You may or may not have had contact with people who have special needs. Your previous experience may impact how you feel about having a new child with special needs in your program. Some of us have been taught to avoid, glance away from, or ignore people with disabilities. The avoidance may be because we don’t know how to act or what to say. We may be afraid of making a mistake. Sometimes when we see a child with a disability or other special need, we feel sad. Sometimes we wonder, “What would I do if I were that child’s parent?” Sometimes we feel a bit guilty because our own children are “normal.”

These or other negative feelings are to be expected. They are not good or bad, but they need to be acknowledged. It is important to avoid letting these negative feelings dominate your attitude or your efforts with a child who has special needs.

The parents of other children in your program may have questions, concerns or even negative reactions about the inclusion of a child with special needs in your program. You can play a significant role in educating them about the myths and facts about children with special needs. As with the children in your care, parents will be reassured by your positive, confident and caring attitude. But please remember to maintain confidentiality at all times! Learn to distinguish between true concern or desire for information and inappropriate prying.

Speaking in generalities, keeping the focus of the discussion on their own child, and referring the parent to outside sources of information are all good ways of answering the important questions while respecting the privacy of the child with special needs and his or her family.

Myths about disability

Myth: A child with disabilities is a special gift from God.
If parents hold that belief, fine, and you should respect it. However, from a caregiver’s point of view, this is not a productive attitude. Treat and care for this child as you do all the other children in your care.
Myth: A child with disabilities is God’s way of punishing a parent.
Do not subscribe to, encourage, or tolerate this attitude! Children are children. They are all treasures—sometimes challenges—never punishments.

Myth: A child with disabilities is to be pitied.
Pity is not productive. Support is productive, so is love and positive encouragement. Pity doesn’t help a child develop into the most—and best—that she or he can be.

Myth: You have to be an expert to take care of a child with disabilities.
Don’t diminish the value of your experience with other children when you evaluate your ability to care for a child with special needs or disabilities. The “experts” can answer the difficult questions, but this child is a child first, and the diagnosis then becomes secondary.

Myth: Children never should be allowed to ask about other children’s disabilities.
Nonsense. How can we teach our children to live in a society rich in diversity if we don’t allow them to ask about differences? Natural curiosity is to be encouraged, but frame your answers positively.

Strategies for inclusion

Not all feelings or beliefs are negative. There are some very positive feelings that you will likely experience, too. When you get to know a child, you will accept and appreciate him or her just as you do other children in your care. In her book (well worth reading, see “Technical references” section), A Place for Me, Phyllis Chandler includes a description of meeting a new child.

Debbie, a child care staff member, was on the playground with a group of children. Her supervisor, Ann, approached her with a new boy named Andrew. Today was Andrew’s first day at the child care center. He was unable to walk or talk. Ann asked Debbie to involve Andrew in the outdoor play activities. Debbie had met Andrew when he arrived, but now she was panic-stricken. “What do I do with him?” she wondered. “I’ve never been around a child who can’t walk. How can he play on the playground? What if he gets hurt? Debbie held Andrew for a few minutes and talked to him as she reflected on the situation. She had noticed earlier in the classroom that Andrew crawled quite well, so she took him to a long tunnel that was part of the play equipment. Andrew laughed delightedly as he crawled to the other end of the tunnel where Debbie was waiting for him.

The story goes on to describe how Debbie helped support Andrew while he kicked a ball in a game with the other children. Like Debbie, most of us have the ability not only to handle children with special needs successfully, but to increase our own growth and learning in the process. When you work with children, so much depends on your attitude toward an individual child. Your expectations for children come from your knowledge of typical development along with a positive attitude toward the potential for children with special needs to grow and learn.

In planning for a child with special needs, you will want to meet the child and his or her parents to get to know them. A home visit might be possible, or a visit to your child care facility. This will give you an opportunity to become acquainted with the child instead of only the disability. Talk to the parents about the child’s strengths as well as weaknesses. You will probably want to go to your library, advocacy group, or school system to find resources about the child’s disability. But remember that knowing the child’s diagnosis may not give you much information about an individual child, because children with the same condition can have a broad range of abilities.

After you become familiar with the child’s abilities and needs, evaluate your program setting and make changes if necessary. Remember, you may not need to make any changes in your program. Often, an environment that suits children with typical needs also suits children with special needs.

Depending on the child, you and your staff may have to make decisions about one or more of these concerns:

- modifications to the environment and/or equipment and materials,
- behavior management techniques,
- continued attention to accessibility and full participation as the child develops,
- staff orientation to ensure coordinated and supportive inclusion,
■ working with the child’s therapists and specialists,
■ introducing the child to the other children and answering their questions,
■ emergency procedures, such as fire drills, that may have to be modified,
■ physical needs, such as being lifted, closer supervision, or help at mealtimes,
■ caring for specialized equipment, such as example hearing aids or braces,
■ communicating with the child or helping the child communicate with others,
■ accommodations for outdoor play or field trips,
■ toileting procedures,
■ special diets or feeding techniques,
■ possible additional communication with parents, and
■ handling emergency medical situations.

Other considerations

As important as any special techniques you might need, however, is your belief in and acceptance of every child as a special person with the potential to grow and develop. Here are some suggestions that might help when you work with children who have special needs.

If a child with special needs is coming into your home or your center, find out as much as you can about what you can do to make the child welcome. But do it in a positive way—psych yourself up, don’t psych yourself down for the arrival of this child.

There may be times when you have a physical response after meeting a child with a disability who is visibly different, such as burn scars, limb amputations, or congenital differences. You may get a feeling in the pit of your stomach, tears in your eyes, or your breath may catch. Feel it, acknowledge it, and get on with the business of making friends with the child. Once you get to know a child, you will see the inner wonderfulness of this child, not the outer differences.

There also may be times when you have grown to love a child with a chronic illness or disability and the condition worsens. The child may require more complex care than you can provide, or the child may die. If this happens, seek support for yourself. Most communities have mental health professionals affiliated with a clinic or school who can help you and your staff with your grief. Don’t ignore the grief or pretend it’s not there.

Regardless of the size of your community, there are likely to be adults and other children with the same diagnosis as the child you are welcoming into your program. If possible, invite upbeat parents and older children with the same diagnosis to talk to you, your staff, and other children. Share strategies, make friends, ask questions, and get answers. Remember that people with disabilities make great employees. A staff member who has a disability is a great role model for all children.

As a child care provider, you are probably aware of the struggles of working parents who juggle child care and their jobs. The juggling act can be even more complex for parents of a child with special needs. That’s why honest, open communication between child care providers and a child’s parents is even more important.

Remember that the children in your care look to you as a role model. If you are positive, matter-of-fact, and upbeat about a child’s disability, other children will follow your lead. Some people find it helpful to pretend to themselves that this is a child from another culture; they celebrate this child’s “special needs” simply as another aspect of diversity.

Resources for caregivers

There are some wonderful resources available about children with special needs. Read books and magazines, and ask the child’s parents for information that you can read and share with your staff. Information also can be accessed on the World Wide Web. Try this site to get started: http://www.familyvillage.wisc.edu/search/direct.htm

Technical references

More information

This publication is part of a series, Caring for Children with Special Needs. You may find other fact sheets in this series with helpful information. For the most current update of these fact sheets, check the National Network for Child Care website at: http://www.nncc.org

- Caring for Children with Special Needs: Feeling Comfortable (overview)-NNCC-98-06
- Caring for Children with Special Needs: Allergies and Asthma-NNCC-98-08
- Caring for Children with Special Needs: Attention Deficit Disorder-NNCC-98-09
- Caring for Children with Special Needs: Challenging Behaviors-NNCC-98-10
- Caring for Children with Special Needs: Chronic Illnesses-NNCC-98-11
- Caring for Children with Special Needs: Developmental Delays-NNCC-98-12
- Caring for Children with Special Needs: HIV or AIDS-NNCC-98-14
- Caring for Children with Special Needs: Physical Differences and Impairments-NNCC-98-15
- Caring for Children with Special Needs: Seizure Disorders-NNCC-98-16
- Caring for Children with Special Needs: Speech and Language Problems-NNCC-98-17

Also see the National Network for Child Care web site: http://www.nncc.org

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