



# Promoting the inclusion of infants and young children with disabilities in child care

Participant Module

**Promoting Social Competence**



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April 2005

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# Session: Promoting Social Competence

## OVERVIEW

### **What this workshop should accomplish:**All

children have challenges from time to time that interfere with their abilities to stay positive and to feel a sense of belonging. Most of the time, these challenges are because children do not have a good solution or a positive way to have their needs met. Sometimes these somewhat negative interactions can interfere with the child's ability to maintain pro-social interactions. Other times children need to learn strategies for initiating and responding to interactions and to converse with each other. Child care providers will explore strategies to support children's social competence and enhance social interactions.

### **From this session, participants should gain understanding about:**

- i Describe what is meant by "social competence"
- i Identify appropriate expectations for the behaviors of young children
- i Identify positive solutions to common problems related to young children's social behavior

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## BACKGROUND

Often parents will say that all they want is for their children grow up to be happy. For many, happiness means having friends and feeling connected to people. People with disabilities have a long tradition of being isolated from community life. They have not been afforded the same opportunities to develop and maintain lasting relationships.

Instead many people who have disabilities have been forced to live their lives separately. They have been taking school buses to segregated schools outside of their communities. While neighborhood children play together in the late afternoons and evenings, the children with disabilities have a difficult time entering a peer group that is unfamiliar.

Perhaps the isolation that so many people face begins at a young age. The early years are critical years for development. Like so many other aspects of development, opportunities for acquiring lasting friendships begin when children are very young. Thus, learning how to make and keep friends begins at an early age. This can be difficult for children with special needs because many skills necessary for social competence are difficult to learn.

All children have challenges from time to time that interfere with their abilities to stay positive and to feel a sense of belonging. Most of the time, these challenges are because children do not have a good solution or a positive way to have their needs met. Sometimes these somewhat negative interactions can interfere with the child's ability to maintain pro-social interactions. Other times children need to learn strategies for initiating and responding to interactions and to converse with each other.

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With intervention, children can learn the skills that they need to develop and maintain friendships. The child care setting is ideal for children to learn beginning friendship skills. Children are able to spend time with each other in many different kinds of activities and play routines. Children can interact throughout the day with each other. This session focuses on identifying ways that children can learn how to be positive with their friends in child care.

It is important to provide children with an atmosphere of love, trust, and respect in order to foster the skills for positive social interactions. We promote children's competence if we raise their self-esteem, help them succeed by following their lead, and provide them with real choices and real control over their young lives. When we let children do their best, not comparing them to others, and when we let children do the most for themselves, we have done the most for them. Doing these things helps to promote children's social competence. When children can make friends and keep friends, play games and make their own rules, we promote their social competence. This social competence lays the foundation for important adult skills and opportunities for meaningful work later in life.

One major challenge of child care personnel is to help children to build relationships. In the past, children with special needs have been kept away from children with typical development. This created a vacuum where children who had special needs grew to be adults living and working in community settings. As adults, many had limited experience in developing relationships in community settings. With inclusion, children who have special needs are provided with the same opportunities as children with typical development.

Instead of only focusing on relationship building between children with

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special needs and children with typical development, it is important to note that relationship building is an important goal for all early childhood programs. Current trends indicate that there is less stability in care environments. Parents attend training programs and work. Furthermore, child care is becoming “less affordable” as costs increase. Due to ever changing parent schedules and increasing costs, it is typical to see class lists for a particular program change daily, if not hourly. Thus, one challenge of child care personnel is to facilitate ongoing relationships between children in an environment that changes frequently.

Children’s behaviors that challenge the care setting are an obstacle for settings that often change. In order for children to “get along” with each other and to take the time to be friends, behaviors that challenge a setting should be avoided. Early childhood personnel report the children are “misbehaving” and they are having a bad day. However, are they really misbehaving? As we explore social relationships and report observations of typical settings, we find that mostly children are behaving in ways that are appropriate for their “ages and stages”.

Although behaviors may be appropriate for children’s ages and abilities, parents want their children to behave. Child care personnel want to manage their groups so that children can learn and play together. We have techniques for most “misbehaving” troubling early childhood personnel. By determining causes, preventing, and redirecting, early childhood settings can be more productive. As the settings are managed, children can learn about each other and find their first friends.

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**Typical Development and Expectations:**

To help children grow and develop in their own way, a solid understanding of children's development is essential. Although most children develop skills in a sequential manner, ALL children do so according to their own individual timetable. Two questions to ask yourself when a child's development seems to be different than other children are: 1) are the expectations beyond the child's abilities, thereby causing frustration; and 2) or are the expectations beneath the child's abilities, producing boredom. Either way the end result may be challenging behavior.

**Challenging Behavior**

Children may engage in various behaviors that challenge adult patience and understanding. They may cling to adults or have difficulty separating from their parents. They may be more active, talk out a lot, or not pay attention or follow classroom routines. Some children are withdrawn, some are active, some seem to be in their own worlds, and others may seem overly assertive or aggressive.

What is behavior? A behavior is a specific action that a child does that you can observe. Behaviors can be grouped into two categories - those that we do naturally such as sneezing, blinking and shivering; and those that we have learned to do at some time in our life such as dressing, talking or driving a car.

We know that most behavior is learned. Children learn how to share, take turns, or interact appropriately with other children through their experiences in approaching other children and interacting with them in groups. Sometimes children can learn behaviors that do not necessarily work well for them. For example, if children's attempts to join a play group are repeatedly rejected by other children, the children may learn

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that they are not wanted or appreciated and they may stop trying to play with other children. Often children engage in behavior in order to gain or avoid consequences. For example, a child may do something that another child requests in order to gain that child's attention or friendship. Attention can be a powerful consequence and children may receive equal attention from adults for behavior that is both appropriate or inappropriate. In fact, children often get more attention from adults for "being bad" than they do for "being good". Some children with disabilities may have fairly typical behavior for their chronological ages but adults may think that the behavior is associated with the disability. For example, many two and three year old children have toileting accidents, a situation which is understood and accepted by most adults. However, when a child with a disability has accidents, instead of viewing them as "typical accidents", many adults begin to see this as a part of a child's disability. Adults may begin to see the child as not toilet trained and possibly as not having the potential of becoming independent in toileting because of the disability. When children with disabilities are not welcomed by other children into play groups, teachers may attribute this "rejection" to the disability, rather than finding ways of helping the child with a disability develop social competence. Some children with disabilities may demonstrate behavior that is not understood by other children and that may result in other children staying away from the child with a disability. For example, when a child is excited, this excitement and pleasure may be accompanied by behavior such as hand flapping (waving the hands in the air) or other "different" types of behavior. These patterns may actually be part of what is called behavior chains. In this example, hand flapping may become paired with excitement and pleasure so that every time a child expresses pleasure, the hand flapping also occurs. Many typical behaviors are part of behavior chains. For example, when food is put in front of us, we pick up a utensil, get the food, bring it to our mouth, take it off the utensil, chew and swallow, and

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enjoy (or don't) the taste and texture of the food. Behavior chains include a series of discrete behaviors (pick up the utensil, chew) that we learn to do as a total pattern. Sometimes, as with the example of hand flapping, unusual behaviors can become part of the behavior chain or pattern. In order to help children build competence, teachers need to observe the behavior that is challenging to see if it is occurring by itself or, more likely, as part of a chain or pattern. Observation helps teachers understand the way in which the behavior is related to other things that may be happening in the classroom. Observation also helps to create ways of teaching so that the child develops social competence.

**Positive Practices**

Many types of challenging behavior fulfill a function (or purpose). A behavior of suddenly screaming, for example, may be used as communication or to gain adult attention. A child who starts wandering around the room may avoid doing what the other children are doing. Observing children can assist teachers to identify not just the behavior (screaming, talking out, hitting) but the purpose or function of the behavior. Hitting, for example, may have a function of having the other child leave the area. When teachers observe children and identify the function of the behavior, they can assist children to replace the undesirable behavior with a more appropriate behavior with the same function. For example, when a child hits another child and that child leaves, rather than telling the child not to hit or punishing the him/her for hitting, a teacher can teach the child to use other more appropriate strategies to play alone. The child might tell the other child that s/he doesn't want to play right now. Teachers can teach this behavior by observing the child and knowing that the child wants to play alone for a while and watching to see when another child is approaching. At this point, the teacher might intervene by suggesting to the first child how and what to say to the second child. The antecedent that is likely to provoke the hitting is a child approaching a child who wants to be alone.



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The teacher might also use another strategy of redirecting the second child ("Bill, John is playing alone for a minute. Why don't you join Steven. Steven and Matt are playing trains and they need someone to help build the track.") Both of these (as well as others) use positive ways of intervening with challenging behavior.

Creating opportunities in the classroom for children to perform positive social roles can help replace less than desirable behavior with opportunities to learn more appropriate behavior. Providing children opportunities to perform roles that put them in social situations, like passing out napkins to everyone during snack or being the person responsible for feeding the hamster, allows even reluctant children to engage in positive roles. Teachers can do a great deal to create a positive social atmosphere in their classrooms by thinking about and generating positive expectations for children. Teachers have a tendency to label children in terms of their social abilities. A child may get a label of "lazy" or "the one who helps others a lot" or just simply "difficult." Adult expectations do a lot to shape children's behavior. Children seem to match their behavior to the expectations of adults who are important to them. So, it is important for teachers to make sure that the "descriptions" or "labels" that they may assign to children are positive. Ideally, none of us would assign labels or descriptions to other individuals, however, many individuals do "classify" the behavior of other people -- families generate labels for children's roles within the family ("Susie is my baby girl") or managers label behavior of their co-workers ("you can always count on -----"; "----- is always late for work"). When people are sensitive to the expectations of others around them, they have a difficult time escaping those expectations.

**Notes:****Promoting Positive Social Skills**

Observing children in their interactions with other children is a critical first step in promoting positive social skill development for all children in the group. Teachers need to decide whether or not interactions are effective -- gain their desired results -- and whether or not interactions are age appropriate and positive. Some interactions are effective but may not be positive; some may be positive but not effective. Others may be positive and effective but may not be age appropriate. Successful interactions are responsive to others and use a variety of forms -- non-verbal and verbal. Some children with disabilities may not yet have developed age-appropriate forms of interaction. They may not speak well enough to initiate interactions verbally or may use interactions (like hitting) that are age appropriate (although not desirable) for much younger children. Teachers need to understand how interactions are occurring in order to be able to increase social skill development appropriately. This evaluation phase is the first step in promoting positive social skill development for all children.

There are many strategies that teachers may use to increase appropriate, effective interactions among children. Establishing a classroom climate of positive interactions and making sure that activities allow opportunities for interactions is critical. This general strategy is referred to as establishing a classroom "community" -- one that respects and acknowledges the contributions of all members. More formal and specific strategies can be helpful when children do not seem to be gaining social skills or interacting with other children in positive ways.

Positive solutions to common problems are provided as an extra handout with this module. A first step in prevention or intervention is problem identification. Using an eight step process, caregivers can 1)

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begin to define the problem objectively; 2) decide on an appropriate alternative behavior; 3) consider any individuals who may be contributing to the problem; 4) determine which times of the day are the most problematic; 5) do a frequency count of the observed behavior; 6) consider areas of the child's environment where the behavior takes place; 7) generate a list of possible causes for the behavior and 8) list all the things that have been done in the past when the behavior is observed. It is important to recognize that by using this eight step method that observation provides opportunity to teach a desired alternative behavior and enhance a child's social competence.

## Language and Social Skills

Some children have good language abilities while other children, particularly children with delayed development and some disabilities, may not be as competent in language as their peers. Language abilities -- both understanding and expression -- are linked together with social skills, particularly as children become competent in using language to express their desires, feelings, and thoughts. It is important to remember that children communicate in various ways including through crying, reaching toward objects, pointing, gestures or signing, pictures, vocalizing, one word statements, phrases or sentences. The reasons for communicating are also varied for reasons: to request, to protest, to comment, to answer questions, and to ask questions. A child communicates when and where he/she needs or wants to communicate. This can be early in the morning, in the afternoon, or in the evening. It can be at home, at the park, or while in child care. The best time to teach communication skills is when and where the child needs to or wants to communicate. Three steps to remember to encourage children to communicate are 1) Watch - to see what the child is interested in and watch for signs that the child is communicating with

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you; 2) Wait - don't talk or ask questions for a few moments to give the child a chance to initiate communication; and 3) Follow the child's lead - talk about and play with the materials that the child is interested in.

There are several strategies for encouraging communication. Imitating what the child says or does is referred to as mirroring. You can also engage in turn-taking where you can develop a pattern of conversation alternating between you and the child. Children can also be encouraged to communicate by repeating back to them what they attempt to communicate, called reflecting. Adults can reflect back to a child what the child says and add words to it to encourage new concepts or more elaborate sentence structure, expanding the child's communication skills. Adults can also self-talk by talking about how they think, feel, or what they are doing.

Environmental strategies for encouraging communication involve arranging the setting or materials you and the children are using to make it more likely that the children will need to or want to communicate. For instance, if you purposefully "forget" to provide everything that is needed for an activity or place objects out of reach, but still within sight. You can also do something silly, such as trying to put a doll's shoe on the child's foot, then wait for a response from the child. Another strategy is referred to as piece by piece where you intentionally hold back a piece of a toy or activity material to encourage the children to ask for them.

Expansion of a child's language provides all children with more sophisticated models than what they are using currently, with more clearly spoken speech when children have mispronunciations, and with more information than what a child may be able to express. A child referred to his brother "Philip" as "Fip". Rather than correct him, his mother always referred to Philip as Philip (did not model Fip) so when

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the brother said something like "Fip play car," his mother expanded on this by repeating what the child had said, "Philip is playing with the blue car. He likes to make it go." Expanding language is a good strategy for all children because it provides them with more information, acknowledges their communication intent (in this case comment about the car) and provides clear spoken models. Children learn through imitation so it is important for adults to model correct language used in positive social contexts. A teacher can acknowledge a child's interest when the child brings them a toy by saying "you brought me the blue ball. Do you want to play ball when we go outside?" and following this with arranging for two children (or more) to play with the ball together, promoting children's socialization. Expanding language and the intent allows children to develop positive social interactions. Sometimes, teachers might respond by saying "Put the ball away. We don't play ball in the classroom, only outside" which does not provide correct language models nor promote socialization.

**Social Communication**

Language and communication are inter-related but separate in many ways. Even the youngest infant communicates long before making many sounds or saying words. These communications are sometimes referred to as "non-verbal" and they persist throughout our lives -- even when we are able to express ourselves through speaking and writing. Many children with disabilities do not learn to talk with the same competence as their peers or at the same time. In other words, they may develop language competencies but do so after the time that other children have acquired these same competencies. Yet, many children with disabilities are able to communicate but do so with non-verbal forms or with verbal-non-verbal forms combined. Mutual attention, commenting, and responding, as well as other communicate functions

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such as requesting, are often used by children even after they have acquired some language. For example, a child who brings a toy to another child may be using a non-verbal request to play with me. An infant and his mother who are both looking at the same toy are demonstrating mutual attention. These types of communicative functions are important for social communication. Children need to be engaged together (mutual attention) and responsive to each other for social skills to develop. Social communication forms a basis on which language skills for use in social situations can be learned. Teachers can promote these types of interactions by: (1) observing to recognize when they occur; and (2) intervening to acknowledge intent and model language. So, for example, when Jillian brings a toy to Lucrecia, an observant teacher might say "Jillian is showing her puppy dog toy to Lucrecia so that they can play together. Are you girls going to take the dog on a walk?" This type of response acknowledges Jillian's intent, makes her intent known to Lucrecia, and sets the stage for social play.

### Summary

Social competence is of prime importance for all children. Children show a lot of individual differences in their social abilities -- some are shy or withdrawn and may not seek out social situations while others may be very active and aggressive. The classroom climate created by teachers is important in fostering social competence. Teachers model both behavior and language for all children in a room and need to be aware of the importance of their actions in creating a positive social atmosphere in the classroom. This is particularly important because young children value adult caregivers and pay attention to the verbal and non-verbal messages sent through teachers. Children are likely to adjust their behavior to adult expectations -- both positive and negative expectations. When creating activities for the classroom, teachers should keep social interactions in mind. Creating activities where children have limited opportunities to interact with each other (and

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maybe more opportunities only to interact with adults or not to interact at all) does not help foster social competence. Activities that encourage children to work and play together create opportunities in which social competence can develop and be learned.

Some children need more assistance in developing social competence than do others. Some children may lack language skills that are related to social competence and may need teachers to use specific strategies to promote language competence and use of language and communication in social situations. Others may lack social skills and may need teachers to assist them in developing appropriate skills for social situations. Children develop self-esteem, confidence in their abilities and in themselves, and understandings of their roles and expectations, during the early childhood years. Self-esteem, confidence, and role expectations may stay with children throughout life. Early childhood care and education staff are with children for many hours, often longer than children's parents and other family members and play a critical role in establishing social competence in young children.

It is important to provide children with an atmosphere of love, trust, and respect in order to foster the skills for positive social interactions. We promote children's competence if we raise their self-esteem, help them succeed by following their lead, and provide them with real choices and real control over their young lives. When we let children do their best, not comparing them to others, and when we let children do the most for themselves, we have done the most for them. Doing these things helps to promote children's social competence. When children can make friends and keep friends, play games and make their own rules, we promote their social competence. This social competence lays the foundation for important adult skills and opportunities for meaningful work later in life.

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## SESSION OUTLINE

**I** Welcome the group

**II** Interview Introductions

**III** Positive Practices

**BREAK**

**IV** Social Skills Intervention

**V** Social Communication Strategies

**VI** Summing Up



# Principles of Enhancing Social Competence

- , Respect children's feelings
- , Know that rules are defined by cultures
- , Teach at difficult moments
- , Watch social reactions from children
- , Provide material for development of mutual interests
- , Help children become socially competent by teaching
- , Set the tone for social behavior in your classroom
- , Model social competence through your own interactions

# ABC's of Social Behavior

i A behavior is a specific action that you can observe.

i Behaviors can be grouped into two categories:

### Those that we do naturally

sneezing  
shivering  
blinking

### Those that we learn

talking  
driving  
dressing

i Most of children's behaviors are learned. Children learn social behaviors primarily through their interactions with adults and other children.

i Behaviors can be analyzed by looking at the following:

- T the situation that comes before the behavior (Antecedent)
- T the actual action that is observed (Behavior)
- T what happens immediately following the action (Consequence)

i Example **ABC** process of observing a behavior:

Hannah is playing with a dollhouse on the floor near the dramatic play area. T.J comes over and sits down beside her. They both play with the dolls and the house items and Miss Cunningham notices that they are sharing, not fighting. She approaches the pair and says "You two are playing so nicely together."

**Antecedent** - Hannah playing on the floor with the dollhouse

**Behavior** - Hannah and T.J. playing with the dolls

**Consequence** - Miss Cunningham praises Hannah and T.J.

## Why is the child behaving that way?

### **The child appears aggressive because they may have difficulty....**

- < sharing toys
- < waiting his/her turn
- < participating in group activities
- < tolerating losing at a game

### **The child may be seeking attention because he/she...**

- < is going through changes at home
- < is avoiding certain tasks or expectations
- < not feeling good about him/herself
- < gets what he/she wants through the behavior

### **The child exhibits distractibility, high levels of activity, and/or is impulsive because...**

- < is over stimulated and sensitive to environmental factors
- < is expected to sit and/or pay attention beyond his/her capability
- < has an underlying neurological or physical issue
- < has yet to develop the necessary skill for self-control

### **Group time is challenging because...**

- < the activity lasts longer than the child is able to sit and/or attend
- < the activity does not hold the child's interest
- < the activity is a part of a set of continuous group activities

### **Nap time is a difficult time for the child because...**

- < he/she is not tired or is overly tired
- < the transition from pre-nap activities is hard
- < he/she has difficulty relaxing

## Why is the child behaving that way?

### **The child has difficulty following directions because he/she...**

- < doesn't understand what you mean
- < didn't hear the directions
- < does not want to do it
- < is seeking extra attention

### **The child appears to be having problems during playtime because he/she is...**

- < angry or frustrated
- < receiving attention from others while exhibiting these behaviors
- < bored
- < unaware of how to play with others or with the toys/materials

### **There are some social concerns about the child getting along with other children because he/she ...**

- < needs to feel in control of situations
- < needs your attention
- < has poor self esteem
- < would benefit from guidance to develop interaction skills

### **The child demonstrates “temper tantrums” because he/she...**

- < gets frustrated when denied something
- < is tired
- < has yet to develop the abilities to meet the task
- < misunderstands your words, or is unable to express him/herself
- < is experiencing physical problems that is causing pain or discomfort

### **Transitions may be difficult for a child because the child...**

- < wants to continue the current activity
- < has difficulty cleaning up and putting materials away
- < gets bored waiting for a new activity
- < does not know what to expect next

# **Eight Steps to Prevention & Intervention**

- 1. Define the problem objectively.**
- 2. Decide on an appropriate alternative behavior.**
- 3. Consider any individuals who may be contributing what you observe.**
- 4. Determine which times of the day are the most problematic.**
- 5. How often does the behavior occur?**
- 6. Consider the areas of the room where you generally observe the problem.**
- 7. Generate a list of possible causes for the behavior.**
- 8. List all the strategies that you have previously tried.**

# Plan of Action - Example

Child's Name: Anthony

<p><b>Area of social competence to increase:</b>  <i>Keeping hands/feet to self; using words to express anger and frustration</i></p>		
<p><b>Areas to decrease:</b>  <i>Hitting; kicking; hair-pulling</i></p>		
Possible causes	Prevention	Intervention
<p><i>frustration/anger</i></p> <p><i>has trouble sharing</i></p> <p><i>wants to control the situation</i></p>	<p>&lt; <i>reinforce Anthony for keeping hands and feet to self</i></p> <p>&lt; <i>teach Anthony words to use when he is angry</i></p> <p>&lt; <i>reinforce Anthony whenever he shares with a friend</i></p> <p>&lt; <i>set him up for success by reminding him of the rules in the block area</i></p> <p>&lt; <i>ask Anthony what area he wants to play in at the beginning of free play time</i></p> <p>&lt; <i>revise chore chart to make choices instead of jobs being assigned by the caregiver</i></p>	<p>&lt; <i>state the rule "we keep our hands and feet to ourselves tell Anthony that he needs to choose another play area to play</i></p> <p>&lt; <i>can you think of some ideas?</i></p>

# Plan of Action

Child's Name: \_\_\_\_\_

<b>Area of social competence to increase:</b>		
<b>Areas to decrease:</b>		
<b>Possible causes</b>	<b>Prevention</b>	<b>Intervention</b>

# Encouraging Communication

**It is important to remember that children communicate in various ways including**

crying

reaching toward objects

pointing

gestures or signing

pictures

vocalizing

one word statements

phrases or sentences

**The reasons for communicating are also varied for reasons:**

to request

to protest

to comment

to answer questions

to ask questions

A child communicates when and where he or she needs or wants to communicate. This can be early in the morning, in the afternoon, or in the evening. It can be at home, at the park or while in child care. The best time to teach communication skills is when and where the child needs to or wants to communicate.

**Three steps to remember to encourage children to communicate are**

- 1) watch - to see what the child is interested in and watch for signs that the child is communicating with you
- 2) wait - don't talk or ask questions for a few moments to give the child a chance to initiate communication
- 3) follow the child's lead - talk about and play with the materials that the child is interested in.

Continued



## Encouraging Communication - Continued

**There are several strategies for encouraging communication:**

- & Imitating what the child says or does is referred to as mirroring.
- & You can also engage in turn-taking where you can develop a pattern of conversation alternating between you and the child.
- & Children can also be encouraged to communicate by repeating back to them what they attempt to communicate, called reflecting.
- & Adults can reflect back to a child what the child says and adding words to it to encourage new concepts or more elaborate sentence structure expanding the child's communication skills.
- & When you are with a child adults can self-talk by talking about what you are doing, thinking, or feeling.

**Environmental strategies** for encouraging communication involve arranging the setting or materials you and the children are using to make it more likely that the children will need to or want to communicate.

For instance:

- & if you purposefully "forget" to provide everything that is needed for an activity or you place objects out of reach, but still within sight
- & You can also do something silly, such as trying to put a doll's shoe on the child's foot then wait for a response from the child
- & Another strategies is referred to as piece by piece where you intentionally hold back a piece of a toy or activity material to encourage the children to ask for them

Adopted from Morris, A. & Rapp, N. (1999).

## Expanding Children's Language

<b>The child says...</b>	<b>The adult says...</b>
<b>shoe</b>	
<b>give me</b>	
<b>want more</b>	
<b>I would like a story</b>	
<b>I am not your friend</b>	
<b>Teacher, my mommy says my dress is new</b>	
<b>Daddy book</b>	
<b>My mom went to work</b>	
<b>I brought my lunch to school</b>	

# Aspects of the Environment

## 1. Physical Environment

- arrangement of materials
- selection of activity area
- location of activity in the room
- promoting participation with the materials

## 2. Organizational Environment

- schedule
- transition planning
- staff patterns
- classroom rules

## 3. Instructional Environment

- formal and informal instruction
- group size (number of children and allocated space)
- format of directions (i.e. one-step vs. multiple step)

# REFERENCES & RESOURCES

Cartwright, S. (1993). Cooperative learning can occur in any kind of program. Young Children, 48(2), 12-14.

Goldstein, H., & Gallagher, T. M. (1992). Strategies for promoting the social-communicative competence of young children with specific language impairment. In S.A. Odom, S.A. McConnell, & M.A. McEvoy (Eds.), Social competence of young children with disabilities: Issues and strategies for intervention, (pp. 189-213). Baltimore: Paul H. Brookes.

Goldstein, H., Kaczmarek, L.A., & Hepting, N.H. (1996). Indicators of quality in communication interventions. In S. Odom & M. McLean (Eds.), Early intervention and early childhood special education: Recommended practice (pp.197-221). Austin, TX: Pro-Ed.

Guralnick, M.J. (1992). Peer social competence Interventions for young children with disabilities. In S.A., Odom, S.A. McConnell & M.A. McEvoy (Eds.), Social competence of young children with disabilities: Issues and strategies for intervention (pp. 113-33). Baltimore: Paul H. Brookes.

Guralnick, M.J., Gottman, J.M., & Hammond, M.A. (1996). Effects of social setting on the friendship formation of young children differing in developmental status. Journal of Applied Developmental Psychology, 17, 625-651.

Philadelphia Inclusion Network a program of Child and Family Studies Research Programs at Thomas Jefferson University

Guralnick, M.J., & Neville, B. (1997). Designing early intervention programs to promote children's social competence. In M. J. Guralnick (Ed.), The effectiveness of early intervention (pp. 579-610). Baltimore, MD: Paul H. Brookes.

Hanson, M.J., Guitierrez, S., Morgan, M., Brennan, E.L., & Zercher, C. (1997). Language, culture, and disability: Interacting influences on preschool inclusion. Topics in Early Childhood Special Education, 17, 307-336.

Hundert, J., Mahoney, W.J., & Hopkins, B. (1993). The relationship between the peer interaction of children with disabilities in integrated preschools and research and classroom teacher behaviors. Topics in Early Childhood Special Education, 13, 328-343.

Johnson, R., & Johnson, D.W. (1996). Building friendships between handicapped and nonhandicapped students: Effects of cooperative and individualistic instruction. American Educational Research Journal, 18, 415-424.

Kaiser, A.P., & Gray, D.B. (1993). Enhancing children's communication: research foundations for interventions. Baltimore: Paul H. Brookes.

Katz, L. & McClellan (1997). Fostering children's social competence: The teacher's role. Washington: NAEYC.

Kohler, F.W., & Strain, P.S. (1990). Peer-assisted interventions: Early promises, notable achievements, and future aspirations. Clinical Psychology Review 10, 441-52.

McConnell, S.A., Sisson, L.A., Cort, C.A., & Strain, P.S. (1991). Effects of social skills training and contingency management on reciprocal interaction of preschool children with handicaps. Journal of Special Education, 24, 473-495.

McEvoy, M.A., Twardosz, S, & Bishop, N. (1990). Affection activities: Procedures for encouraging young children with handicaps to interact with their peers. Education and Treatment of Children 13, 159-67.

McEvoy, M.A., Odom, S.A., & McConnell, S.A. (1992). Peer social competence Interventions for young children with disabilities. In S.A., Odom, S.A. McConnell & M.A. McEvoy (Eds.), Social competence of young children with disabilities: Issues and strategies for intervention, (pp. 13-33). Baltimore: Paul H. Brookes.

McLean, LK, & Cripe, J.W. (1997). The effectiveness of early intervention for children with communication disorders. In M. J. Guralnick (Ed.), The effectiveness of early intervention, (pp. 349-428). Baltimore: Paul H. Brookes.

Odom, S.A., & Brown, W.H. (1993). Social interaction skills interventions for young children with disabilities in integrated settings. In C.A. Peck, S.A. Odom, & D. Bricker (Ed.), Integrating young children with disabilities into community programs: Ecological perspectives on research and implementation, (pp. 39-64). Baltimore: Paul H. Brookes.

Odom, S.A., McConnell S.A., & McEvoy, M.A. (1992). Peer-related social competence and its significance for young children with disabilities. In S.A. Odom, S.A. McConnell, & M.A. McEvoy (Eds.), Social competence of young children with disabilities, (pp. 3-35). Baltimore: Paul H. Brookes.

Roberts, J.E., Burchinal, M.R., & Bailey, D.B. (1994). Communication among preschoolers with and without disabilities in same-age and mixed classes. American Journal on Mental Retardation, 99, 231-249.

Sainato, D.M., Goldstein, H. & Strain, P.S. (1992). Effects of self-evaluation on preschool children's use of social interaction strategies with their classmates with autism. Journal of Applied Behavior Analysis, 25, 127-41.

Shure, M.B. (1992). I can problem solve. Champaign, IL: Research Press.

Trawick-Smith, J. (1994). Interactions in the classroom -- facilitating play in the early years. New York: Merrill.

## What Did You Learn Today?

1. Did you make any changes in your care space since the last session? Explain
2. List 2- 3 main points you learned from this session.
3. I am leaving this session with a better idea about how to:
4. What is one thing you plan to do differently before the next session?