



**IDEA Infant Toddler Coordinators Association (ITCA)
Transition Priorities Statement
March 2017**

The **IDEA Infant Toddler Coordinators Association (ITCA)** represents states and other jurisdictions implementing the Individuals with Disabilities Education Act (IDEA), Part C for infants and toddlers who have or who are at risk for developmental delays and disabilities and their families. We appreciate the opportunity to submit recommendations.

ITCA appreciates the priority the Trump Administration places on the importance of early childhood initiatives and investments important to young children and their families. ITCA encourages the new administration to continue support toward universal access and full participation for all children, starting at birth, to high-quality early learning opportunities supported through IDEA services. A necessary part of this early learning system is ensuring the availability of supports and early intervention services to ensure the success of young children with disabilities and their families.

On October 8, 1986, President Ronald Reagan signed into law landmark legislation, the *Amendments to the Education of the Handicapped Act* (now known as IDEA), that created this Infants and Toddlers with Disabilities Program. Through this law, funds are provided to assist states with implementing statewide systems of early intervention services for young children with disabilities from birth to age three and their families. Currently, states provide early intervention services to 5.8% of the population of children who are birth to three years of age. Part C provides the necessary services and supports that allow infants and toddlers with disabilities to effectively participate in everyday activities in their home and in their communities to achieve positive outcomes.

States are not required to participate in the federal Part C Program. However, in spite of fiscal challenges and increased child counts, all states are currently participating in Part C. The recent 30th Anniversary of the Part C, Infant and Toddler with Disabilities Program celebrated the efforts of families, providers, policy-makers at the federal, state and local levels, researchers, higher education and many others who together ensure families receive early intervention services to enhance both the child's development and the capacity of families to help their children with disabilities.

Research finds that early intervention reduces the need for special education and reduces future costs in welfare and criminal justice programs. Estimates on the cost savings vary, but the long-term study associated with the Perry Preschool Project indicates at least a seven dollar return on every dollar invested in early intervention. It is now widely accepted that investments in comprehensive and coordinated early intervention and preschool services will generate long-term benefits for children and families (*Guralnick, 2005*).

State and national data indicate that early intervention leads to positive outcomes for children and their families. States annually report on the developmental progress children in Part C have made in three domains: knowledge & skills; social relationships; and use of appropriate behaviors to meet needs. According to analysis by the Early Childhood Technical Assistance Center (ECTA), in federal fiscal year 2014, between 66% and 73% of children who participated in IDEA's Infant and Toddler Program, showed greater than expected growth in these three domains.

ITCA looks forward to working with the Trump administration to ensure all young children with disabilities and their families have access to learning opportunities that foster positive outcomes. Additional information about ITCA is located at <http://www.ideainfanttoddler.org/>. ITCA is available and willing to provide any additional information or clarification that may be needed and to assist in these efforts. Feel free to contact Maureen Greer, ITCA Executive Director, or Lynn Skene Johnson, ITCA President at ideaitca@aol.com.

The following are ITCA's recommended priorities:

- **Maintaining the existing federal infrastructure to support early learning efforts.** Ensuring active and effective collaboration of all federal agencies and offices that support programs and services for young children and their families is critical to increase opportunities for all children to participate in community-based early childhood programs. This also helps ensure maximum benefit of all available resources. The Department of Education and its Offices of Special Education and Early Learning, and the Department of Health and Human Services including the Administration of Children and Families and the Maternal and Child Health Bureau have worked together through the Interagency Policy Board to provide significant leadership in moving to full access and participation for young children and their families to support their positive outcomes for school and beyond. Maintaining this federal collaboration is essential to support states and communities as they maintain and expand high-quality early learning opportunities for young children and their families.
- **Significant increase in federal funding for Part C of IDEA.** Despite the growth of more than 60% in the number of children served in the last 8 years, the amount of Federal Part C funds has decreased in actual dollars by \$8.7 million since FFY'04. States are facing significant and growing challenges in the needs of the children identified. There has been a dramatic increase in the diagnosis of children identified with Autism Spectrum Disorder (4 to 6 children per 1000.) Each year, states experience a significant increase in intensive service needs for children with autism with no increase in federal funding. In addition, incidence rates for neonatal abstinence syndrome (NAS) and maternal opioid use increased nearly 5-fold in the United States between 2000 and 2012. (JAMA Pediatrics, 2016). States continue to increase their investment in this important program. There is great need for a significant increase in the federal investment in Part C.
- **Investment in all of IDEA Programs including Preschool 619, and Part D as well as Special Education Research.** Increased federal funding for all IDEA Part D programs and the Institute of Education Sciences (IES) National Center for Special Education Research is necessary to better equip teachers and early intervention service providers to address the needs of young children with disabilities. There continues to be a critical need for special education and early intervention personnel, faculty to prepare them, and research to continue to improve instruction for children with disabilities. The investment in these areas has historically proven to enhance the instruction of and benefit all children and increased investment is critical to our continued success.
- **Continue the Children's Health Insurance Program (CHIP) and ensure full implementation of the Medicaid Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program.** For children with disabilities, CHIP and the Medicaid EPSDT mandate are crucial to ensure access to affordable and comprehensive health care coverage. These programs ensure access to early intervention services that place all children, including those with disabilities, on a trajectory for lifelong success. CHIP is scheduled to expire at the end of fiscal year 2017 and its renewal is critically important. The administration should also take steps to ensure that the services guaranteed by the EPSDT mandate are being provided to all children in all states and that any changes do no harm to existing services availability.
- **Reauthorize and expand funding for the Maternal Infant Early Childhood Home Visiting (MIECHV) Program.** The Federal Home Visiting Program gives pregnant women and families, particularly those considered at-risk, necessary resources and skills to raise children who are physically, socially, and emotionally healthy and ready to learn. It is important that this program be reauthorized for 5 years with increases in the amount of funding to ensure \$800 million is available by the 5th year for these important efforts.
- **Major investments in funding of federal programs necessary to implement the purposes of Part C.** This includes full funding for federal programs critical to young children and their families as follows: the ESSA Preschool Development Grant Program, Maternal and Child Health Services Block Grant (MCH); the Child Care and Development Block Grant; Head Start; Developmental Disabilities; Mental Health and Child Abuse Prevention and Treatment Act (CAPTA).