

Contemporary Practices in Early Intervention

online training modules and provider resources to enhance the knowledge and skills of early intervention service providers

Developmental Delay and IDEA

Definition of developmental delay

Generally, a developmental delay (DD) is defined as slow to meet or not reaching milestones in one or more of the areas of development (communication, motor, cognition, social-emotional, or, adaptive skills) in the expected way for a child's age. The child's slow development may not be associated with a condition or a specific diagnosis. Under IDEA a child with a developmental delay may be eligible to receive early intervention or special education and related services if they meet certain federal and/or state criteria.

Developmental Delay and Early Intervention (Part C)

Under Part C of IDEA each state determines the definition of developmental delay for children under the age of 3 years (IDEA 2004, §632(5)(A)). A child with an existing diagnosed physical or mental condition that has a high probability of resulting in a developmental delay qualifies for early intervention (IDEA 2004, §632(5)(A)). Other children who demonstrate a delay as determined by each state may also be eligible to receive early intervention services. For example, the state of Alaska and the District of Columbia have defined developmental delay as a 50% delay below the age of the child in one or more of the five areas of development. Other states vary in their definition from 25% delay in one or more of the developmental areas to using set standard deviations from the norm in one or more areas of development.

IDEA, Part C gives States the option to include children who are at risk for developmental delay but do not meet their eligibility criteria into their early intervention programs. This is an option but not a requirement under IDEA, Part C.

Developmental Delay and Special Education and Related Services (Part B)

Part B of IDEA gives states the option to use a definition of developmental delay in addition to specific disability categories in order to determine eligibility for special education and related services for children in school. States are able to use this definition with children three to nine years of age, or a portion of this age range if they choose. States are not required to use developmental delay to determine eligibility for special education and related services.

For states that use a definition of developmental delay under Part B, children may qualify for special education and related services using a state determined definition. This definition may be different than the one used in Part C. The delay must be determined by

assessing the child using appropriate developmental tests or tools. Many states, including Alaska and the District of Columbia use different terms and definitions of developmental delay for children over the age of three years. Alaska uses the term “early childhood developmentally delayed” in children ages three through eight and defines this delay as 2 standard deviations or 25% delay in one or more area of development or 1.7 standard deviations or a 20% delay in two or more areas of development. The District of Columbia uses the term “developmental delay” for children ages three through seven and defines this as a child experiencing delays of at least two years below their chronologic age and/or 2 standard deviations below the mean in one area of development. DC also has a restriction in using developmental delay. No child can be classified as having a developmental delay based solely on deficits in the area of social or emotional development. Additionally, DC only uses the term after considering other disability categories to determine eligibility for special education and related services.

For children older than nine, the states must use the disability categories stated in the law to determine eligibility for special education and related services. This definition is stated in IDEA, Part B as a child with mental retardation, hearing impairments, deafness, speech or language impairments, visual impairments, blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, specific learning disabilities, deaf-blindness, multiple disabilities and because of these conditions, requires special education and related services.

Other considerations and developmental delay

Cultural and linguistic diversity influences parental perspectives and expectations for the development of children. Areas of difference may include timelines for skill/milestone attainment, expected emotional and social development and related behaviors. Parental expectations for child development may determine the child’s exposure to learning opportunities both inside and outside the home environment. The cultural expectations of the family may impact the instruments, procedures and interpretation of evaluation results that determine developmental delay.

Children develop within families with child rearing practices shaped by their culture. In the process of raising young children, families integrate personal histories, family traditions, and cultural beliefs and practices to guide them in child rearing practices. Research supports the notion that culture plays a significant role in determining family child-rearing practices and expectations of appropriate or desirable behavior at different stages of child development that may differ greatly from Western European or Caucasian American perspectives. For example, many cultures (Asian, African, and Latino) are often characterized as placing a greater value on interdependence, collectivism and family extendedness than Western European cultures. Western cultures tend to put more value on autonomy and independent skills like self feeding or dressing earlier on in development. In contrast, some cultural groups may not expect a child to feed themselves independently, walk or use the toilet by a specific age typically determined by mainstream Americans. This has implications for the expected patterns of development in children.

To determine if a child is delayed, service providers will use instruments to measure development. These instruments used to measure development were developed using groups of children in different age ranges to establish the typical range of development or the normative sample. However, the children selected for the normative sample may not be representative of the groups that the instrument is used with. Providers should understand the construct of the instruments they use and know if the instrument is useful for the children whom they are providing services to. The interpretation of the findings should reflect variations seen based on cultural and linguistic differences.

Discussions with the family and understanding their values and concerns about a child's development will highlight the expected pattern of development for the individual child. This, in concert with cautiously interpreted testing results, can give the early intervention service provider a clearer picture as to whether a child is experiencing delays or not be being exposed to certain skills due to cultural and linguistic differences.

Intervention Strategies

Since children with developmental delay typically have delays in all areas of development, there is no one intervention strategy that works best. Interventions should be integrated across developmental domains. Early intervention service providers should work closely with families to embed the integrated strategies in their every day routines and environments to maximize the opportunity to promote development. It is particularly critical at times of the transition from Part C to Part B that their educational plan address their needs with integrated outcomes and comprehensive services.

References

Individuals with Disabilities Education Improvement Act 2004, §20 U.S.C. 1400 §
Available at <http://idea.ed.gov/download/statute.html>

Danaher, J. (2007). *Eligibility policies and practices for young children under Part B of IDEA* (NECTAC Notes No. 24). Chapel Hill: The University of North Carolina, FPG Child Development Institute, National Early Childhood Technical Assistance Center.
This document appears at: <http://www.nectac.org/~pdfs/pubs/nnotes24.pdf>

Huang, L. & Isaacs, M. (2007). *Early childhood mental health- A focus on culture and context in social & emotional health* in Perry, D., Kaufmann, R., and Knitzer, J. (Eds.) Early childhood- Building Bridges Between Services and Systems. Baltimore, MD: Paul Brokes Publishing.

National Advisory Mental Health Council Workgroup on Child and Adolescent Mental Health Intervention, Development and Deployment. (2001). *Blueprint for change: Research on child and adolescent mental health*. Rockville, MD: National Institutes of Mental Health.

Shackelford, J. (2006). *State and jurisdictional eligibility definitions for infants and toddlers with disabilities under IDEA* (NECTAC Notes No. 21). Chapel Hill: The University of North Carolina, FPG Child Development Institute, National Early

Childhood Technical Assistance Center. Available at
<http://www.nectac.org/~pdfs/pubs/nnotes21.pdf>

Valdiva, R. (1999). *The implications of culture on developmental delay*. (ERIC Digest E589 Id: ED438663). Reston, VA: The Educational Resources Information Center.

Resources

American Speech-Language-Hearing Association (ASHA)
<http://www.asha.org/default.htm>

Individuals with Disabilities Education Improvement Act 2004
<http://idea.ed.gov/>

National Early Childhood Technical Assistance Center (NECTAC)
<http://www.nectac.org/>

U.S. Department of Education, Office of Special Education and Rehabilitation Services
<http://www.ed.gov/about/offices/list/osers/index.html>

Cite As: Georgetown University Center for Child and Human Development.
Contemporary Practices in Early Intervention: Developmental Delay and IDEA Primer.
2011. Available online at <http://www.teachingei.org>.