmental services. One special educator in China said

Our teachers are very warm-heart. When school is over, teachers always talk with parents and warmly tell parents about children's performance. When we pick children up at the school entrance, we always greet children and parents as well. I think parents can feel our enthusiasm.

Similarly, a social worker in the United States noted, "the biggest part to all of that is just communicating with the family as well. The family is absolutely a part of our team. We couldn't do what we do without their input."

Professionals described a variety of methods for family communication, including when families enroll or enter the program, on-going direct communication, electronic communication, and required family meetings such as parent-teacher conferences or IEP meetings.

Intake, Assessment, and Enrollment. Professionals in China and the United States discussed conducting family assessments and child-centered evaluations along with parents and other professionals to determine the family and child's needs, family priorities, and service delivery. Special educators in China and the United States described completing evaluations and creating intervention plans with family input (CHN11; US5). Professionals in China and the United States reported completing family and child assessments when the child enrolls in the program (CHN12).

On-going, Direct Communication. Professionals in the United States and China reported relying on electronic communication with families, such as using e-mail, WeChat messages, WeChat and Facebook groups, and apps such as Tadpoles™ or ClassDojo. A special educator in the United States describes sharing daily progress reports for families based on their child's IEP goals. One special educator in China described communicating with families using videos to demonstrate techniques for the family to try at home. Classroom teachers in the United States described using portfolios to document children's development. Educators in the United States and China described using developmental checklist to communicate with families on their children's developmental progress. Professionals also described providing families with activities to support their child's development at home, such as blowing bubbles to build muscle tone (CHN9; CHN11).

Family Meetings and Conferences. In China and the United States, most professionals reported that parent participation was not required in program guidelines. In China, one ECEC professional stated, "I found no matter special education schools or typical schools, they do not have official guidelines for parent's participation and involvement in the program."

Some professionals reported annual or bi-annual conferences with families. Two special educators in China reported communicating children's progress with families through 'monthly summaries' while four professionals in China reported communicating with families on a weekly basis. A professional in the United States working in an inclusive early childhood program reported that in their organization, a 30-day, 60-day, and 90-day family follow up is required. For children with special needs and their families in the United States, there are federally required team meetings to discuss and determine services provided in the IEP which must include the family. Professionals in the United States recognized the importance of having families present and actively engaged in planning for their child's services. When discussing IEP planning with one primary school teacher in the United States, she explained,

I always tell parents from day one, "This is your plan for you, your child, and your family. So this is not something that's completely set in stone. If you want to add, change or delete at any time, all you have to do is tell me and we will take care of that. If for whatever reason, Medicaid will deny you a service, I will be more than happy to go through the process with you, to do a grievance, a local appeal, or whatever it is we have to do to be able to get that approved because that's what you want for your child. (US3)

Professionals in the United States reported holding IFSP or IEP meetings at least annually, with quarterly progress reports provided to the family.

Challenges to Family Communication. Some professionals in the United States and China felt that in their role, they did not have the authority to discuss developmental concerns with the family. Teachers reported that the early childhood center director, principal, or their boss would be responsible for communicating with families regarding developmental goals,

concerns, or referrals to specialized services. When professionals need to report on the child's development or have developmental concerns for the child, this can be an area of contention and lead to challenging conversations. Professionals in the United States and China reported that teachers will avoid the topic of developmental concerns out of fear of the family's reaction. Professionals also reported supporting families in realizing the impact of their child's disability on their life trajectory and helping the family 'accept reality'. One special educator in China said,

We will know parents' goal in order to help to alleviate parents' anxiety... Actually, some autistic children cannot live independently for whole life, but their parents hope they can get normal situations or attend regular school. Honestly, it is impossible. Therefore, we will help parents change this idea and accept the reality.

(CHN12)

Similarly, a social worker in the United States noted,

We know that families only retain about 20% of what we tell them initially. And so we have to tell them over and over in various different ways for them to grasp the big picture of what's going on and for them to understand the care of their baby and what the future looks like. (US9)

Having an accurate understanding of their child's disability, educational needs, and instructional strategies are critical for families to fully support the inclusion of their child with special education needs at home, school, and the community. It is important for families to have complete information regarding their child's needs and programs that will best meet those needs. Families can best advocate for their child when they have complete and accurate information from professionals working with their child in ECEC settings.

Collaboration with Other Professionals. Professionals in both China and the United States explained the importance of collaboration with other professionals, such as other teachers, program directors, therapists, and family support resources in the community. Professionals working with children prior to entering primary school also partnered with the local public schools to support families as they transitioned into formal educational programs. A social worker in the United States noted,

I think just having open communication between everyone and being open to everyone's thoughts, as a part of the team to support this family is huge for us. And I feel like that is our time to think outside the box when we're focusing on that baby in that family specifically to say, Okay, is there anything else that anyone can think of to support that family or to get this baby set up with resources. (US9)

ECEC professionals in some programs reported having related service professionals within the program that provide family support, individuals in these roles often take the lead to build relationships with families and connect families to additional resources. These professionals take on titles such as Parent Support Partners (US2), Family Liaisons (US8), or Family Support Specialist (US5). Professionals in China described family support provided by the Disabled Person's Federation, including financial support for families when they had a child with a disability or special education needs.

Some professionals worked in programs that offered additional supports for children and families. Wrap-around services provided for families included psychological services (US2; CHN9; CHN12); crisis intervention services (US2); parent-child psychotherapy (US3), parent-child interaction therapy (CHN13; US3), and home visiting programs (US5; CHN1; CHN13).

When providing additional educational, developmental, medical, or family-based support, collaboration between professionals is essential, one professional noted, "As a teacher, we try our best to collaborate with parents and doctors." Similarly, a primary school teacher in the United States explained, "I work very closely with their special education team and their special education associates. I am constantly asking for feedback from them, what else can we do, or what we might do better." (US3)

Relationship Building. Professionals emphasized the importance of building relationships with families in ECEC settings. DEC's Position Statement on Family Culture, Values, and Language (2010) suggests that "Responsiveness grows from interpersonal relationships that reflect a mutual respect and appreciation for an individual's culture, values, and language." (p.1)

A primary school teacher noted, "I build relationships first. My personal philosophy is education, academics, are not going to come unless that relationship is built." Similarly, a social worker in the United States shared,

When I work with the families that are in my initial assessment with them, part of the assessment is asking spiritual needs, religious needs beliefs, identifying any differences regardless of who they are, how they identify themselves. Every family has their own story and every situation and dynamic within every family is different.

In China, professionals described forming relationships with families and children with special education needs through parent-teacher conferences, home visits, resource sharing, and collaboration. One relationship-building strategy shared by an educator in

China is a program-wide called "Hearts are Linked Together" to support the children with special education needs and their families.

A special educator in China shared,

As for family, it is important to have frequent communications with parents. We need to understand parents' needs before helping these children to have a better development. Yes. I would like to say understanding and acceptance are the key to show respect.

Child-Centered Practices (R2)

Professionals in the United States and China also discussed practices used to support the needs of children in their programs. These strategies included understanding children's unique needs and abilities, individualized instructional methods, and encouraging learning through play. Professionals in the United States and China mentioned the importance of equity and equality for young children with special education needs in inclusive programs and community-based services. Professionals agreed that recognizing the individual needs of young children and supporting individual goals for children was a critical role for ECEC professionals in inclusive programs. One ECEC professional in China noted,

As a teacher, I think it is important to respect every child because each child has his or her own development process. If one child does not have good academic achievements or performs poorly in one field, teachers should believe this child is making progress, or believe the child will become better under the guidance of the teacher. In this process, teachers need to respect every child and be patient. (CHN3)

Individualized Instructional Strategies

Professionals reported using differentiated instructional strategies for meeting the needs of diverse learners in their programs. ECEC professionals in China and the United States discussed the need to be aware of children's individual needs based on their abilities and goals. A professional in China described the individualized instructional approaches as "different conditions, different methods" (CHN13). Another ECEC professional in China elaborated on this concept by sharing that "teachers will make different curriculum plans and use different educational materials based on students' situations." (CHN4) Similarly, another ECEC professional in China noted, "To an extent, we have autonomy to decide our teaching proposal according to children's interests and situations." Additionally, several professionals in China highlighted the importance of incorporating each child's interest into instructional strategies, one special educator said "it is crucial to realize a child's special hobby. Such a special hobby is an excellent opportunity to intervene." (CHN13)

An early interventionist in the United States explained how they incorporate learning through play to support individualized instruction and goal setting, sharing,

I use a play-based approach. I look at typical child development, I look at the child's age, I look at their skill level, and I come up with, in my head, what are appropriate expectations for the child? I adjust the support and the strategies accordingly. So I work a wide range of needs and strategies. So it's all individualized.... I'm going to pick up on their cues and tell me is it going to work or not work? (US5)

Professionals in China described how they develop individualized learning activities and goals for children based on 'capacity'. Multiple ECEC professionals in China used the

terminology, “high capacity” and “low capacity” to describe the individual learning styles of children with special education needs. A special educator in China explained,

We will design the activity to reach different children’s goals. For example, we arrange a shopping activity. If a child has low capacity, it is okay that the child can participate in this context. But for some children with high capacity, they should finish more complex goals. If a child’s capacity is very high, we will let the child do some behaviors like payment. To sum up, it depends on children’s capacities. (CHN12)

Similarly, ECEC professionals in the United States also described individualizing instructional strategies and goals for young children with special education needs based on unique needs or characteristics. A primary grade teacher shared this example, “For another student who has special needs, maybe anxiety, instead of doing five questions they’ll do two. Instead of writing their answers, they’ll dictate to someone.” (US3)

Equal Access and Equality

ECEC professionals in the United States and China suggested that inclusive ECEC programs intend to treat each child in their programs with respect and provide services grounded in equality. Professionals in China and the United States shared strategies used to promote equal access to participation in programs and services designed for young children with special education needs. For example, a special educator from China explicitly stated, “We regard children equally.” (CHN10) Additionally, ECEC professionals in China noted, “For classroom materials, most materials are same.” (CHN4) and “Our teaching materials are unified” (CHN3). Another ECEC professional in China elaborated, “We have a lot of kinds of textbooks, but we will set goals based on children’s individual characteristic.” (CHN10)

Similarly, in the United States, ECEC professionals recognized the importance of equality in services for young children with special education needs. A social worker explained, "Every situation is looked at and we treat every baby equally and they receive the same care by the same providers that they may need and/or more providers because of those identified needs... We treat every family equally and provide them all the same opportunities as the family next door. (US9)"

Overall, child-centered practices and individualized instructional methods were valued among ECEC professionals in the United States and China. One ECEC professional from the United States highlighted the need for child-centered philosophies within programs, services, and communities, explaining, "I am a huge, big advocate for children, because children can't speak for themselves."

Barriers and Challenges to Inclusive ECEC (R3)

Professionals explicitly described barriers and challenges faced when working with young children with special education needs and their families. One ECEC professional noted that "most obstacles for children with special needs are posed by our society, rather than their disabilities." (CHN5) Barriers to inclusive education in China and the United States included the priorities of general education, acceptance of children with special education needs in general education settings, cultural and societal barriers to fully inclusive practices. Professionals reported few initiatives to build awareness of programs and services within the community or targeted for families of young children with special education needs. Challenges to inclusive ECEC in China and the United States included funding challenges, resource disparities, and the heavy workloads of professionals in inclusive ECEC programs.

Barriers to Inclusive ECEC

An ECEC professional in China noted in their experience,

The schools that I have approached seem to pay less attention to children with special needs. Since there is only a small number of children with special needs in these schools, there are not many facilities and well-trained teachers to accommodate their needs.

Additionally, the supports needed to provide an inclusive environment must also focus on acceptance and understanding of children with disabilities in the classroom as one professional in China noted in her experience, “the classroom environment was not friendly to special needs children. I think this child was not happy in the normal school because people around this student did not accept and understand him/her.” (CHN12)

Another ECEC professional in China mentioned, “even though every child has an IEP, the teacher still pays more attention to some particular children.” Similarly, another ECEC professional in China noted the individual differences between inclusive programs for children with special education needs,

The quality of the education that special needs children received in the normal school highly depends on teachers and classmates they have. Teachers and classmates may be friendly, lovely, and inclusive. If not, students with special needs will have a hard time staying in the normal school. (CHN3)

An ECEC professional in China noted, “there is no specific policy to make sure special needs have equal access and equal opportunities to all the resources and services in the school.”

Another ECEC professional in China noted, “In China, inclusive education has many barriers to

development. In our school, the number of regular children are decreasing. So, I think my school will be fully filled with special children at last.” (CHN9).

Cultural or Societal Barriers. Barriers to inclusive ECEC programs and services could be rooted in traditional Chinese culture and beliefs about family, disability, and the purpose of education. An ECEC professional in China described the social stigma that can be related to having a child with a disability,

Upper-class families tend to send their special needs children to typical schools and not special education schools. In China, even though many special education schools are established, there is a social stigma associated with these schools. Parents would only send their children to a special education school when they ran out of options, but when their condition seemed to improve their parents would transfer them to a typical school. But the kind of support that typical schools can provide for these children is close to none, I think. It may be better in developed cities like Shenzhen and Shanghai, but in Chongqing and Sichuan it is not as good; this aspect is not considered in educational materials.

Another ECEC professional in China expanded on the idea of parents and family preferences for education in normal or traditional schools, “The teacher said the parents of this student did not want their child to go to special education school. They wanted the child to stay in normal schools and grow up with non-special needs students.” (CNH12)

Similarly, an ECEC professional in China noted,

A teacher in kindergarten or early childhood center, they sometimes afraid to connect with parents. In China, parents' requirements are very important. And then sometimes they afraid to make some mistake or maybe something misunderstood

make parents angry or something so they do less, they do less family support things.

(CHN 7)

In the United States, one professional noted conflict between family members and professionals can be difficult to manage, “Usually what I find is a lot of parents just get really angry at the teachers, and the teachers get angry at the parents, and they just don't want to talk to each other.”

One ECEC professional in China described the challenges of implementing inclusive ECEC programs,

In Mainland China, support for children with special needs is still not enough. Currently, the situation is that more and more parents tend to send their children with special needs to normal/traditional school. However, teachers and parents who are from normal schools are not willing to accept children with special needs in most of the time. So it is not real inclusive education.

An ECEC professional from China noted that inclusive ECEC systems are “not well-established and is not a mature system.” (CHN4) The same ECEC professional goes on to expand on the inclusive ECEC system and situation in China,

In my opinion, there is a long way to go to achieve real inclusive education. Meanwhile, many special education schools are being built. In the future, parents might send their children with special needs to the special education school, when they do not have other choices.....In a word, I think inclusive education is a long and slow process, which needs support from various circles of society.

A special educator in a rural area of the United States explained that for some families, “School is not a priority, in a lot of those households, so basic needs is where they're at, most of the time.” (US7)

A professional in China noted the lack of resource sharing between professionals and families,

If someone needs information about medical care or psychological consultation, we are difficult to provide related information. Actually, we have no idea about which hospital is better. Even though we can make a list of excellent hospitals, it is improper to offer this list to the parent. This is an embarrassing point.

Challenges to Inclusive ECEC

Funding Challenges. A social worker in the United States noted that "funding is very minimal" for programs that serve infants and toddlers with disabilities. Families with children with special education needs in China could receive financial support from the Disabled Person's Federation (CHN10; CHN9). In the United States, one professional described confusion around changes in the state-funded, community-based support funding provided for families of young children with disabilities (US5). The special educator also discussed the impact of funding for direct services for families and children based on their insurance status. When determining community resources and services available the professional reported asking themselves,

I will find out, are they accessing other state programs, other state funds? Who's the case manager? Are they going through insurance or private pay, rather than relying on funding sources? Do I need to go to another professional and make a referral to another agency or another professional? I feel like it's my own due diligence to keep up with any of those changes. (US5)

An infant-mental health specialist in the United States described the different hours of service delivery required by Medicaid for children and families compared to private pay or families with private insurance.

ECEC professionals in the United States and China recognized and were personally impacted by inadequate funding provided for inclusive early childhood services, a primary school teacher in the United States illustrated the impact of the lack of funding, by stating, “A lot of times, I buy stuff with my own money to take over there if a family doesn't have crayons or even just a pad of paper.” Similarly in China, a special educator noted, “Government will give us some financial support, but it is insufficient.”

Resource Disparity in Urban and Rural Areas. An ECEC professional working in a rural area of the United States noted, “We really don't have a lot of resources available in our direct area. Pretty much everything is in [larger regional cities often associated with universities].” (US3) While an ECEC professional in a suburban area of the United States mentioned, “I, fortunately, work in a county where there are numerous resources. We have more private agencies that are opening to help meet the needs of our families.” (US5) Similarly, a special education professional in China noted similar disparities in services and resources,

I feel that conditions are different in areas. For example, our mainland is different from Taiwan. Some factors, such as cultural and economic, make these divergences. In developed cities like Beijing, Shanghai, the government is prone to invest more resources to support special children.

Another special educator in China noted the urban and rural disparities, stating “In China, municipalities like Shanghai, Chongqing have more resources to develop special schools.” (CHN9)

Another challenge faced in rural areas is access to services. One special educator in a rural area of the United States highlighted the challenge for families to access services based on the need for transportation, noting

Our school is kind of on the outside of town, which is a huge disadvantage for a lot of our families. Not easily accessible, a lot of families have to take two buses to get there. So, it's a struggle. And we've talked about doing other events and getting the school the more convenient location. It's just a time process, obviously. So, yeah, it's tough.

On the other hand, a social worker in an urban area of the United States reported providing transportation and even taxis for families to access appropriate services for their child.

Heavy workload in inclusive ECEC. ECEC professionals illustrated many examples of the multiple responsibilities related to early childhood special education. Professionals in the United States and China described the complex instructional decisions made when practicing inclusive education. Professionals discussed the time required to individualize instruction, a professional in the United States raised this concern, stating,

How can I do that and then fulfill the needs of my other children? That's the other thing is the accommodations for one child within a group setting sometimes the teachers get upset or scared or worried, or the program does, and trying to figure out how we can manage all of those three components of need. (US4).

One ECEC professional in China noted the challenge for general educators to meet the needs of all children in the class and the difficulty for teachers to maintain a positive attitude towards students that need additional support in the classroom,

Speaking of subject teachers' attitude towards students with special needs, most of the time they would just give up on these students, which is unfortunate but also understandable at the same time because there are tens of students in each class and the teachers have to take care of many different aspects. Therefore, I think this problem cannot be solved easily. It is not quite possible for teachers to have to also tend to the needs of students with special needs.

Professionals also described the challenges related to meeting the diverse needs of families within the program. One professional in the United States discussed the importance of recognizing different family's expectations for their child and the professional relationship based on the family's cultural background. Another professional in the United States shared challenges faced when trying to navigate and negotiate cultural expectations between families and collaborating professionals. A professional in China explained, "Since each child are from different families, grow up in different environments, and get different family education, their behaviors in school and academic achievements are not the same." (CNH3)

One special educator in China described her organization as unique in the professional's ability to collaboratively discuss and determine the best interventions and strategies for young children with special education needs and their families. She described a collaborative environment within her program, however, she emphasized that this is not always true in every program while some might follow a more 'rigid order' (CHN11). Similarly, an early childhood special educator in the United States explained,

I think there's a mutual respect and exchange of information, then I don't think families are offended when you ask those kind of questions. I think really just communicating with them, and making sure that they understand, and let them

know that it's okay that I might believe this, but you believe this, but it's your child.

So we need to work with what's going to work for your family.

This type of information sharing and collaboration between professionals and family members is critical to providing appropriate family-centered services in ECEC programs.

When considering what professionals need to do to support a child with special education needs in their program, one professional in China recognized this challenge posing the dilemma,

To be honest, teachers need to care for thirty children in a class. Although they will help these special children, they might feel tired if they cope with too many special needs. This aspect is related to how the regular school manage and care special children. In my opinion, the school gives insufficient support to teachers. All affairs depend on teachers. If a class has no special children, the teacher will feel better. If a class has some special children, it might have an negative impact on class's order and teacher's energy. So, in reality, I think the regular school in China need more support about caring special children, although some appeals have emerged.

Professionals in the United States and China recognized the need for additional personnel, resources, and funding for ECEC programs that serve children with special education needs and their families. An elementary school teacher in a rural area described how the lack of funding prevents her school from providing adequate resources and support for children with special needs,

As far as in the school, I think that is a huge deficit in our area. We do not have enough help, I feel like right now. We go legal wise, we make sure that we're legally covered as far as adults to children, but I just think there's got to be more that can be done, but it's all financial. (US3)

The intensity and demands of the responsibilities of ECEC professionals can lead to increased turnover of staff within ECEC settings, as noted by one ECEC professional in the U.S. Through these examples of barriers and challenges, ECEC professionals illustrated the systematic difficulties faced by professionals, families, children, and communities when attempting to provide inclusive ECEC programs and services. Cultural and social stigma, family preference, the academic focus of regular education programs and acceptance of children with special education needs in general education settings, inadequate funding, resource disparity, and the heavy workload of professionals in ECEC present unique but common challenges within inclusive ECEC systems in the United States and China.

Discrepant Findings

Exploring similarities in family engagement strategies and child-centered practices also revealed differences in ECEC professional practices based on the educational system and cultural context in the United States and China. In qualitative, educational research it is critical to recognize “what is taught and how it is taught reflects local cultural norms and values” according to Stone-MacDonald and Abo-Zena (2019, p. 97). Systematic differences in ECEC service delivery, cultural recognition of disability, and the diversity of families served in ECEC programs in China and the United States were evident through interviews with ECEC professionals.

Systematic Differences

One special education teacher in China described systematic differences in ECEC based on regional funding, economic, and cultural issues,

Different countries have their own characters.... I feel that conditions are different in areas. For example, our mainland is different from Taiwan. Some factors, such as cultural and economic, make these divergences. (CHN12)

Professionals in China recognized the focus on academic achievement and separate, specialized schools for children with disabilities as two factors influencing families' experiences in ECEC. One professional in China notes that inclusive education is gaining momentum, stating "Our country is actively establishing special education schools and promoting inclusive education at the same time. In China now, probably over 50% of students with disability can enter typical school, it is developing better and better." (CHN5) However, multiple professionals noted there are clear systematic differences between regular schools and special schools in China. One ECEC professional from China explained,

There are two situations in China. If a child has an ordinary or mild disability, such a child will study in a regular kindergarten or school. If a child has a severe disability, such a child will study in a special school. (CHN8)

Additionally, "A kindergarten cannot reject special children in normal circumstance. For special children with severe situations, parents are prone to choose the special school. There is at least one special school in every city or county in China." (CNH8)

In contrast, most professionals in the United States reported working with children with disabilities in settings alongside typically developing peers. Early childhood special education programs typically implemented inclusive classrooms, integrating children with special education needs and typically developing peers in the same classroom. One special educator described the inclusive classrooms within their ECSE program as "classrooms that are six and six, so they're half and half....so we don't have any classrooms that are just typical kids." The

same ECSE program also had “self-contained classrooms” for children with special education needs based on their IEP goals and intensity of support services needed to participate in the classroom environment. Based on the needs of the children, classrooms have at least one paraprofessional, an assistant ‘floater’ teacher, and related service providers (SLP, OT, DT) along with the teaching team. One service provider in early intervention for children under 3 years old in the United States did explicitly mention the lack of typically developing peer interactions, except with siblings within the family. Another early interventionist working in a community-based program providing early intervention services described ‘playgroups’ for children with special education needs and typically developing peers to support socialization and skills development.

Cultural Differences

Systematic differences in the educational systems in China and the United States are grounded in cultural differences. In Chinese culture, there is a deep help respect for teachers as experts and a need to respect family preference. In Chinese families it is important to 'save face' or importance placed on family reputation, this could lead to families denying a child's disability based on stigmas around disability. One ECEC professional shared that some parents of children with disabilities do not want relatives to know about the child's needs. The professional reported trying to work with the family to understand the importance of having extended family support, but the parents continued to be reluctant.

In the United States, professionals recognized the importance of working with families to understand and support their child’s special educational or developmental needs. While some professionals mentioned supporting families through a child’s diagnosis, families being unaware of developmental delays, or families that are hesitant to participate in services for their child with

special needs, this was not a common theme across interviews with professionals in the United States.

Diversity in Families and Children

Diversity in family characteristics were limited in China, as professionals stated, “most families in the territory or region have similar economic and racial backgrounds.” (CHN8) Another Special Educator in China noted, “For their [family] backgrounds, they are almost the same nation.” (CHN8) However, some professionals in China described working with same-sex parents, grandparents-raising-grandchildren (CNH9; CHN13), and children from migrant and immigrant families. An ECEC professional in China explained the impact of family diversity in ECEC systems,

I think it's not a big problem in my job, because in my hometown, we have 46 ethnic groups and in China, there are 56 ethnic groups, so we have more than 70% or 80% minorities in my hometown, we have a multi-culture and Mongolia, Wieger, Kazakah, different ethnic groups. And sometimes they have a different culture, different language, different custom, different habits. But we see, we treat them as the same, as the same, we only focus on how to teach. I think we need to improve more about how to provide them more attention for different special needs, for different culture family, and that that is not enough. Not enough. We do, I think we need to improve that. (CHN7)

Another ECEC professional in China noted the contrast in family diversity between the United States and China, noting,

I think there is no such thing here. Firstly, there is not much difference among parents' cultural backgrounds, unlike in the United States, which is a melting pot

where people come from different cultures. Likewise, there is no such difference in terms of linguistic and ethnic backgrounds. (CHN4)

In the United States, most ECEC professionals reported working with families from culturally and ethnically diverse backgrounds. Several professionals in the United States described working with interpreters (US3; US5) to support families in their native language. Professionals also faced challenges when collaborating with families and professionals with different cultural backgrounds or expectations for young children, family practices, or language barriers. One elementary teacher reported using Google translate to make materials accessible to all families.

Working with families from diverse backgrounds was embraced by professionals in the United States, one early childhood special educator noted, “I think it doesn't matter to me what country, what language. It's what I do for every family.” (US5) Another professional in the United States discussed cultural traditions that their program accommodates when working with families from diverse backgrounds, including naming ceremonies, baptism, feast, festivals, baby showers, noting,

It's obviously important to them and in figuring out how we can accommodate or what we can do to support the family in this time of crisis to make it the best that it can be given the situation that they're in. (US9).

An ECEC professional working in a community-based childcare setting in the United States reported that the program offered Spanish class and Chinese class. (US10)

Systematic and cultural differences in ECEC programs and services are to be expected based on international context. While exploring similarities in ECEC professional practices to engage family members of young children with disabilities, differences in strategies reflected

national educational policy, cultural understanding of disability, and cultural diversity within societies. While differences are present, similarities in professional strategies to engage family members, such as parent education, on-going communication, and individualized instructional strategies were commonly used among ECEC professionals in the United States and China.

Narrative of Typical Experience/‘Vignette’

Chasity has enjoyed working with young children since she began babysitting her younger cousins as a teenager. Chasity continued to babysit and volunteer at a local religious center's child care program throughout high school. Chasity attended a regional, state university for her undergraduate degree in preschool education. Through her coursework, Chasity was able to learn about child development, observe in preschool classrooms, and complete a student teaching experience. Chasity was not required to take any course work focused on early childhood special education, but she did learn about different disability classifications in her course on assessment in early childhood education. She also attended a community workshop on supporting children with autism with her classmates. Chasity began working in a preschool for children from 2.5 years old to 6 years old in her hometown after graduation. In her first year as a lead teacher, Chasity was surprised that 3 of the 27 children in her class had identified disabilities and one child was receiving routine, daily medical care. Chasity knew it was important to communicate with the families of all children in her class, but she needed to specifically discuss how she could help the children with special needs. She was a little intimidated to approach the families of children with special needs and wondered if it was her responsibility or if the center director would take the lead. Chasity decided to work with the director to reach out to the parents through email and schedule individual conferences if requested. She also sent home a newsletter with a survey for all families to learn more about

them and their children. Later in the month, the early childhood center hosted an open house with a family fun night where Chasity was able to meet all the children's family members. She also provided a handout with developmental information and community resources for all families. During family conferences, Chasity learned that three children in her class had disabilities that qualified for additional educational services outlined in an IEP. Chasity asked each family if they were comfortable sharing a copy of the IEP so she could incorporate the children's individual goals into her classroom lesson plans. The families agreed to share the IEP. Over the next few months, Chasity continued to communicate with the families through email and daily communication about the child's progress and achievements. Chasity also began working with a Speech-Language Pathologist that visited the classroom to provide individual therapy to one of the children. With the family's permission, Chasity videotaped the therapist using speech sound strategies with the child so she could try and replicate the activity. Chasity also shared the video with the family so they could try the strategies at home. Although Chasity spent additional time planning and practicing individual interventions for the children with special needs in her class, she was happy to make accommodations in her classroom to meet the needs of all children.

Chapter Five

Results

ECEC professionals in China and the United States work within very different cultural environments, however they share common practices and concerns when implementing inclusive services and programs for young children with disabilities and their families. Despite the differences in cultural expectations, educational systems, and service provisions for individuals with disabilities, ECEC professionals in China and the United States recognize the importance of building relationships with children and families. ECEC professionals in the United States and China use common strategies to encourage active family participation, share community resources, and collaborate with other professionals to support the developmental and educational needs of young children. While differences in service delivery and educational policies are evident, there are more commonalities in ECEC professional practices than might be expected. This chapter will discuss the findings from this study as they relate to current and future research in international ECEC. Current policies and practices will be reviewed to highlight how findings from this study can guide policy makers and educational policy. Implications for future research and practice in inclusive ECEC will be discussed. This study could inform policy makers, professional development providers, ECEC professionals, and families as they develop international recommendations for high-quality ECEC programs and services.

Findings Overview

The overall focus of this study relied on ECEC professionals' descriptions of strategies used when working with young children with special needs and their families, along with challenges and barriers to providing inclusive ECEC programs in the United States and China. The research questions also examined ECEC professional's formal education, training, and personal experience that supports their work with young children with special education needs

and their families. Interviews with professionals in China and the United States revealed commonality in practices used to engage family members, to create individualized instructional plans for children, and shared challenges faced in the ECEC setting, such as heavy workloads and limited funding. This chapter will discuss the findings, limitations, and implications of this study based on the experiences of ECEC professionals in China and the United States.

Research Overview

The importance of early childhood as critical developmental period has been established by research in human development, neuroscience, education, and health (Huston, 2008; Tag, 2013; Melhuish, 2016; Talbott, Maggin, Van Acker, & Kumm, 2018). During the early childhood period, children grow and develop skills that are used throughout their life. Children have opportunities to learn and grow as part of their family, community, and culture. Family, community, and culture play a role in children's education from the beginning. For children with disabilities, complex medical conditions, or at risk for developmental delays the influence of family, community, and culture can determine outcomes for these children. The experiences, education, and opportunities for young children with disabilities vary based on many factors. Family caregiving capacity, community resources, and access to quality services each influence outcomes for young children with disabilities or special education needs. Inclusive ECEC services for young children with disabilities or special education needs can support family-capacity building, provide educational opportunities, and offer therapeutic interventions to support children's individual developmental needs. Research has demonstrated an overall positive impact of quality ECEC on child development, including social and cognitive development, academic achievement, and future school success (Bergen & Hardin, 2013; OECD, 2018; Raikes, Devercelli, & Kutaka, 2015). Within ECEC there are many measures to examine

the impact of quality services and programs within the lives of young children and families. Outcomes can include individual growth and development of age appropriate skills for young children with SEN. Family-level outcomes can also indicate success within ECEC programs and services, this could include changes to family routines and practices or family satisfaction with programs. Local and national outcomes are reported based on child-level data, family satisfaction, and program level indicators of quality.

While there are many types of ECEC programs, inclusive ECEC programs are becoming more prevalent on an international scale. Globally, there are more children enrolled in ECEC and inclusive ECEC programs than in the past. As the need for high-quality, inclusive ECEC programs grows, policy makers and researchers can provide a foundation for establishing inclusive ECEC programs based in evidence-based best practices, such as the DEC Recommended Practices. Internationally, societies are recognizing that “all children are entitled to ECEC services, regardless of their country of origin, family income, home language, or ability” (Kagan, 2018, p.13). As demonstrated in this study, international ECEC practices and policies are different based on cultural expectations, family participation, and educational systems. However, ECEC professionals in this study reported using similar strategies to engage with family members and common instructional strategies to meet the individual needs of young children with special education needs. For young children with disabilities and their families, community resources and public policy often determine services and programs available. It is important to understand how cultural influences and national educational policy impact ECEC professional practices as we establish quality measures and internationally agreed upon best practices in the field of inclusive ECEC on a global scale.

Current Policy and Practices

Inclusive ECEC policies, such as the IDEA in the United States, set forth guidelines, regulations, procedures, and accountability measures for providing educational and developmental services for young children with disabilities. On the global scale, the United Nations has established agreed upon Rights of the Child and Rights of Persons with Disabilities, many nations and NGOs rely on these documents to guide service delivery for young children with disabilities and their families.

While there are reciprocal influences among global and national policies in ECEC, it is a challenge to identify universal indicators of quality in ECEC as policies reflect the national priorities and cultural perspectives of childhood and the importance of early education within individual societies (Tag, 2013). It can be challenging to create policies to direct standard practices for professional competencies, curriculum practices, child assessment, and accountability measures across nations and cultures. Measures of quality in ECEC vary depending on the setting, funding source, and program culture (Pelatti, et al., 2016). Stone-MacDonald and Abo-Zena (2019) suggest “not all recommended practices may be culturally appropriate for import or export (p. 100)”. This study used the ACEI Global Guidelines Assessment (2011) to compare strategies used by ECEC professionals to engage family members of young children with disabilities and special education needs in two countries. It is recognized that program quality measures, family engagement practices, and child-centered instruction are heavily influenced by culture, educational policy, and community resources. This study relies on local funds of knowledge of ECEC professionals working within these systems directly with children with special education needs and their families. The professional’s knowledge and

experience provide insight into how educational policies are implemented within the community to support positive outcomes for young children with disabilities across cultures.

Limitations of Research Project

The process of collecting information through interviews with ECEC professionals in the United States and China about their educational background, professional practices, and interactions with children and families does have limitations. This study examines the unique experiences of the ECEC professionals interviewed, the findings should not be generalized to all professionals within ECEC. Methodological limitations of qualitative research include interview bias, self-reported data are accurate based on the interpretations and recall of participants. However, the information shared through interviews could be biased based on participants skewing information based on wanting to share what is considered correct or socially acceptable in the field of ECEC. Participants also self-selected to engage in the interview process with the research team, those who self-selected to participate may have inherent differences in professional practices compared to professionals that opted not to participate or were not aware of the study. To address these methodological limitations and to provide credibility to the findings of this study, multiple efforts were implemented to maximize data quality. First, member checks were performed at two levels. During interviews, the research team summarized and clarified responses with participants to ensure information was accurately recorded. Transcripts and/or summaries of interviews were provided for participants for validation of the information shared. Data triangulation was examined throughout the study procedures, the research team actively recruited ECEC professionals to share a wide variety of experiences in order to examine consistency among data sources. Additionally, investigator triangulation was implemented as the research team consisted of members from the United States and China.

Collaborative work among the research team included peer debriefing, collecting and discussion research notes or memos, and critical analysis of the study results. Interrater reliability checks on data coding were performed using NVivo. Finally, discrepant case analysis was shared along with disconfirming evidence that did not fit within the coding schemes or primary themes of analysis (Brantlinger, et al., 2005).

During interviews with ECEC professionals' additional challenges occurred, including the use of educational or professional terminology that was different between participants in the United States and China. The translation of professional terminology was not always clear or the same (i.e. mental retardation/intellectual disability). In China, professionals often referred to 'regular' schools or 'traditional' schools in contrast to programs for children with special education needs that are provided in 'special' schools. Professionals described educational practices or interactions that held complex meanings and interpretations, for example the role of "nursery" in Chinese preschools or kindergartens could be the equivalent of a teacher's aid or paraprofessional in the United States preschool setting. These individuals are primarily responsible for the routine care of young children in the classroom setting, in contrast the head teacher or lead teacher would be responsible for planning and implementing educational and developmental activities within the classroom. In cross-cultural comparative research, technical terminology can be culturally nuanced. To address this issue, the research team included members from the United States and China that have worked in ECEC settings and in higher education settings. The members of the research team discussed any terminology that was used that was unclear to determine the shared meaning of the term, such as 'nursery'. The research team members that provided translations for technical terminology discussed the meaning of the terms and made research memos or notes to share and discuss as needed.

Implications for Future Research

There is limited research on quality inclusive practices in ECEC settings on an international scale and few studies use cross-cultural comparative analysis to examine ECEC systems and practices between nations (Fiene, 2013; Hu, Fan, Wu, & Yang, 2017; Salami, 2014). This study will inform practitioners, higher education and professional development programs, and policy makers on ECEC professional practices related to family engagement in China and the United States. Future research could examine family engagement strategies used by ECEC professionals in other nations; it could be interesting to examine ECEC programs in economically developing countries or nations that are in the process of developing inclusive ECEC policies and programs for young children. Additional research could also examine additional measures of structural or process quality within ECEC programs on an international scale, this could include curriculum or instructional practices, community engagement, resource sharing, or child-specific interventions. Finally, future research could take a micro-level approach to explore rural and urban disparities ECEC programs and services. Future research on international ECEC programs adoption of quality-measurement tools and implementation of evidence-based practices will benefit policy makers, program directors, and practitioners on a global scale. Understanding the cultural context of ECEC policy, programs, and services can help professionals better understand their own practices or adopt practices that are better suited for the children and families they serve.

Future research on international ECEC programs and ECSE services can explore links between ECEC agency or organizational models of inclusion; supports provided for professionals, families and children; along with the impact of inclusion on child or family outcomes. International research can examine the impact of inclusive settings for children after

ECEC using observational methods to identify successes and challenges that children face within educational settings beyond the early childhood years. Longitudinal studies on global ECEC policy and the impact on child welfare and outcomes for young children and families would also benefit the field of ECEC and ECSE. Measures of structural quality and process quality across global ECEC and ECSE policies and programs can be completed using evidence-based tools, such as the ACEI Global Guidelines, to facilitate comparisons and conversations on quality in ECEC programs and services (Hu, Fan, Wu, & Yang, 2017).

Implications for Practice

Professional Development in Early Childhood Education and Care

This study supported previous research related to workforce development in the field of ECEC, professionals reported a range of educational backgrounds and levels of formal training in special education. The majority of professionals in this study (90%) had at least a Bachelor's degree. Although all ECEC professionals in the United States and China reported working directly with young children with special education needs, only 36% held a degree in Early Childhood Special Education. ECEC professionals in China were more likely to have a degree related to special education and many had advanced training related to evidence-based therapeutic interventions. ECEC professionals in China were more likely to hold a teaching certificate than ECEC professionals in the United States. In the United States and China, many professionals in this study felt that their formal education, in college or university, did not fully prepare them to meet the needs of children with special education needs and their families. ECEC professionals discussed the importance of on-the-job training, personal experience, and on-going professional development in developing their skills, abilities, and strategies to support children with special education needs and families in the ECEC setting. These findings support

the need for focused attention to workforce development, education, and formal training for ECEC professionals related to special education. If ECEC professionals enter the field with a wide range of experiences, knowledge, and skills, it is important to provide in-service training on child development, evidence-based intervention strategies, family-professional partnerships, and pedagogy. Formal education and training programs for ECEC professionals could adopt ‘blended’ curriculum and coursework that teach both general and special education knowledge and skills for future educators.

Policy for Inclusive Practices in Early Childhood Education and Care

ECEC professionals in the United States and China discussed the impact of ECEC policies at the national, local, and program level. Several ECEC professionals recognized the tension between providing quality services and funding restrictions to programming. One ECEC professional in the United States explicitly stated that programmatic decisions were made based on legal regulations and financial constraints. ECEC professionals in the United States discussed legal responsibilities and program policies related to IDEA service provisions for young children with special education needs, such as annual IEP reviews and requirements for communicating IEP progress with families on a regular basis. In contrast, ECEC professionals in China did not discuss development of IEPs for young children with special education needs but did not mention legal or policy requirements for family participation or collaboration. Clearly, national education policy guided professional practices related to service delivery in ECEC. It is important for policy makers, program administrators, professionals, and families to fully understand legal and policy implications for ECEC programs and services related to supporting young children with special education needs.

One difference between ECEC policy and implementation of services between the United States and China is the service delivery system and oversight of programs for young children with special education needs and their families. China has a centralized service delivery model with collaboration between government agencies and local programs. One advantage of centralized service delivery in ECEC programs is the ability to provide consistent services across the nation or region. One example of this is in teacher certification, in the United States there are no national requirements for ECEC professionals to hold a teaching certificate or licensure, regulations for professional development are at the state or program level. In contrast, in China all of the ECEC professionals were required to have a teaching certificate or license from the Disabled Persons Federation to work young children and families across ECEC settings. In China, ECEC professionals reported collaboration with the Disabled Persons Federation to support individual children's educational needs in special school settings and to provide financial support to families with children with special education needs. In the United States, ECEC professionals also reported collaboration with regional education agencies for instructional support and on-going professional development.

ECEC professionals in the United States and China pointed out disparities in services based on geographic location, specifically mentioning differences in services in rural and urban areas. A primary school teacher in a rural area of the United States said, "We really don't have a lot of resources available in our direct area." Similarly, ECEC professionals in China shared that there are fewer qualified professionals, more children per classroom, and fewer community resources in rural areas as compared to larger, metropolitan areas.

Providing young children with disabilities and their families with services that are consistent, equitable, meaningful, and sustainable is important in the development of high-

quality ECEC policy on a national and international scale. Funding decisions and the allocation of funding for ECEC programs should be determined based on the needs of communities in order to promote access to services for all children and families. Understanding the impact of funding decisions on programmatic decisions, professional practices, and child or family outcomes can provide contextual information when funding is allocated. Globally, funding for high-quality inclusive ECEC programs need attention and advocacy to promote policy level decisions in the best interest of professionals in the field, children receiving services in local communities, and family members supporting the diverse developmental needs of young children (DEC/NAEYC, 2009).

Global Education Initiatives in Early Childhood Education and Care

As inclusive ECEC programs gather support and expand on an international scale, it is important to examine policies, programs, and professional development that have been successful and to identify areas that could be improved or tailored to the specific needs of national educational policies. These processes should go beyond basic education and legal protections for children with special needs to fully encompass authentic, evidence-based inclusive practices for all children to meet their developmental potential. Both structural quality and process quality measures should be addressed when developing global guidelines on ECEC program quality, regulations, funding, and oversight. Structural quality indicators, such as access to inclusive programs, including transportation and physical accessibility of infrastructure, need to be addressed in nations with developed ECEC systems and in nations that are moving towards inclusive ECEC programs. Process quality within inclusive ECEC programs on an international scale will reflect cultural and societal expectations for programs and services for young children and families, but process quality should also embrace internationally agreed upon evidence-

based instructional practices and family-engagement strategies to promote best practices within ECEC programs on an international scale. Tools to examine international ECEC systems, programs, and services, such as the ACEI GGA and the DEC Recommended Practices can provide common quality measurement within diverse ECEC settings and support high-quality professional practices within ECEC programs. While standardized measures of quality do need to be culturally-responsive and flexible to meet the unique needs of communities and families, consistency in the definition of terminology, consistent age ranges considered early childhood, consistent expectations for professionalism, and adopting global measure of quality could lead to enhanced policy decision making, additional collaboration, and cross-cultural research in ECEC.

Conclusion

Young children with special education needs or disabilities live within diverse families and participate in diverse ECEC programs and settings, there is no ‘one-size-fits all’ approach to inclusive ECEC policy or programming for young children with special education needs. Similarly, the professionals in the field of ECEC enter the workforce with a variety of educational backgrounds, formal training, and personal experiences. International organizations are examining current ECEC policies and programs to determine the impact on young children and families and to improve access to high-quality ECEC programs for all children. This study is an attempt to examine international ECEC professional strategies and challenges faced when working directly with young children with special education needs and their families. Through comparing professional practices to engage family members and young children in ECEC programs, this study found professionals in China and the United States used similar approaches and strategies in ECEC settings. Professionals in China and the United States discussed the importance of building relationships with family members and children through communication,

participation, and collaboration. ECEC professionals in China and the United States reported using face-to-face communication with family members, electronic communication, regular parent meetings (individually and group meetings), program-wide family events, and resource sharing as meaningful strategies to engage family members in their child's educational or developmental services. ECEC professionals in the United States and China also discussed similar instructional strategies to meet the needs of diverse learners in the ECEC setting. Professionals discussed creating individualized education plans for students with special education needs, using differentiated instruction to meet individual learning goals, and teaching social skills for children to be successful in inclusive ECEC settings. Professionals in the United States and China also discussed the importance of collaboration with regional disability or educational services, program directors or administrators, other ECEC professionals, related service providers, community members, and families. Overall, there were more commonalities among professional practices used in ECEC settings in China and the United States.

ECEC professionals in China and the United States also faced common challenges or barriers within inclusive ECEC programs and services designed for young children with special education needs. Common challenges included heavy workloads for ECEC professionals when they are providing individualized education programming for children and managing the larger group of children within the program. Funding and community resources were also common challenges within ECEC systems in China and the United States. ECEC professionals in the United States and China noted improvements could be made in training and professional development opportunities for those entering the field. Professionals had mixed feelings about the preparation they received prior to entering the field and emphasized the importance of on-the-job and in-service training. ECEC professionals in China and the United States also agreed

there is a need to increase the number of qualified ECEC professionals available to support young children with special education needs, especially in underserved, rural areas, and within marginalized populations. The issues that were discussed through interviews with ECEC professionals in the United States and China confirm previous research on inclusive ECEC programs and services while offering additional insights into professional practices to engage family members of young children with special education needs across two different cultural and educational systems.

In summary, research on inclusive ECEC programs and services can take a cross-cultural approach to examine professional practices and shared challenges in the field of ECEC. While this study highlights shared experiences among ECEC professionals in the United States and China, future studies could expand or scale up this line of research to additional cultures or nations. Systematic differences in professional practices could be explored in more detail in future research. However, as evident in this study, many ECEC professionals across the globe are already implementing similar strategies, grounded in evidence-based practices, to fully engage family members in their children's educational and developmental services. As ECEC systems continue to grow internationally and quality measurement tools are used to examine ECEC systems around the globe, it will be important for practitioners, policy makers, and family members to understand the cultural influences and expectations for high-quality ECEC programs that will best meet the needs of the children and families served.

The transnational nature of ECEC and ECSE policy, through knowledge sharing and policy borrowing, demonstrates similar international goals for young children. National policies and curriculum standards are culturally reflective of the national goals and priorities for children in society. Healthy, positive outcomes for children with and without disabilities should set the

foundation for national policy and quality measurement tools. Three content areas of ECEC and ECSE quality identified in the research include: (a) cohesive national policy and sustainable funding; (b) teacher qualifications and training requirements; and (c) evidence-based curriculum and classroom practices. Future research can explore comparisons of quality programs between nations or states. Future research can also focus on structural quality indicators that promote quality ECEC programs and ECSE services for young children. For nations to develop sustainable and quality ECEC and ECSE policies, clear definitions of quality, defining the ages of ECEC, and cohesive policy agendas can be discussed, created, and disseminated on a global scale.

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Appendix A
GGA/Interview Question Crosswalk

*Association for Childhood Education International Global Guidelines Assessment (GGA)
Third Edition (ACEI, 2011) and Selected Interview Questions*

Interview Item	ACEI GGA (2011) Item Number	ACEI GGA (2011) Area	ACEI GGA (2011) Subcategory
Q3	42	Early Childhood Educators and Caregivers	Moral/Ethical Dimensions
Q4	45	Partnerships with Families	Program Policies
Q5	46	Partnerships with Families	Program Policies
Q6	47	Partnerships with Families	Program Policies
Q7	54	Partnership with Families	Training and Resources
Q8	66	Young Children with Special Needs	Access and Equity of Services
Q9	71	Young Children with Special Needs	Staff and Service Providers

Appendix B
IRB Notice of Approval



OFFICE OF THE VICE CHANCELLOR FOR RESEARCH

Office for the Protection of Research Subjects
805 W. Pennsylvania Ave., MC-095
Urbana, IL 61801-4822

Notice of Approval: Amendment #02

November 26, 2019

Principal Investigator	Mary Witt
CC	Jami Swindell
Protocol Title	<i>Family Engagement in Early Childhood Education and Care: Global Perspectives on Engaging Families of Young Children with Special Education Needs</i>
Protocol Number	19542
Funding Source	Unfunded
Review Type	Exempt 2 (Limited IRB Review)
Amendment Requested	<ul style="list-style-type: none">Updating research team
Status	Active
Risk Determination	no more than minimal risk
Approval Date	November 26, 2019 (amendment approval date)
Closure Date	March 12, 2024

This letter authorizes the use of human subjects in the above protocol. The University of Illinois at Urbana-Champaign Institutional Review Board (IRB) has reviewed and approved the research study as described.

The Principal Investigator of this study is responsible for:

- Conducting research in a manner consistent with the requirements of the University and federal regulations found at 45 CFR 46.
- Using the approved consent documents, with the footer, from this approved package.
- Requesting approval from the IRB prior to implementing modifications.
- Notifying OPRS of any problems involving human subjects, including unanticipated events, participant complaints, or protocol deviations.
- Notifying OPRS of the completion of the study.

UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN

IORG0000014 • FWA #00008584
217.333.2670 • irb@illinois.edu • oprs.research.illinois.edu

Appendix C Recruitment Flyer

B. English

Are you an **Early Childhood Education and Care Professional** in the **U.S., Mainland China, or Hong Kong**? 

We would like to invite you to participate in an interview about current practices Early Childhood Education and Care professionals use when working with children from birth to age 8 and their families.

In order to participate you need to provide direct service to children birth to age 8 in an Early Childhood Education and Care setting. This could include educational, developmental, therapeutic, or medical services or environments.

This is an online survey; it will take approximately 10 minutes to complete. It will collect basic information about your educational background and location. At the end of the survey, you will follow a link to provide your information in order to schedule the virtual interview.

SCAN THIS QR CODE TO ENTER SURVEY



<https://www.surveymonkey.com/r/RYHBC2Y>

If you have any questions or concerns please contact Jami Swindell at swindll2@illinois.edu.

UIUC_IRB_19542_US

B. Chinese (Mandarin)

你是 中国的 早期幼儿教育及专业儿童护理人员么? 

我们诚挚的邀请你参与这次关于早期幼儿教育/专业儿童护理项目的访谈。此次访谈意在探讨早期幼儿教育及专业儿童护理在0至8岁幼儿及其家庭中的使用。

参与这次访谈需要符合的条件是：现任的，直接服务于0-8岁的幼儿教育和专业护理人员。工作内容可以是幼儿看护，早教机构的教师，幼儿园教辅人员，幼儿医疗服务人员等相关行业服务人员。

这是一个网上调查问卷，完成大概需要10分钟。本次网上调查问卷是收集有关于你的教育背景和任教地点的基本信息。在这个调查的最后，会有一个链接。点击这个链接，需要填写你的基本信息来安排你的视频访谈时间。

网上调查问卷的链接：



<https://wj.qq.com/s2/3554194/4558/>

如果你对这个访谈有任何顾虑或是疑问，请联系 Jami Swindell。她的邮箱是 swindll2@illinois.edu。

UIUC_IRB_19542_CHN

Appendix D

Demographic Survey with Consent Form

C. English

Family Engagement in Early Childhood Education and Care: Global Perspectives on Engaging Families of Young Children with Special Education Needs

You are being asked to participate in a voluntary research study. The purpose of this study to examine Early Childhood Education and Care (ECEC) professional practices when working with families of very young children with special education needs, developmental disabilities, or complex medical conditions. We are interested in learning more about how ECEC professionals provide support and engage families in ECEC settings. Participating in this study will involve an on-line demographic survey with an option to participate in a virtual interview. Your participation will last approximately 5 minutes to complete the demographic survey and 45-50 minutes for the optional virtual interview. There are no risks to individuals participating in this survey beyond those that exist in daily life. Although your participation in this research may not benefit you personally, it will help us understand what strategies early childhood professionals to engage families in their child's ECEC services on a global scale. The study could contribute to the understanding of professional practices and strategies to supporting families of young children with special education needs in ECEC settings.

Principal Investigator Name and Title: Dr. Allison Witt

Department and Institution: Office of International Programs, University of Illinois, Urbana-Champaign

Contact Information: awitt1@illinois.edu

What procedures are involved?

The study procedures include an online survey about your educational background and professional experiences with children birth through age eight and their families. You will then have the opportunity to sign up for a virtual interview to share your practices and ideas on engaging families of children from birth to age eight in the ECEC setting.

Participants physically located in the EU/EUA will not be eligible for this study due to the General Data Protection regulations.

This research will be performed completely on-line. You will participate by completing the demographic survey and voluntary virtual interview. You will complete the demographic survey, taking approximately 5 minutes. Then you will have the option to sign-up for a virtual interview. If you elect to participate in the virtual interview, you will participate in one virtual interview lasting 45-50 minutes. You will also be contacted following the interview to verify your responses; this should take approximately 10 minutes.

Interviews will be audio recorded for data collection purposes, any identifying information will be removed from the audio transcript.

Will my study-related information be kept confidential?

Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. The names or personal identifiers of participants will not be published or presented.

Will I be reimbursed for any expenses or paid for my participation in this research?

Participants will receive the book “Working with Families of Young Children with Special Needs” after completing the virtual interview.

Can I withdraw or be removed from the study?

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time. Your participation in this research is voluntary. Your decision whether or not to participate, or to withdraw after beginning participation, will not affect your current or future dealings with the University of Illinois at Urbana-Champaign.

The researchers also have the right to stop your participation in this study without your consent if they believe it is in your best interests or you were to object to any future changes that may be made in the study plan.

Will data collected from me be used for any other research?

Your information will not be used or distributed for future use, even if identifiers are removed.

Who should I contact if I have questions?

If you have questions about this project, you may contact Dr. Allison Witt at awitt1@illinois.edu or Jami Swindell at swindll2@illinois.edu. If you have any questions about your rights as a participant in this study or any concerns or complaints, please contact the University of Illinois at Urbana-Champaign Office for the Protection of Research Subjects at 217-333-2670 or via email at irb@illinois.edu.

Please print this consent form if you would like to retain a copy for your records.

I have read and understand the above consent form. I certify that I am 18 years old or older. By clicking the “Submit” button to enter the survey, I indicate my willingness to voluntarily take part in this study.

SUBMIT

Family Engagement in Early Childhood Education and Care: Global Perspectives on Engaging Families of Young Children with Special Education Needs

The purpose of this study is to gain insight into daily practices of ECEC professionals when working with young children and their families across the globe. With growing International efforts to identify best practices, quality indicators, and teacher qualifications for ECE/ECSE/EI, there is a sense of urgency to identify effective and sustainable practices from a global perspective. This research will lead to continued conversations and policy decisions that impact the lives of young children and their families on a global scale.

Following this survey, you will have an opportunity to sign up for a virtual interview to share additional ideas and strategies you use as ECEC professional.

Demographic Survey (Survey Monkey TM) *Adapted from Brass Tacks (1990)*

1. Birth year _____

2. Gender: Female ____ Male ____ Prefer not to respond ____

3. Geographic Area: China United States Other _____

4. What degree(s) have you earned?

Associates _____ Bachelors _____ Masters _____ Doctorate _____
High school/Secondary School _____ Certificate _____
Other : _____

5. What is your role in Early Childhood Education and Care (Select One)

- Audiology Nutrition Rehabilitation Education
 Occupational Therapy Social Work Early Intervention Child Care Provider
 Developmental Services Medicine Physical Education Special Education
 Music Therapy Nursing Physical Therapy Parent
 Psychology Teacher's Aide Paraprofessional
 Speech/Language Pathology Other _____

6. Did any of the degrees you received focus on working with children with special education needs, disabilities, or medical conditions from birth to age eight?

___ No ___ Yes, if yes, which degree _____

7. Age group you presently work with: (check all that apply):

___ Infants (birth to 3 years) ___ Preschoolers (3 to 5 years)
___ Pre-Primary (5 to 8 years) ___ Parents and Adults

8. Average number of children you serve per week _____

9. What types of handicaps do the children you work with have? (Check all that apply):

___ Speech and Language delay ___ Physical impairments ___ Sensory impairment (Hearing, Vision) ___ Intellectual disability ___ Health impairment ___ Multiple handicap

If you are interested in participating in a virtual, online interview about the practices you use when working with children birth to age 8 and their families in Early Childhood Education and Care settings, please follow the link provided after submitting your survey.

WECHAT <LINK>

GOOGLE FORM <LINK>

C. Chinese (Mandarin)

早期儿童教育和保育：国际视野下特殊教育儿童家庭的参与

您将自愿参与到我们的研究当中。我们的研究目的是测量“早期儿童教育与保育”项目和拥有特殊教育需要的幼儿、发育障碍的幼儿、或者需要复杂医疗条件的幼儿家庭的专业合作实践。我们希望了解“早期儿童教育与保育”项目专家是如何对各类家庭提供支持，以及帮助这些家庭参与到项目当中。我们的调查包括一份线上调查问卷以及线上采访(可选)。问卷回答的时间在5分钟左右，线上采访时间约为45-50分钟。我们的调查属于纯粹的科学研究，您不需要担心任何风险。虽然我们的研究不会为您个人带来什么好处，但这会使我们了解世界范围内幼儿专家是如何帮助家庭参与到“早期儿童教育与保育”项目。我们的研究希望能够帮助人们了解这些专业实践如何帮助具有特殊教育需要儿童的家庭参与到“早期儿童教育与看护”项目。

首席调查员：阿利森·威特博士 (Dr. Allison Witt)
所属机构：美国伊利诺伊大学厄巴纳-香槟分校，国际项目办公室
联系方式：awitt1@illinois.edu

整个研究包含哪些步骤？

整个研究首先包括一项线上调查，调查内容包括您的教育背景，以及同8岁以下儿童及其家庭的合作经历。随后，您可以选择参与我们的线上调查，分享您关于帮助8岁以下儿童家庭参与到“早期儿童教育与保育”项目的经历和看法。

* 由于受到“一般数据保护条例”的影响，目前身在欧盟国家或者欧洲经济区 (EUA/EEA) 的参与者将无法参与本次调查。

这项调查完全在线上进行。您首先需要完成一份调查问卷，随后可以自愿选择参与线上采访。填写整个问卷的时间在5分钟左右，随后您可以选择是否继续参与线上采访。如果您选择参与线上采访，整个采访时间大约在45-50分钟。采访结束后我们也会联系您，以便确认您的回答，这可能需要10分钟的时间。

* 出于搜集数据的需要，线上采访将会被录音。但是任何有关身份的信息都会从录音中删除。

是否会保密我在调查中提供的任何信息？

根据法律与学校规定，任何教职工、学生以及获准了解调查结果的个人都会对您回答的内容进行保密。我们也不会再在出版物或者其他场合、媒介中披露任何有关您个人身份的信息。

我的参与是否有酬劳？

线上访谈结束后，您将获赠一本《与特殊需要幼儿家庭合作》。

我可以退出这项研究吗？

如果您参与了我们的调查，您可以随时撤回您填写的内容以及退出调查。您的参与完全自愿，您有关是否参与、或者中途退出的任何决定不会影响到您今后同伊利诺伊大学厄巴纳-香槟分校的任何合作。

我们的研究人员在如下情况有权在未经您允许的前提下终止您的参与：（1）他们认为这符合您的最大利益，或者（2）您反对本研究在未来可能做出的一些更改或修正。

我提供的数据会被用来其他研究吗？

您的信息不会被用于任何其他研究。

我如果有问题，该如何与你们联系？

如果您对我们的研究有任何问题，您可以联系通过电子邮件awitt1@illinois.edu联系阿利森·威特博士 (Dr. Allison Witt) 或者通过电子邮件swindll@illinois.edu联系杰米·斯温德尔 (Jami Swindell)。如果您对作为受访者权利有任何疑问，或者对本研究有任何的看法或不满，请您同伊利诺伊大学厄巴纳-香槟分校科研项目保护办公室联系，联系方式是：+1 (217) 333-2670；irb@illinois.edu。

如果您想留存您的记录，请复印本内容。

我已经了解上述内容，且确认我已年满18岁。请点击“确认”（submit）进入调查，我表示自愿参与对本次调查之中。

确认

题目：幼儿教育中的家庭参与：从全球视角看家庭参与有特殊教育需求的儿童教育

本研究的目的是深入了解全球不同国家的早期幼儿教育及专业儿童护理项目（ECEC）人员在与儿童及其家庭的工作相处中的日常实践。随着国际上为早期幼儿教育及专业儿童护理项目 / 特殊儿童早期教育（ECEC/ECSE）寻找最佳实践方法、质量指标、教师资格的不断努力，从全球视角确定有效且可持续的实践方法变得越来越紧迫。本研究将会提出一些政策建议，用以改善全球范围内儿童及其家人生活质量。填写完此问卷后，您将有机会报名参与线上视频访谈，分享更多的想法以及您作为ECEC/ECSE专业人士所使用的策略。

背景信息调查

1. 出生年份 _____

2. 性别: 女性____ 男性____ 跳过此题_____

3. 所在区域: 中国大陆 中国香港 韩国 美国 其他_____

4. 学历:

专科_____ 本科_____ 硕士_____ 博士_____

高中/初中_____ 证书_____ 其他:

5. 您在幼儿教育与保育中担任的角色 (选择一项)

- | | | |
|---------------------------------|--------------------------------|----------------------------------|
| <input type="checkbox"/> 听力学 | <input type="checkbox"/> 营养 | <input type="checkbox"/> 复健 |
| <input type="checkbox"/> 教育 | <input type="checkbox"/> 职业治疗 | <input type="checkbox"/> 社工 |
| <input type="checkbox"/> 早期干预 | <input type="checkbox"/> 儿童保育员 | <input type="checkbox"/> 发展类服务 |
| <input type="checkbox"/> 医学 | <input type="checkbox"/> 体育教育 | <input type="checkbox"/> 特殊教育 |
| <input type="checkbox"/> 音乐治疗 | <input type="checkbox"/> 物理治疗 | <input type="checkbox"/> 语言病理学 |
| <input type="checkbox"/> 护理 | <input type="checkbox"/> 心理学 | <input type="checkbox"/> 家长 |
| <input type="checkbox"/> 专业人员助手 | <input type="checkbox"/> 助教 | <input type="checkbox"/> 其他_____ |

6. 您有没有获得0-8岁的特殊教育/残疾/特殊医药条件的儿童工作的相关学历？

____没有 _____有，如果有，请说明学历及专业名称_____

7. 您目前工作负责的年龄段？（选择所有符合的选项）

婴儿 (出生-3岁) 学龄前 (3-5岁)
 小学低年级 (5-8岁) 家长与成人

8. 您每周负责的儿童平均数量 _____

9. 您工作中负责的儿童有哪项残疾？（选择所有符合的选项）

语言延迟 身体缺陷
 感官缺陷 (听觉、视觉) 智力缺陷
 身体疾病 多种残疾

我们的研究还包含线上访谈，此次访谈意在讨论早期幼儿教育及专业护理在0-8岁幼儿及其家庭中的使用。如果您感兴趣，请在完成填写此问卷后点击下方链接。

[微信 <链接>](#)

Appendix E

Interview Protocol

D. English

Adapted from Association for Childhood Education International Global Guidelines Assessment (GGA) Third Edition (ACEI, 2011)

Q1. Describe your background and education in working with children birth to eight with special educational needs and their families.

Clarifying Probe: Tell me about how you started working with young children? Do you have a degree or certificate?

Q2. Tell me about your formal education or pre-service preparation that prepared you to work with children birth to eight with special educational needs and their families.

Clarifying Probe: How did your education or schooling prepare you to work with young children that have special education needs?

Q3. Describe how you respect children, their culture, and family practices (GGA.Q.42)

Clarifying Probe: How do you show children and families that you appreciate and respect them?

Q4. Tell me how your program provides support for families, either directly or through links with other community resources (e.g. agencies, specialist, community).

Clarifying Probe: What resources do you share with families about activities or community organizations that might support children with special needs?

Q5. Are there guidelines for parent participation and involvement in the program? What do these look like? (GGA.Q.46)

Clarifying Probe: Does your school have regular opportunities for families to learn about the program?

Q6. Tell me how your program holds ongoing discussions/conferences with families about children's progress and other concerns (GGA.Q.47)

Clarifying Probe: Do you have parent meetings or a conference with families about their child's learning?

Q7. Describe how you use educational materials or strategies to ensure participation of families with diverse characteristics (e.g. cultural, linguistic, ethnic, or socioeconomic)

Clarifying Probe: How do you use classroom materials or activities to welcome families?

Q8. Describe how children with disabilities and other special needs have equal access and equal opportunities in your program (GGA.Q.66).

Clarifying Probe: Tell me about how you support the learning needs of children that might need extra support in the classroom?

Q9. Tell me how staff members and/or specialist in the program individualize, adapt, and modify to meet the individual education or care needs of children with special needs (GGA.Q.71)

Clarifying Probe: How do you work with others to make learning activities and daily routines meet the needs of all children?

D. Chinese (Mandarin)

Q1. Describe your background and education in working with children birth to eight with special educational needs and their families.

请您描述一下您作为0-8岁特殊儿童教育人员的学术背景。

Clarifying Probe: Tell me about how you started working with young children? Do you have a degree or certificate?

请问您是怎样开始从事这份工作的呢？请问您有取得相关的学位或是资格证么？

Q2. Tell me about your formal education or pre-service preparation that prepared you to work with children birth to eight with special education needs and their families.

请您描述一下您所接受过的有关于0-8岁特殊儿童教育及其家庭的岗前培训或是正规教育。

Clarifying Probe: How did your education or schooling to prepare you to work with young children that have special education needs?

您所接受的教育或是培训是如何帮助您从事这份工作的呢？

Q3. Describe how you respect children, their culture, and family practices (GGA.Q.42)

您是通过什么样的行动来表达您对儿童及其文化和家庭习俗的尊重呢？

Clarifying Probe: How do you show children and families that you appreciate and respect them?

您是通过什么样的行动来表达您对儿童及其家庭的尊重呢？

Q4. Tell me how your program provides support for families, either directly or through links with other community resources (e.g. agencies, specialist, community).

您服务的机构或是学校中是如何支持有特殊需求家庭的呢？学校/机构给家庭提供的支持（帮助）

可以是直接的或是间接地提供一些社区资源。社区资源可以是一些专家，或是相关组织。

Clarifying Probe: What resources do you share with families about activities or community organizations that might support children with special needs?

您会给有特殊需求的家庭分享什么类型的社区资源或活动资源来帮助他们呢？

Q5. Are there guidelines for parent participation and involvement in the program? What do these look like? (GGA.Q.46)

请问您服务的机构有制定关于家长参与机构事物的规章制度么？如果有的话，可以描述一下那个规章制度的内容么？

Clarifying Probe: Does your school have regular opportunities for families to learn about the program?

在您服务的机构或学校中，有提供给家长机会去了解学校么？

Q6. Tell me how your program holds ongoing discussions/conferences with families about children's progress and other concerns (GGA.Q.47)

请问您服务的机构或学校，是如何和家长沟通儿童的发展情况？以及家长自己关心的话题呢？

Clarifying Probe: Do you have parent meetings or a conference with families about their child's learning?

请问你所在的机构或学校会开家长会来讨论儿童发展及学习情况么？

Q7. Describe how you use educational materials or strategies to ensure participation of families with diverse characteristics (e.g. cultural, linguistic, ethnic, or socioeconomic).

请您描述一下您是如何使用教材（教育材料）和策略来确保具有不同特征的家庭都能参与到课堂？还是学生参与。例如不同的文化背景，不同的语言环境，不同民族，或是不同的社会经济阶级)

Clarifying Probe: How do you use classroom materials or activities to welcome families? 您是如何使用教材或是课堂活动来欢迎所有家庭呢？

Q8. Describe how children with disabilities and other special needs have equal access and equal opportunities in your program (GGA.Q.66).

请您描述一下在您服务的机构中，残障儿童以及其他有特殊需求的儿童是如何拥有相同机会接受不同类型以及等级的服务呢？

Clarifying Probe: Tell me about how you support the learning needs of children that might need extra support in the classroom?

在您所任职的班级中，您是怎么支持或帮助一些有特殊需求的儿童呢？

Q9. Tell me how staff members and/or specialist in the program individualize, adapt, and modify to meet the individual education or care needs of children with special needs (GGA.Q.71)

请您谈一下保教人员或专家是如何根据儿童的个别需求来调整保教措施的？

Clarifying Probe: How do you work with others to make learning activities and daily routines meet the needs of all children?

您是如何与其他工作人员合作来制定儿童的日常学习活动呢？

Appendix F

Recruitment Email and Social Media Post

E. English

Hello,

We would like to invite you to participate in an interview about current practices Early Childhood Education and Care professionals use when working with children from birth to age 8 and their families.

In order to participate you need to provide direct service to children birth to age 8 in an Early Childhood Education and Care setting. This could include developmental, therapeutic, or medical services or environments.

This is an online survey; it will take approximately 10 minutes to complete. It will collect basic information about your educational background and location. At the end of the survey, you will follow a link to provide your information in order to schedule the virtual interview.

The link to the survey is:

[\(Insert Survey Link\)](#)

If you have any questions or concerns please contact Jami Swindell at swindll2@illinois.edu.

Thank you,
Jami Swindell
Allison Witt, Ph.D.

E. Chinese (Mandarin)

你好,

我们诚挚的邀请你参与这次关于**早期幼儿教育/专业儿童护理项目**的访谈。此次访谈意在探讨早期幼儿教育及专业儿童护理在0至8岁幼儿及其家庭中的使用。

参与这次访谈需要符合的条件是：现任的，直接服务于0-8岁的幼儿教育 and 专业护理人员。工作内容可以是**幼儿看护**，早教机构的教师，幼儿园教辅人员，幼儿医疗服务人员等相关行业服务人员。

这是一个网上调查问卷，完成大概需要10分钟。本次网上调查问卷是收集有关于你的教育背景和任教地点的基本信息。在这个调查的最后，会有一个链接。点击这个链接，需要填写你的基本信息来安排你的视频访谈时间。

网上调查问卷的链接：<https://wj.qq.com/s2/3554194/4558/>



如果你对这个访谈有任何顾虑或是疑问，请联系Jami Swindell。她的邮箱是 swindll2@illinois.edu。

谢谢！

Jami Swindell

Allison Witt, Ph.D.

Appendix G
Interview Sign Up Form

F. English

Thank you for your interest in participating in a virtual, online interview about the practices you use when working with children birth to age 8 and their families in Early Childhood Education and Care settings. These interviews should take about 45-50 minutes. Please complete the following form and we will contact you to schedule an interview:

Name	EX: JANE DOE
Email Address	EX: JANEDOE@JMAIL.COM
Phone Number	EX: (333)666-7777
WhatsApp/WeChat	EX: JDDOE
Country	EX: United States

F. Chinese (Mandarin)

采访报名链接:

感谢您参与到我们的线上采访中！采访将在45-50分钟左右。
请填写下表信息采集，我们将通过邮件与您预约采访时间：

姓名	
邮箱地址	
手机号	
微信号	
所在国家	
WhatsApp	
Skype	
City/Region	
采访语言	

Appendix H

Participant Email Introduction Letter: Scheduling Virtual Interviews

G. English

Hello [Participant Name],

Thank you for completing the survey and agreeing to participate in a virtual interview on international Early Childhood Education and Care for children birth to age 8. During the virtual interview, you will be asked to share about your work with young children, how you support families in your program, and the inclusion of children with special needs. This interview will take approximately 45-50 minutes to complete. At the end of the interview, you will receive the book *Working with Families of Young Children with Special Education Needs*.

To schedule the interview, please complete the following form and return it to the research team.

Date Available	Date 1:	Date 2:	Date 3:	Date 4:
Time (TIME ZONE)				

When you have returned this form, we will contact you directly to schedule the interview. At that time we will share the link for the Zoom Virtual Interview Room. You will want to make sure your computer can operate the Zoom Room system prior to the scheduled interview. More information can be found here:

Thank you for agreeing to participate in this study. We look forward to hearing from you and scheduling a time to talk with you about your work with young children in ECEC settings.

G. Chinese (Mandarin)

尊敬的_____

感谢您完成了关于早期0-8岁幼儿教育及专业儿童护理项目的网上问卷，并同意参加关于早期0-8岁幼儿教育及专业儿童护理项目的线上访谈。线上访谈将涉及以下几个问题。请分享您和幼儿的工作经验。您是如何支持你班上儿童的家庭？以及对有特殊需求的儿童的融合教育。此次网上访谈大概45-50分钟。在访谈结束后，您将会收到Robin McWilliam在2010年出版的书*Working with families of young children with special needs*以表感谢。

为了安排线上访谈的时间，请填写以下表格并返还给调研小组。

日期	最倾向的访谈日期	备用第二日期	备用第三日期	备用第四日期
所在时区				

当您 将此表格寄还给调研小组后，我们会直接联系您安排线上访谈的时间。我们会分享给您一个链接来进行线上访谈（ZOOM）。为了确保您的电脑设备可以使用ZOOM, 请提前查看以下链接来了解更多如何使用ZOOM。 <https://support.zoom.us/hc/en-us/articles/201362193-How-Do-I-Join-A-Meeting->

感谢您同意参加此项调研。我们期待了解您对于早期0-8岁幼儿教育及专业儿童护理的看法和经历。

Appendix I

Interview Verbal Consent Script

H. English

Family Engagement in Early Childhood Education and Care: Global Perspectives on Engaging Families of Young Children with Special Education Needs

[READ BY RESEARCHER:] Hello, you indicated you are interested in participating in a voluntary research study. The purpose of this study to examine Early Childhood Education and Care (ECEC) professional practices when working with families of very young children with special education needs, developmental disabilities, or complex medical conditions. We are interested in learning more about how ECEC professionals provide support and engage families in ECEC settings. Participating in this study includes an on-line demographic survey with an option to participate in a virtual interview. We are completing the virtual interview, which should last about 45-50 minutes. There are no risks to individuals participating in this survey beyond those that exist in daily life. Although your participation in this research may not benefit you personally, it will help us understand what strategies early childhood professionals to engage families in their child's ECEC services on a global scale. The study could contribute to the understanding of professional practices and strategies to supporting families of young children with special education needs in ECEC settings.

The Principal Investigator for this study is Dr. Allison Witt, Director of the Office of International Programs, University of Illinois, Urbana-Champaign. My name is _____ and I am a research assistant for Dr. Witt and Jami Swindell, the lead investigator.

This research will be performed completely on-line. **The study procedures included an online survey, which you have completed. You indicated you were able to participate in a virtual interview. The virtual interview will take about 45-50 minutes to complete.**

Interviews will be audio recorded for data collection purposes, any identifying information will be removed from the audio transcript.

Do you agree to allow the research team to record your interview for transcription purposes?
___yes___no

Participants physically located in the EU/EUA will not be eligible for this study due to the General Data Protection regulations.

Your study-related information be kept confidential.

Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. The names or personal identifiers of participants will not be published or presented.

You will receive a copy of the book “Working with Families of Young Children with Special Education Needs” for my participation in this research.

You can withdraw or be removed from the study at any time.

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time. Your participation in this research is voluntary. Your decision whether or not to participate, or to withdraw after beginning participation, will not affect your current or future dealings with the University of Illinois at Urbana-Champaign.

The researchers also have the right to stop your participation in this study without your consent if they believe it is in your best interests or you were to object to any future changes that may be made in the study plan.

Your data collected will not be used for any other research.

Your information will not be used or distributed for future use, even if identifiers are removed.

If you have questions about this study, please contact

Dr. Allison Witt at awitt1@illinois.edu or Jami Swindell at swindll2@illinois.edu. If you have any questions about your rights as a participant in this study or any concerns or complaints, please contact the University of Illinois at Urbana-Champaign Office for the Protection of Research Subjects at 217-333-2670 or via email at irb@illinois.edu.

Do you understand the consent procedures? Do you certify that you are 18 years old or older? By verbally agreeing to continue this interview, you will indicate willingness to voluntarily take part in this study.

Do you agree to continue this interview and your willingness to take part in this study?

yes no (discontinue interview: follow protocol for ending interview)

H. Chinese (Mandarin)

幼儿教育中的家庭参与：从全球视角看家庭参与有特殊教育需求的儿童教育

[READ BY RESEARCHER:] Hello, you indicated you are interested in participating in a voluntary research study. The purpose of this study to examine Early Childhood Education and Care (ECEC) professional practices when working with families of very young children with special education needs, developmental disabilities, or complex medical conditions. We are interested in learning more about how ECEC professionals provide support and engage families in ECEC settings. Participating in this study includes an on-line demographic survey with an option to participate in a virtual interview. We are completing the virtual interview, which should last about 45-50 minutes. There are no risks to individuals participating in this survey beyond those that exist in daily life. Although your participation in this research may not benefit you personally, it will help us understand what strategies early childhood professionals to engage families in their child's ECEC services on a global scale. The study could contribute to the understanding of professional practices and strategies to supporting families of young children with special education needs in ECEC settings.

您好，您表明了自愿参加此次调研的兴趣。本研究的目的是评定**早期幼儿教育及专业儿童护理项目（ECEC）**人员在与儿童及其家庭的工作相处中的日常实践。这些儿童主要指需要特殊教育的儿童；残疾·病弱儿童，或是需要复杂的医药条件支持的儿童。我们想要学习和了解早期幼儿教育及专业儿童护理项目（ECEC）人员是如何对这些家庭提供帮助，以及和这类家庭工作的日常。参

与这项调研需要完成一个网上调查问卷，以及选择性参加一个线上访谈。线上访谈大概持续45-50分钟。参与这项调研不会给您的日常生活带来任何风险。虽然这项调研不会为您个人带来好处，但是会帮助我们更好地理解全球范围内**早期幼儿教育及专业儿童护理项目人员**是如何帮助有特殊教育需求的家庭。这项研究也能够帮助人们了解**早期幼儿教育及专业儿童护理**的专业实践方案，以及帮助有特殊儿童教育需求的家庭应使用策略。

The Principal Investigator for this study is Dr. Allison Witt, Director of the Office of International Programs, University of Illinois, Urbana-Champaign. My name is _____ and I am a research assistant for Dr. Witt and Jami Swindell, the lead investigator.

这项调研的主要负责人是伊利诺伊香槟大学国际项目办公室的主管 Dr. Allison Witt。我叫____，我是项目负责人（Dr. Witt 和 Jami Swindell）的助理。

This research will be performed completely on-line. The study procedures included an online survey, which you have completed. You indicated you were able to participate in a virtual interview. The virtual interview will take about 45-50 minutes to complete.

这项调研将在线上进行。调研步骤分两步。**第一步是您已经完成了的网上调查问卷**。第二步是您自愿参加的线上访谈，大约45-50分钟。

Interviews will be audio recorded for data collection purposes, any identifying information will be removed from the audio transcript.

出于数据整理的目的，线上访谈将被录音，但是任何个人信息都会被移除。

Do you agree to allow the research team to record your interview for transcription purposes?

___yes ___no

您是否同意研究团队在采访时录音，以便于之后转录为文字？

同意____ 不同意____

Participants physically located in the EU/EUA will not be eligible for this study due to the General Data Protection regulations.

基于《通用数据保护条例》，此项调研的参与者的现居住地不能是欧洲联盟国家或是美国

Your study-related information be kept confidential. Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. The names or personal identifiers of participants will not be published or presented.

您在调研中提供的任何相关信息都会被保密。根据法律与学校规定，任何教职工、学生以及获准了解调查结果的个人都会对您回答的内容进行保密。我们也不会再在出版物或者其他场合、媒介中披露任何有关您个人身份的信息。

You will receive a copy of the book “Working with Families of Young Children with Special Needs” for my participation in this research.

为了表达对您参与此调研的感谢，您将获赠一本《与特殊需要幼儿家庭合作》。

You can withdraw or be removed from the study at any time.

您可以随时撤回您填写的内容以及退出调查

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time. Your participation in this research is voluntary. Your decision whether or not to participate, or to withdraw after beginning participation, will not affect your current or future dealings with the University of Illinois at Urbana-Champaign.

如果您参与了我们的调查，您可以随时撤回您填写的内容以及退出调查。您的参与**完全自愿**，您有关于是否参与、或者中途退出的任何决定都不会影响到您今后同伊利诺伊大学香槟分校的任何合作。

The researchers also have the right to stop your participation in this study without your consent if they believe it is in your best interests or you were to object to any future changes that may be made in the study plan.

我们的研究人员在如下情况有权在未经您允许的前提下终止您的参与：（1）他们认为这符合您的最大利益，或者（2）您反对本研究在未来可能做出的一些更改或修正。

Your data collected will not be used for any other research. Your information will not be used or distributed for future use, even if identifiers are removed.

您提供的任何数据，信息都不会被用于其他研究。您的信息不会被用于任何其他研究。

If you have questions about this study, please contact Dr. Allison Witt at awitt1@illinois.edu or Jami Swindell at swindll2@illinois.edu. If you have any questions about your rights as a participant in this study or any concerns or complaints, please contact the University of Illinois at Urbana-Champaign Office for the Protection of Research Subjects at 217-333-2670 or via email at irb@illinois.edu.

如果您对此项调查研究有任何疑问或是顾虑，请联系 Dr. Allison Witt at awitt1@illinois.edu 或是 Jami Swindell at swindll2@illinois.edu。如果您对自己作为此次调研的参与者的权利有任何疑问或是顾虑，请联系伊利诺伊大学香槟大学保护研究对象办公室。电话：217-333-2670，邮箱：irb@illinois.edu。

Do you understand the consent procedures? Do you certify that you are 18 years old or older? By verbally agreeing to continue this interview, you will indicate willingness to voluntarily take part in this study.

您了解同意书上的内容了么？您是否年满18岁？我们将通过口头同意协议进行线上访谈，您将表明是自愿参加这次调研。

Do you agree to continue this interview and your willingness to take part in this study? ____ yes ____ no (discontinue interview: follow protocol for ending interview)

您是否同意做线上访谈？以及您是否自愿参与此次调研？（如若不同意参加线上访谈，按照协议结束面试）

同意____ 不同意____

Appendix J

Interview Script: Introduction and Follow Up

I. English

Introducing the Interview:

1. Introduction (to study purpose, introduce self (education/background/country of origin))
2. Using Zoom Tools (microphone, mute, chat, exit)
3. Start Recording
4. Verbal Consent Script and Confirmation of recording: Gain verbal consent to participate. State the participant can skip questions or end the interview at any time.
5. Introduce topic
6. Introduce interview questions
7. Start interview

Ending the Interview: Thank you for sharing this information with me. We will use this to learn more about how teachers support students and families across the globe. We would like to send you a copy of the interview to check and make sure we have captured everything correctly. Can you please share your e-mail address?

_____ (Document email on BOX form).

We would also like to send you a copy of the book *Working with Families of Young Children with Special Needs*. Can you share an address that we can mail this to you, it can be your home or school address? _____ (Document mailing address on BOX form).

Thank you again for taking the time to talk with me about how you work with children, teachers, and families. Please reach out to us if you have any questions or need to follow up with us for any reason.

I. Chinese (Mandarin)

Introducing the Interview:

1. Introduction (to study purpose, introduce self (education/background/country of origin))
2. Using Zoom Tools (microphone, mute, chat, exit)
3. Start Recording

4. Verbal Consent Script and Confirmation of recording: Gain verbal consent to participate. State the participant can skip questions or end the interview at any time.
5. Introduce topic
6. Introduce interview questions
7. Start interview

Ending the Interview: Thank you for sharing this information with me. We will use this to learn more about how teachers support students and families across the globe. We would like to send you a copy of the interview to check and make sure we have captured everything correctly. Can you please share your e-mail address? _____ (Document email on BOX form). 非常感谢您与我分享这些信息。我们将使用它来更多的了解全球范围内教师是如何支持学生和家庭的。我们将会给您发送一份访谈的附件，请您帮忙确认副本内的所有信息都属实。请留下您的邮箱地址_____ We would also like to send you a copy of the book Working with Families of Young Children with Special Needs. Can you share an address that we can mail this to you, it can be your home or school address? _____ (Document mailing address on BOX form). 同时，我们将寄给您《与特殊需求幼儿家庭合作》这本书以示感谢，请留下您的收件地址（家庭住址或是工作单位住址）_____ Thank you again for taking the time to talk with me about how you work with children, teachers, and families. Please reach out to us if you have any questions or need to follow up with us for any reason. 再次感谢您抽出宝贵的时间与我分享您是如何和儿童，其他教师，及家长工作的。如果您之后有任何问题或是想要与我们跟进的，请随时联系我们。

Appendix K
Interview Follow Up Form

J. English

Interviewee Name	EX: JANE DOE
Email Address	EX: JANEDOE@JMAIL.COM
Phone Number	EX: (333)666-7777
WhatsApp/WeChat	EX: JDDOE on WeChat
Country	EX: United States

J. Chinese (Mandarin)

Name 姓名	Date of Interview 访谈日期	Email 邮箱地址	Mailing Address 收件地址