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## How to make sure your setting is fully inclusive

In this chapter we will explore the concept of inclusion by:

- discussing how it has evolved historically, legally and in practice;
- looking at an overview of legislative developments and government initiatives from 1978 to the present day;
- tracking the gradual move from 'integration' to 'inclusion';
- discussing ways to ensure exclusion does not occur;
- exploring ways of developing inclusive practices in the setting's activities, in relation to children with behavioural difficulties.



You may think that a section addressing the situation of children with special educational needs (SEN) is irrelevant to you. After all, you're reading this book because you feel there are possibly children in your setting who 'only' present inappropriate behaviour and don't have special needs as such. But it's important to realise that no matter how temporary or how mild a behavioural problem is, while it's ongoing, the child has specific needs, and these should be addressed.

Behavioural difficulties come under the umbrella of SEN, in terms of both the legislation and the support offered to a child, so it could be argued that all children, even those with temporary difficulties, have the right to access this support which is enshrined in the law.

You may also wonder what relevance the SEN education laws have to your setting and why you shouldn't ignore them and, apart from making sure you have regard to the *Special Educational Needs Code of Practice*, just get on with the job of working with your children in an inclusive and welcoming way. But in order to make sure that your setting is indeed inclusive, you need to be aware of how the concept of inclusion developed and became the accepted way of working that it should be today.

While the legislation is in place to ensure inclusion, as professionals we need to be vigilant that we really are practising inclusion in our settings. This is not because the law requires it (although it does) but because, as argued above, every child, regardless of their difficulties, has the right to have their abilities and achievements celebrated and to be helped to fulfil their potential in a setting that sees them in a positive light. Only by having a truly inclusive setting will this happen.

The legislative developments since 1978 show how we have moved towards today's position of having inclusive settings as the norm, and we need to have an understanding of those developments to ensure the best inclusive provision possible for the children in our care.

### An overview of SEN legislation

Before 1978, children who had 'problems' were put into segregated schools, institutions or hospitals, usually according to a disability or difficulty as perceived by those in authority. Very often these children were labelled with names we would not tolerate today such as 'mentally handicapped', 'crippled', 'spastic' or, in the case of children with behavioural difficulties, 'maladjusted'.

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The *Warnock Report* was published in 1978 and led to the 1981 Education Act, the first major legislation which recognised that a child's difficulties are interactive and contextual, in other words not within the child or needing 'treatment'. This Act made us rethink our way of working with children who have SEN, often needing a complete turnabout from established practices that we thought were tried and true. We realised that we had to take a long, hard look at ourselves, to see whether we were failing to meet a child's needs, and if so, how. The term 'integration' was coined and the then local education authorities (LEAs) were keen to show their commitment to the idea. There were many schemes put into place, such as attaching special needs units to mainstream schools or having special needs classes within schools and integrating the children at certain times of the day or week.

In 1989 the Children Act was passed, requiring, among many other things relating to all children, the identification of and provision for disabled children, particularly those under 8 years of age. This Act was also very important because for the first time, disabled children were included in the wider framework of legal powers, duties and protections relating to all children.

Then the 1981 Act was repealed by the 1993 Education Act which maintained and strengthened the principles at the heart of the 1981 legislation. It continued the child's entitlements and there was more focus on both the involvement and empowerment of the child's parents, particularly through the establishment of an SEN tribunal to give them the right of appeal.

In 1994, the first *SEN Code of Practice* was put into place and provided guidelines for implementing the 1993 Act. The *Code of Practice* established a standardised framework for the provision of appropriate and individualised education for children with specific needs. This meant that wherever a child lived or moved to, the provision should be seamless and continuous. The reality was, of course, a little different. Depending on the LEA's resources, children were given varying degrees of support and allocation of resources. For example, some authorities would give a Learning Support Assistant (LSA) to a specific child while others would say that the child should be taught in group or class situations with the LSA working alongside.

The Disability Discrimination Act was passed in 1995 and clarified the rights of employment, obtaining services and goods, buying or renting land or property, and transport of people with disabilities. Under this Act, somebody is deemed to be 'disabled' if they have a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal daily activities. Education, including most early years settings, was not covered under this Act, except as providers of goods and services, and was covered only when the 2001 Special Educational Needs and Disability Act was passed (see below). From 1996, the social (but not educational) care of children in private, voluntary and statutory early years settings that were not classed as schools was covered under this 1995 Act.

From 1996, the Nursery Education and Grant Maintained Schools Act required all early years providers to 'have due regard' to the *SEN Code of Practice*. Children who had special educational needs and who were in the care of nursery schools and other maintained settings were entitled to appropriate provision, and their parents were granted greater rights. The duties of schools were made more specific and the regulations for assessing children and issuing Statements of Special Educational Needs were tightened up, for example by setting time limits for the process to be completed.

The 1997 Green Paper *Excellence for All Children* was followed by the 1998 *SEN Action Plan* with its strong emphasis on inclusion, parent partnership and multi-agency collaboration. By this time, the term 'integration' was still regularly used, but the idea of 'inclusion' was becoming more common. The *SEN Action Plan* emphasised the importance of the holistic approach, acknowledging that positive working practices meant working in partnership with parents and other agencies.

The 2001 Special Educational Needs and Disability Act amended the 1995 Disability Discrimination Act by covering the educational provision that had been excluded. This Act updated and strengthened the *SEN Code of Practice* and strongly emphasised inclusion. For the first time *all* early years providers, including playgroups, registered child-minding networks, pre-school groups, out-of-school clubs and so on, had a duty not to discriminate against a disabled child in their provision of education and day care or other services on the grounds of the child's disability, and this included behaviour difficulties. They had an obligation to implement the *SEN Code of Practice*, and make sure their setting was fully inclusive.

The 2005 Special Educational Needs and Disability Act ensured the final 'tightening up' of the 2001 Act, encompassing all areas of work, education, recreation and leisure, etc. so that any form of discrimination, or attempt to offer a lower standard of service on the grounds of a person's, or in our case a child's, disability, is illegal.

The 2006 Childcare Act, taking effect in 2008, required local authorities (LAs) to improve the five *Every Child Matters* outcomes for all pre-school children and reduce inequalities in these

outcomes. They should also secure sufficient childcare for working parents and provide a better parental information service. Early years regulation and inspection arrangements were reformed and simplified, providing a new integrated education and care quality framework for pre-school children and the new Ofsted Childcare Register.

The definitions of special educational needs in the *SEN Code of Practice* include children with emotional or behavioural difficulties, so it is clear that these children have as equal an entitlement to positive, inclusive provision as any other. But it is extremely important to remember that we shouldn't be offering inclusive provision because it's a legal requirement, but because we care enough about *all* the children we work with to want the best for them. Part of 'the best' is making sure they have the same chances as everybody else in their group to fulfil their potential in a positive and warm environment. So, in the context of an early years setting, you have to make reasonable adjustments to ensure you aren't discriminating against children with behavioural difficulties. In practical terms, this means that you must not:

- refuse a service
- offer a worse standard of service or
- offer a service on worse terms

unless you can give a 'justification' for doing so. 'Justification' for offering different ('worse') circumstances for working with the child means that you can take into consideration:

- health and safety issues;
- the needs of the child;
- resources;
- practicality and the interests of the other people in the setting.

The language of the *SEN Code of Practice* is couched in educational terms, referring to 'schools' and 'pupils', but this doesn't mean that other early years settings are not included. The *Code* makes the point that, despite this, its provisions are for *all* early years settings, including for the first time those we have already discussed above.

Finally, we can mention here the *SureStart* initiative implemented by the Labour government at the end of the 1990s as part of its long-term strategy for providing holistic services for young children. From the *Birth to Three Matters* framework to the Childcare Act 2006, the initiative is, at the time of writing, well-established across England. (The devolved administrations of Scotland, Wales and Northern Ireland are implementing their own strategies. However, because the fundamentals of best practice are enshrined in all the initiatives, this book is also relevant to and appropriate for practitioners in these other administrative areas.) At its core is the philosophy of a 'seamless' service being delivered to children and their families, with the interdisciplinary cooperation and active working together of the health, education and social service professions. We will look at this philosophy in more detail in Chapter 3.

## Inclusion or integration – are they the same thing?

The simple answer to our question is 'no'. Even now, the two terms tend to be used interchangeably, but they mean very different things and practitioners need to understand the differences and use each term in the correct context.

### Integration

This concept was at the heart of the early provision for children with special educational needs, following the 1981 Education Act. It was based on the **medical model** of the child and their difficulties, which were perceived as coming from within the child and needing remediation or treatment. (Do you remember the 'remedial reading teacher' in your own school as a child?) When the child with special needs was integrated, they were placed in a mainstream setting and expected to change and adapt in order to 'fit in'. The idea didn't encourage or make possible any changes in attitude that may have been necessary within the setting, whether of its practices or its personnel, for the child to participate as fully as possible. In other words, *the onus was on the child to change*.

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### Inclusion

This concept has been at the heart of working practices since about 1996 and is based on the **social model** of the child where their difficulties are viewed holistically and ways of supporting them are found by exploring every aspect of the child's situation. When the child is placed in a mainstream setting, it's the setting that has to change and adapt in order to make sure the child is able to participate as fully as possible. If necessary, the practitioners within the setting must review their attitudes, policies and practices to ensure that it is a fully inclusive organisation. In other words, *the onus is on the setting and everybody involved in it to change.* (For a more detailed discussion of how you can change attitudes, policies and practices, see Chapter 2, *Can you stand up to self-scrutiny?*, page ??.)



#### Can you tell which is which – the medical or the social model?

Have a look at these scenarios and decide whether the practice reflects the medical or social model. (You will find the answers on page ??.)

1. **Jason** finds it hard to wait for his turn to play with a toy and usually snatches it away from the child who's playing with it. Each time this happens, Jenny, his practitioner, takes the toy from him, telling him to leave the play area and that until he learns to play properly he won't be allowed there again.
2. **Annan** has difficulty with sessions in the Large Hall and usually runs around screaming and jostling the other children. His practitioners have rescheduled the sessions to take place when the trainee childcare practitioner is with them and she stays with Annan to support him. If he begins to behave inappropriately, the trainee takes him aside to share a story until he settles again and can rejoin the other children.
3. **Ned's** setting follows the Early Years Foundation Stage curriculum and takes the early learning goals very seriously. He's still working at the stepping stones level, mainly because the area of personal, emotional and social development is where he's having difficulties. His maths abilities are very good but the practitioners in the setting feel he should be following the curriculum at the same level across all areas.
4. At 'Let's Talk' time, **Minnie** isn't asked to make a contribution to group discussions because Lily, her practitioner, knows that she will disrupt the session. There isn't any point in depriving the other children of a good discussion, so Minnie can just listen. Because Minnie doesn't join in, her ability level in this area of learning is difficult to gauge.
5. **Hugh** sometimes behaves inappropriately when he's out with his group at the shops or in the park. One of his practitioners, Margery, feels he should be left at the setting because he's a danger and takes too much of her time and attention from the other children. Pauline, Hugh's other practitioner, rearranges the weekly outing to take place first thing in the morning, and persuades Hugh's grandma, who drops him off each day, to join the group and support Hugh while they're all out on the trip.

### Does inclusion have any advantages?

By taking time to plan an inclusive setting, practitioners will enable both the adults and the children to benefit from the many positive outcomes that good practice will generate. Let's have a look at a few of these.

- *Children benefit from contact with all their peers, regardless of their difficulties.* The practitioner who lovingly encourages a child with behavioural difficulties to develop positive and appropriate behaviour will be an excellent role model for the other children. They will also interact with that child in a positive way, and this in turn will influence the way the child interacts with the others in their group.
- *Practitioners and other adults involved with the setting benefit from contact with children who have behavioural difficulties.* The example of the practitioners' positive attitude towards the child with behavioural difficulties can influence the way other adults involved with the setting interact

with the child. Getting to know the real (and likeable) child behind the inappropriate behaviour can correct many myths and misperceptions held by the adults.

- *Parents are more likely to choose mainstream primary schools for their children if they and their children have experienced positive and inclusive pre-school practices.* If practitioners perceive that it's the child's behaviour that is the difficulty and not the child, they can work together with the parents to plan effective strategies for encouraging positive behaviour. This is likely to lead to the parents opting to continue sending their child to mainstream provision later on.
- *Good practice in the care and education of children with behavioural difficulties can improve good practice for **all** the children in the setting.* Almost like a ripple effect, when practitioners plan strategies that are inherently good practice in working with the child who has behavioural difficulties, they will automatically plan positive and effective strategies for all the children's needs and abilities.<sup>1</sup>

## So how do we 'do' inclusion?

Now we've looked at the theory, let's explore some practical aspects of inclusion and what it means for early years practitioners in relation to children with behavioural difficulties. Your setting will be inclusive if you:

- ensure that all the children work together, regardless of their difficulties, including behavioural difficulties;
- arrange for the child with behavioural difficulties to have support from specialists (for example, the LA's Behaviour Support Service or an educational psychologist) if this is thought to be necessary;
- have changed the setting's attitudes, practices and policies to ensure, where possible, the inclusion of all children, regardless of their difficulties, even behavioural problems (see Chapter 2 for a more detailed discussion of this aspect of inclusion);
- focus on the child's strengths and abilities when planning an appropriate and supportive curriculum for them (see Chapter 3 for a more detailed discussion of planning Individual Education Plans (IEPs) or Play Plans);
- accept difference as ordinary – in other words do not judge the child on their behaviour if it is different from that of their peers, and then view the child in a negative light as a result;
- ask for the views of the child with behavioural difficulties (where you can) and act upon them – this will go a long way to making the child feel cared for, involved and supported, and their appropriate behaviour will gradually develop as a result.



### Inclusive practice quiz time

Are the following scenarios examples of inclusive practice? If not, what strategies might the practitioners use to make sure the child is included? (Answers on page ??.)

1. **Fergus**, who is 4, has regular seizures and takes the anti-epilepsy drug Epilim. He attends his local pre-school group and often displays aggressive behaviour towards the other children. Some of the parents have complained and the practitioners have asked Fergus's parents to withdraw him from the group.
2. **Mary-Clare** is 3 and attends nursery full-time, being dropped off by her mother on the way to work. Towards the end of the morning, Mary-Clare usually becomes tearful and finds it difficult to maintain concentration for a reasonable length of time. She will sometimes be quarrelsome with the other children or uncooperative with the adults. The practitioners discussed the problem with Mary-Clare's Mum and decided to give Mary-Clare a small snack mid-morning, as she has breakfast very early at home. (The setting's practice for full-time children is to give their snack mid-afternoon, as many of them have their evening meal quite late at home.) This should keep Mary-Clare going until lunchtime. She eats her snack with the morning-session-only children, so she is not being isolated in any way.
3. **Beth** is 4 and goes to playschool. She sometimes, but not always, finds difficulty in working in small groups, spoiling the other children's work or disrupting the activity.

(Continued)



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*(Continued)*

One of the practitioners usually removes Beth from the situation, chastises her and makes her get on with another activity on her own. This means the rest of the activity isn't spoiled for the other children.

4. **Lee Wei**, who is 4, usually behaves inappropriately during the midday meal. He pushes the food around the plate with his fingers and refuses to hold his knife and fork correctly, sometimes ending up throwing them across the table in temper. The practitioners speak with Lee Wei's Mum and discover that at home he eats with chopsticks. They agree that Lee Wei can bring some chopsticks from home and that they will cut larger pieces of food into bite-size pieces. Lee Wei's Mum has also offered to come to the setting and cook some Chinese dishes for all the children to try.

### How can we avoid exclusive practices?

There isn't a simple answer to this, because each situation has to be looked at in its own right. Settings, staff, children and circumstances are all unique and need their own tailor-made approaches. It's easy when you're in a busy early years setting to make decisions and plans concerning a child that inadvertently exclude them. You may decide something in good faith, genuinely believing it to be for the best all round, but on closer scrutiny it might really be depriving the child of a valuable opportunity or experience. You have to be ruthless with yourself and ask whether your decision is for yourself or for the child. There will be times when your professional judgement is justified and a decision really is in the child's interests, as long as everybody else on the team agrees and supports your reasons. But as a rule-of-thumb, always ask yourself, 'Is this decision really for Buster's development, or for my convenience?'

Here are a few examples of exclusion, all of them real scenarios, although the children's names have been changed.

1. Sadie's nursery class is attached to the local primary school and the children always join in the annual Sports Day. This is organised by Mr Davies, the teacher in charge of PE in the school. He knows that Sadie has behavioural difficulties because he's heard her practitioners discussing her in the staff room. He has also dealt with several incidents of Sadie's inappropriate behaviour when he was on duty in the yard at playtime. He has told Sadie's practitioners that he's not prepared to take responsibility for either Sadie's safety or that of the other children if they're involved with Sadie in any incident on Sports Day. They all discuss the situation and decide that Sadie should stay at home on that day, to avoid any accidents and/or clashes with Mr Davies.
2. Ben's pre-school group has arranged to go to the zoo for their summer trip. Ben has behavioural difficulties and, in situations where he feels unsure of himself, is inclined to run around wildly and scream. He's been known to run through the yard gates onto the street. The group has just enough adults to go with the children on the trip, but the practitioners feel that Ben needs one-to-one supervision. His Mum has offered to go, but the practitioners refused on the grounds that mothers weren't allowed, so they couldn't make an exception for one and not any of the others. It was decided to tell Ben's Mum that they preferred Ben not to join the trip.
3. Emma's nursery has been rehearsing the Nativity Play for several weeks, and she has been given the part of an angel because for this role she doesn't have to say any lines. Emma's behavioural difficulty means that she finds it hard to stay still for more than a few minutes and unfortunately the part of an angel requires her to stay almost motionless for most of the play. During rehearsals Emma has been very fidgety and as the big day draws nearer, she becomes extremely disruptive. The practitioners decide that Emma shouldn't be in the play because they fear that her behaviour will ruin it, which wouldn't be fair to all the other children who have worked so hard during rehearsals. Emma's Mum is told that Emma can stay with her in the audience on the day of the real performance.

In each of these instances, the practitioners offered reasons for their decisions that they felt were justifiable. You may agree with them and feel that you would have done the same had you been in their position. But in each case, the reality is that the exclusion of the child from the activity meant less pressure for the practitioner to supervise the child when they had the others to attend to as well as the activity itself. In each case, the practitioners' decision meant that the

child was deprived of the activity and the experiences it offered. Whose convenience was being considered?

## How can we develop inclusive practices?

You'll have to decide on *general* strategies for ensuring inclusion in your setting when you plan your positive behaviour policy (see Chapter 2). But you won't be able to make specific plans and arrangements for any particular child until you're working with them and know what makes them tick. As we have already discussed, each case is unique, and ways of promoting inclusion for a specific child have to be appropriate, effective for and relevant to that child. What works for one child may be ineffectual for another.

There are some general principles you can adopt, however, which will go some way to helping you to put the theory into practice.

## Some practical strategies to ensure inclusion of children with behavioural difficulties



- Ask the parents or carers whether the child's behavioural difficulties occur at home as well. They are the experts in their child and know better than anybody how the child reacts to things. If you forge a positive and cooperative relationship with them, they should feel comfortable sharing information with you. Always remember to respect their confidentiality (except in cases where you may suspect abuse of some kind). The difficulties being experienced by the child may be short-term and the parents may be able to explain the cause. If, on the other hand, the difficulties seem to be deeper-rooted and potentially longer-term, working with the parents is crucial for planning a positive way forward. It's vitally important to keep in mind that a child's inappropriate behaviour may be a reflection of and/or part of what's going on at home. Their circumstances, background, family dynamics, financial situation, daily experiences, everyday routines and so on all have an effect on the child. This is why it's so important to forge a positive relationship with the child's family: knowledge is power. Knowing how a child's family operates will enable you to work closely with the family to plan the most effective ways of supporting the child in developing positive behaviour.
- Decide together as a staff and with the child's parents what will be the most effective strategies for dealing with the child's inappropriate and/or unacceptable behaviour. (You will find a more detailed discussion of this in Chapter 2, page ??.) Again, the information about the child that the parents can share with you will often give you a clue as to what will work for them. At the same time, you need to observe the child and decide what their personal learning style is. You will be on a hiding to nothing if you try to develop the child's skills by offering activities that do not take into account their preferred way of learning. Be aware too, of your teaching style, and make sure you adopt an approach that is in sympathy with the child's learning style. You have to get into 'holistic mode' and look at the full picture of how and why the child operates as they do. That way, you'll plan effective strategies.
- Find out whether anything specific triggers an outburst of inappropriate behaviour in the child. If you can put your finger on something, take action to avoid or prevent the child being placed in that position. (Chapter 3, page ?? discusses this point, as does Chapter 4, page ??.)
- If the child has Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD), ask for advice. The child's parents must be the first source of information and if you feel you'd like more specialised advice from a medical professional, always ask the parents' permission before approaching outside agents. You can also exploit the many good, readable books that are available, and there are many websites where you can obtain advice, support and information. Just type 'Attention Deficit Disorder' into your search engine.
- Give the physically aggressive child plenty of learning activities. By having available a lot of games, activities and things to do, the child has fewer opportunities to be hanging around with nothing to do and so become bored. This can easily happen if your attention is on another child for the moment and the child's way of filling unoccupied time is to behave inappropriately. Try to make sure every bit of 'dead time' can be used positively and effectively. Avoid setting the child senseless tasks such as colouring in or completing photocopyable sheets. These will mean nothing to them, particularly if they're expected to do the task on their own. Give them something practical, meaningful and with something positive to show for it on completion.

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- Never accept aggressive behaviour and always reward positive behaviour. While you can't be continually chastising the child and have to let some things go, it's very important to let them know that you won't tolerate aggression under any circumstances. How you go about this will depend on the child – a sanction that works with one child will be meaningless to another – but you must get that message across. The flip side of that coin is watching for any positive behaviour by the child and immediately praising them for it, making them feel good about what they've done.
- Establish a few essential ground rules to be followed consistently by everyone. These should be simple, meaningful, positive and consistently followed by *everybody*, adults as well as children. (See Chapter 2, page ?? for a more detailed discussion.)
- If appropriate, withdraw the child from group situations for a while and encourage them to talk through their feelings with an adult. There may be a good reason why the child finds it difficult to cope in a group situation, and you may not be aware of it. By encouraging the child to talk to a trusted adult, you may find the key to unlocking some of the child's problems in this regard.
- Watch for and support the introverted and withdrawn child. It's very easy in the hubbub of an early years setting to miss the child that's 'good' and 'quiet'. We all know about the disruptive child who makes their presence felt from day one, but the child who doesn't command our attention because they're not loud may also have behavioural or emotional difficulties. I'm not talking about the shy child who may be temporarily overwhelmed by the buzz of activity, but about the child who is seriously a loner, and continues to be when it's time they had settled and come out of their shell.
- For the child who finds groups hard to handle, work with them initially in a one-to-one situation using fun activities. As their confidence and positive behaviour increase, so you can make the size of the working group larger by gradually introducing more children, one at a time.
- Support the child in whole-class/group sessions. When you feel they're ready to work in the full group, be there to support them at first until they seem to be able to handle the situation with confidence. 'Support' may be anything from having the child close to you, in reach of a gentle and reassuring touch, to allocating an adult to guide the child through the sessions until they're ready to 'fly solo'. Knowing the child well will give you an indication of the best way of planning the support.
- Be ready with a fun activity when the child arrives at the start of the session. Drop-off time is hectic in the most organised of settings and while your back is turned, the child may end up in a situation where their behaviour is inappropriate. By having something exciting and meaningful for them to do straight away, you may well be avoiding any difficult moments.
- Keep to the daily routine as much as possible. Children with behavioural difficulties need consistency and stability. Sometimes they're totally thrown by changes in routine or unexpected alterations, and the only way they can handle it is with inappropriate behaviour. It's important that you keep the 'staple' activities as regular as possible. If there are going to be some changes to the day's routine, warn the child beforehand, using something concrete to show them, such as an egg-timer or an alarm clock – 'When the alarm rings on the clock, it'll be time to tidy up the painting things and go for our rehearsal for the Christmas play.'

### The child and inclusion

We can easily become fixated on making sure the child is included by differentiating their curriculum and planning IEPs, without realising that inclusion goes further than that. Inclusion almost has to be in the air supply of the setting – automatically absorbed and carried out by everybody in everything they do. Even simple interactions and exchanges should be inclusive. 'Everybody's lining up beautifully except you, Buster' is less likely to encourage Buster to line up appropriately than 'Right, everybody, line up beautifully, just like Suzanne – well done Suzanne. That's it, Buster, I can see you're trying hard at lining up as well; good boy!' Even if Buster isn't lining up beautifully at that point, by including him in the general praise, he will eventually be encouraged to copy the others. Peer example is a wonderful resource you can exploit to the full.

As practitioners, we also need to make sure that every member of the group and their contribution to the day's activities are valued. They may not have made achievements at the same level as some of the other children, but remember we're measuring them against themselves, and if something they've achieved is a step forward *for them*, we must openly acknowledge it and give



them due credit. Public praise reinforces the child's achievements and motivates them to try the next challenge. Be aware though that the child with behavioural difficulties may find it hard to handle praise or positive comments at first because they could be so used to being told off. It's possible that when you start to praise their efforts at positive behaviour, they'll react negatively, but treat the child sensitively, and keep praising them. In time, they'll be able to take public praise in their stride.

It's important that the child's opinions are heard and respected by everybody else. Even if it goes against that of the majority, you should acknowledge its validity and respect it. By dismissing or rejecting the child's opinion, a signal is being sent out that what they've said has no value. For a child whose self-esteem may already be at an all-time low, this can be shattering. And it's guaranteed that the child won't try to make a contribution to the next discussion. You need to develop an atmosphere where the child is comfortable enough to speak out, knowing they won't be ridiculed or turned away.

## What else can I do?

Here are a few ideas.

- Use your baseline assessments or the Early Years Foundation Stage profile to check the child's achievement level in the area of personal, emotional and social development and plan their next targets from that point.
- Make sure that the activities, work, curriculum, etc. you offer the child are appropriate. It's vital you match the level of the child's abilities to the level of work. A bored child, one who is under-challenged and given less than stimulating activities will inevitably channel their attentions into inappropriate behaviour. A child who is over-challenged by being given activities they cannot do will also start to present unacceptable behaviour: if they can't do the task, they'll do something they can, especially if it achieves a bit of attention. In other words, when planning the child's programmes of work, you must *match the game to the aim*.
- Involve the child's parents and, whenever you can, the child as well in planning their IEP or Play Plan. The information parents can supply about the child can be pooled with your existing knowledge to make sure that the IEP/Play Plan you write is appropriate, achievable and effective. (For a more detailed discussion about planning effective IEPs and Play Plans for children with behavioural difficulties, see Chapter 3.)
- Observe the child at work and play. Find out what motivates, stimulates, excites and challenges them. You can use this information to plan the rewards and sanctions that form an integral part of their IEP. (For a more detailed discussion about rewards and sanctions, see Chapter 4, page ??.)
- When the child has behaved in a positive and desirable way, even if it was for a fleeting moment and even if it wasn't the final target of their IEP, give them lots of praise and some form of reward – something that has meaning for the child – to motivate them to continue trying and to show them exactly what it is you're expecting of them with regard to their behaviour.
- Involve the children in their own record keeping. They are usually really excited when they see their achievement charts growing or their merit stickers filling up a folder. Or they may get a buzz out of keeping a log of all the extra computer sessions they 'earned'. Knowing your child intimately will tell you what form of record keeping will be best for them, but the important thing is to actively involve them.
- If the child has communication difficulties, it's worthwhile taking the time to learn a signing system such as Makaton, which has symbols as well as text. Many children with behavioural and/or communication difficulties find this system helpful and the other children in the setting quickly pick it up, becoming enthusiastic users too. You can liaise with your local speech and language therapy department to find out how to access a training course.
- If the child seems to be distressed on admission to your setting, it often helps if you allow them to bring a 'comfort blanket' or favourite toy from home until they settle. You need to be alert though that it goes home at the end of the child's session, or there will be a distressed little person at home for the rest of the day and evening!
- Allocate a key worker to the child. This doesn't mean nominate somebody to work on a one-to-one basis all the time with the child, unless of course this has been recommended and you have the resources. It means deciding on an adult in the setting who has made a trusting relationship with the child, and encouraging the child to go to that person whenever they feel in

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need of support or want to talk. Realistically, of course, this isn't always possible. It depends on how well staffed and resourced your setting is, but if you can manage to do it, the child will benefit.

- Always speak to the child in a positive way. This might sound facile and obvious, but it's surprising how often we speak to children using negative language without realising it. Take a moment to think of your own use of language to the children. How often do you say things like 'Don't run around indoors', 'You mustn't say rude words like that' or 'You can't use my pen'? Turned around, these phrases have a positive equivalent that is much more acceptable: 'Walk around the room, please', 'Try to use polite words like "Go away" rather than those words' and 'Use the big felt tips from the art area instead of my pens'. Simple as it may seem, practices like these all contribute to creating a positive and pleasant atmosphere for everybody, not least the children with behavioural difficulties, who often seem to hear nothing but 'don'ts' all the time.
- Make sure you face the child when speaking and don't turn away until you've finished speaking. Some children have difficulties keeping in their head what you've said to them once you lose eye contact and break the link between you. If they're not linked into you, their concentration may wander and they'll start to do other things, such as poking Mary beside them or picking at the loose thread in the carpet, so losing everything you're saying to them even when it's exciting. Keep bringing your eyes back to Buster and maintain that contact with him.
- Make sure your facial expression is always relaxed and warm. Children can be very good at reading body language and non-verbal gestures. If they've experienced lots of adults continually being cross with them, they probably know little else than frowns and tight lips. Try to overcome this by keeping a smile and twinkling eyes for the child, even if you have to pretend at times. It's all part of the building up of trust and closeness.
- Watch for any personality clashes and change the routine to avoid difficult situations if necessary. There could be relationship difficulties between the child and other children, or between the child and an adult in the setting. Disharmony has no place in an inclusive setting and you should do all you can to reduce it. (For more discussion about this, see Chapter 2, page ??.)
- If the child has any equipment, communication systems or other special facilities to support them, take the time to learn how to use them properly. Again, to build up trust and a positive relationship with the child, you need good communication.

### The setting and inclusion

While establishing positive relationships within the setting is crucial for including the child with behavioural difficulties, so too is providing an environment that is safe, warm, welcoming and with appropriate resources for both supporting and including the child. Try to see your working areas from the point of view of a child with behavioural difficulties. They may find things that are confusing, overwhelming, too challenging, too easy, lacking in excitement or stimulation or even boring. Any of these could be the cause of the child behaving inappropriately.

- Have a look at the physical layout of your room(s) and change it around if necessary to enable the children with behavioural difficulties to access the resources and equipment. Display pictures, labels and captions at a child-friendly height. Frustration at not being able to see pictures properly or take out equipment easily could result in some undesirable behaviour.
- Reassess the furniture, making sure that chairs and tables are the right height for comfortable working. You may think this sounds bizarre, but if the child is uncomfortable they will soon begin to lose concentration, fidget about and eventually end up in bother. If they're spending quite a bit of their time in discomfort, it's hardly surprising if they become tetchy with the people around them.
- Make sure there is space between pieces of furniture. If the child is prone to be a bit 'physically extrovert', they're less likely to hurt themselves if there is plenty of room between tables and cupboards.
- Make sure the floor is not polished, to give a more secure foothold. If the child tends to zoom around when they're behaving inappropriately, they'll be less likely to slip. Also keep the floor clear of small items such as pencils or Lego, for the same reason.
- Keep furniture and designated areas in the same place and keep the layout of apparatus the same, especially if it's used in another room or hall. Most children with behavioural difficulties

need stability and consistency of routine, and this can include the physical aspects of the setting. If you change things around, some children simply can't handle the disruption, and the only way they know of responding is to behave inappropriately. If you do need to have a change around, prepare the child beforehand, warning them what's going to happen and even involving them by encouraging them to give you a hand. Do this with safety in mind, though, making sure any jobs you give them are simple, safe and appropriate.

- Reduce the likelihood of confusion about the day's routine and activities by having your timetable or timeline in symbolic or pictorial form, as well as written. If the child's literacy skills are at a level that prevents them from reading your timetable, they need to be able to interpret it another way, and pictures or symbols are ideal for this. (See Chapter 4, page ?? for more about pictorial timelines and timetables.)
- Choose books that are appropriate for the children in terms of age, interests and achievement level. Select literature that appeals to the children, that interests and excites them, and makes them want to read the book over and over again. This is where knowing the child comes in handy. If they have a deep interest in dinosaurs, make sure you have books about dinosaurs as well as all the other topics you'd like them to discover. Make the books available to everybody and use them together, regularly. Buying the books and displaying them attractively isn't the end of your job. You need to share the books with the children, read them to the little ones, put on funny voices, encourage the children to join in where there are refrains or obvious phrases. When you've introduced a book to the children, leave it out for them to explore in their own time. You'll probably hear them 'reading' it aloud, using *your* intonation and expression! Then share it again with them at another time.
- Always have a quiet area available where the child can go for pleasant 'time out' and to relax a little. (See Chapter 4, page ??.)
- Some children with behavioural difficulties find it very hard to put their feelings into words; others find it hard to acknowledge that they have difficulties behaving appropriately. Using persona dolls or puppets to help the child explore their feelings can be a positive form of support. You can project the difficulties being experienced by the child onto the persona doll in a bid to help them identify with the character and begin to work through their difficulties. For example, you could say, 'Buster, this is Pedro. He sometimes gets really angry when somebody else has got the toy he wants and so he hits them and snatches the toy. He'd like to be able to ask for the toy politely so can you help him to think of a way to do this?' (For more details about persona dolls, see the section which follows.)
- Use dolls or puppets as part of story time, circle time or group discussions to support the child who has difficulties managing themselves in this kind of situation. As we have just discussed, the child may be able to contribute to the session by talking through the doll or puppet and projecting themselves this way.

As we come to the end of this chapter you might like to ask yourself the following questions.

1. Do I know the difference between integration and inclusion?
2. Does the legislation, both past and present, make sense to me in terms of the development of the philosophy of inclusion and how it is practised today?
3. Do I need to review my setting in terms of its inclusive practice? If so, does the whole setting need to be revised or just some aspects of my work?
4. Do I make sure that none of my children is inadvertently excluded from any activities on offer?
5. Am I truly putting inclusive practices into place in my work?

## Persona dolls

You can find a lot of useful information about using persona dolls, together with details about much of the relevant literature, by typing into your search engine 'Persona Dolls'. If you want to find out more about training in the use of persona dolls, you can make contact as follows:

Tel: 020 8446 7056  
 Fax: 020 8446 7591  
 E-mail: [personadoll@ukgateway.net](mailto:personadoll@ukgateway.net)

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### Summary

In this chapter we discussed:

- the concept of inclusion and how it has evolved historically, legally and in practice;
- the legislative developments from 1978 to the present day;
- the gradual move from 'integration' to 'inclusion', through examining the medical and social models of disability;
- general ways of ensuring exclusion does not occur in the early years setting, with relation to children with behavioural difficulties;
- some suggestions for developing inclusive practices.

### Further reading

Adapted from *All Together: How to create inclusive services for disabled children and their families: a practical handbook for early years workers*, Mary Dickins and Judy Denziloe (London: National Children's Bureau 2003).