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# NAVIGATING THE PATH TO HEALTHY DEVELOPMENT: TODAY'S CHILDREN ARE TOMORROW'S LEADERS!

The foundations that young children build in the earliest stages of life help determine their future abilities to thrive. Today's children are the thinkers, leaders, and builders of tomorrow. Mississippi could improve outcomes for young children—and our state as a whole—by increasing access to early intervention supports. This brief examines Mississippi's early intervention system and the need for expanding its services to reach more young children.

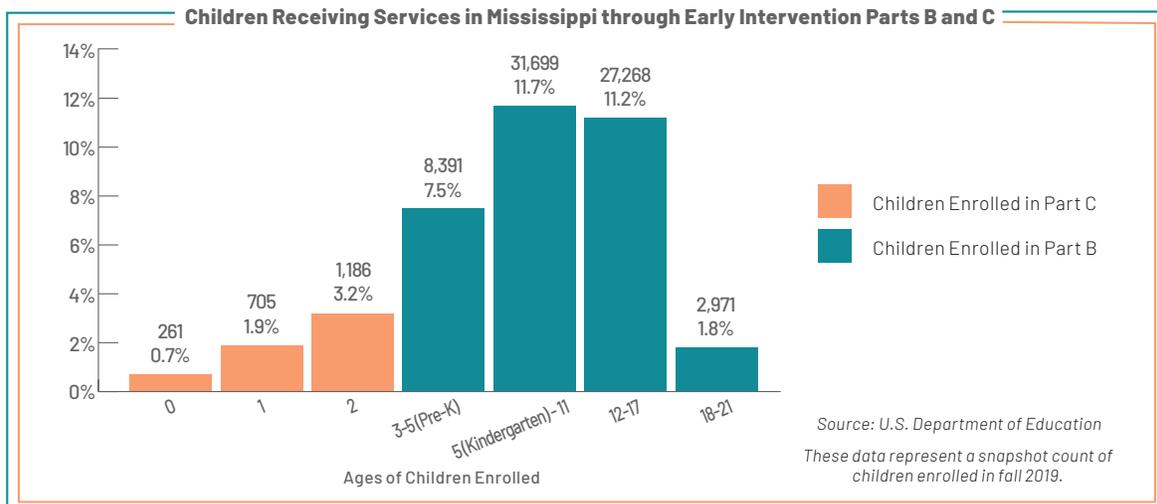
The architecture of our brains is built from the bottom up, with intense construction going on from infancy through age five. In the earliest years of life, **one million new neural connections are made each second!**<sup>1</sup> Because experiences in early childhood are the basis for lifelong learning, taking a close look at young children's developmental progress is key. The earlier that concerns around developmental progress are discovered, the easier they typically are to address effectively.<sup>2</sup> When there are concerns about development, it is important to have a statewide system of early intervention supports that are accessible to families.

Early intervention services are provided under two federal programs: Parts B and C of the Individuals with Disabilities Education Act (IDEA), with implementation by individual states.<sup>3</sup>

Mississippi's Part C services are administered through the Mississippi State Department of Health (MSDH)'s First Steps program, which serves very young children (birth-age two).<sup>4</sup> First Steps services include screenings, evaluations, assessments, Individualized Family Service Plans (IFSPs), and any needed transition plans to Part B services as children approach their third birthday.<sup>4</sup>

Mississippi's Part B services are administered through the Mississippi State Department of Education (MDE) and provide evaluations and special education services for children aged three to 21. Part B provides Individualized Education Programs (IEPs) for children, allowing for appropriate accommodations to meet students' unique developmental and ability levels, leading to their greater success in school, which can have positive lifelong effects—for students and for our state.<sup>5</sup>

Not all of our children who are eligible for these services benefit from these programs. Families can encounter roadblocks on their journeys, such as children not receiving regular developmental screenings<sup>6</sup>, not being referred to appropriate programs in a timely manner (or receiving no referral at all), or not having access to appropriate services and supports.<sup>7</sup>



# How does early intervention work in Mississippi?

## Early Intervention Part C: First Steps<sup>4</sup>

Under Part C of the Individuals with Disabilities Education Act (IDEA), Mississippi children younger than age three can qualify for early intervention services through Mississippi's First Steps Early Intervention Program (EIP). First Steps EIP is advised by a State Interagency Coordinating Council (SICC). First Steps services include:

- screenings
- evaluations and assessments
- Individualized Family Service Plans (IFSPs)
- early intervention services and transition plans

In order to qualify for services through First Steps EIP a child must receive:

- an evaluation and be found to have a significant delay (33%) in one area of development or a moderate delay (25%) in two or more areas of development
- a diagnosed physical or mental condition that could lead to a developmental delay
- OR
- an informed clinical opinion stating the child could benefit from early intervention services

## Early Intervention Part B<sup>8</sup>

Children and youth ages three to 21 with disabilities or developmental delays are served under Part B of IDEA. Public school children receiving special education services under Part B are required to have an Individualized Education Program (IEP). In order to receive early intervention services, children are evaluated by their local school district's special education office. Once it is determined that a child is eligible to receive special education services, their caregiver and evaluation team develop an IEP to support the child's learning. Conditions that qualify a child to receive services under Part B include:

- autism
- blindness
- deafness
- developmental delay
- emotional disability
- hearing impairment
- language and/or speech impairment
- intellectual disability
- multiple disabilities
- orthopedic impairment
- specific learning disability
- traumatic brain injury
- visual impairment
- OR
- other health impairment

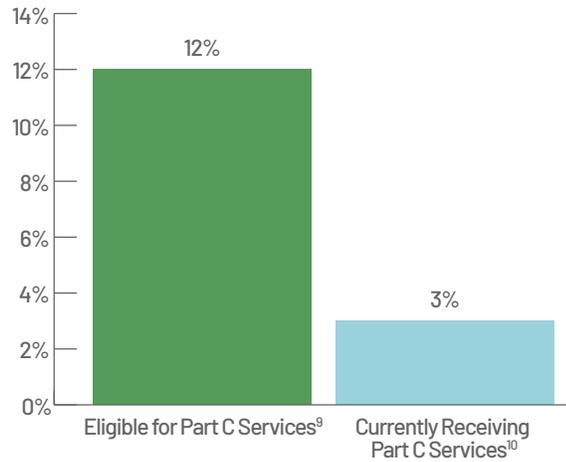
For more information about early intervention, including Part C funding sources, please see our companion brief *Navigating the Path to Healthy Development: Early Investment Pays Off!* (see <https://childrensfoundationms.org/research>)



### How many children could potentially benefit from Part C services?<sup>9, 10</sup>

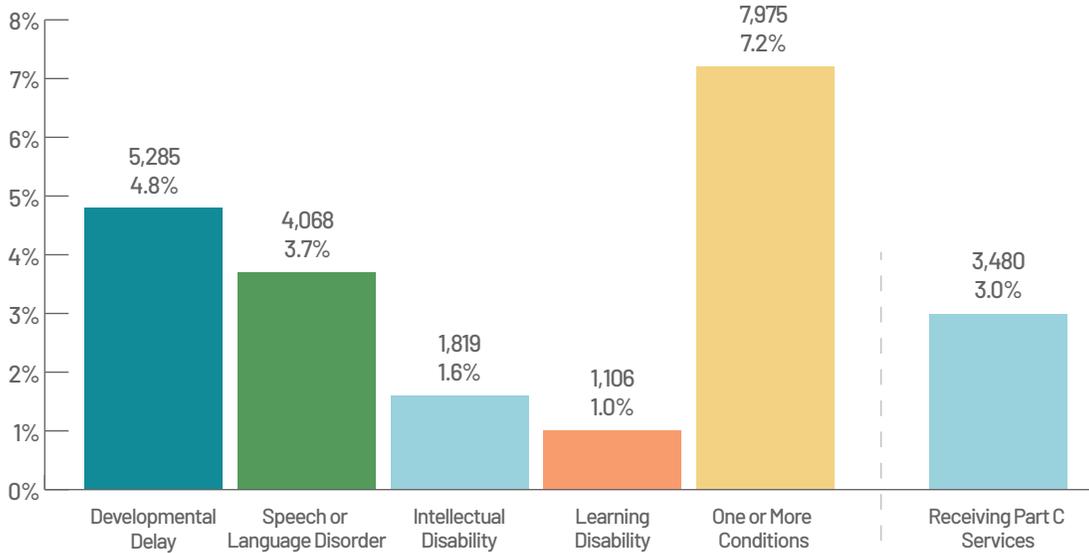
Comparing state estimates of the share of children likely to be eligible for Part C services with Mississippi's Part C eligibility requirements and our state's population of children younger than age three, data suggests that many of Mississippi's infants and toddlers with developmental delays are not receiving services. As shown in the chart on the right, the estimates based on Mississippi's population of very young children and Part C eligibility requirements indicate that nearly four times as many as the number of children enrolled in First Steps could benefit from Part C services.

### Estimated Rates of Part C Eligibility



Sources: Rosenberg et al. (2013)<sup>9</sup>, U.S. Department of Education (2019)<sup>10</sup>

### Prevalence of Developmental Conditions Among Mississippi Children (Under Age 3)\*



Source: The Child Health and Development Project: Mississippi Thrive! (2018)  
\*Parent-Reported Diagnoses

Source: U.S. Department of Education (2019)

Estimates from the Mississippi Child Health and Development Survey also suggest that there are more children who could benefit from Part C supports than those who currently receive them. Based on parent reports, the survey results indicate that 7.2% of Mississippi's children younger than age three have been diagnosed with a developmental delay or disorder, while 3% of Mississippi's children receive services from Part C. The chart on the left shows the percentages of very young children in Mississippi who have received diagnoses of developmental delays or disabilities from a health care provider.<sup>6</sup>

### Transitioning to Part B<sup>10</sup>

Not all children who receive Part C services will necessarily qualify for Part B special education services. Many children with a First Steps IFSP will require Part B services as they approach their third birthday, however. A smooth and effective transition from Part C to Part B is vital to ensuring that children with developmental health needs have access to high-quality intervention services. Compared to the United States as a whole, Mississippi has a larger share of children enrolled in Part C who reach their third birthday without a Part B eligibility determination (23% vs 13.6%) and a smaller share of children who exit part C having been determined to be Part B eligible (26.4% vs 38.3%).

### Number of infants and toddlers ages birth through 2 served under IDEA, Part C, who exited Part C programs, by exit reason and state: 2018-19<sup>1</sup>

	MS		US	
	Number	%	Number	%
Complete prior to reaching max age for Part C	200	9.5%	47,358	12.0%
Found to be eligible for Part B	556	26.4%	151,751	38.3%
Part B eligibility not determined by 3rd birthday	485	23.0%	54,022	13.6%
Not eligible for Part B, exit with referrals to other programs	38	1.8%	19,290	4.9%
Not eligible for Part B, exit with no referrals	101	4.8%	14,869	3.8%
Part B eligible, continuing in Part C*	NA	NA	11,646	2.9%
Withdrawal by parent	339	16.1%	54,813	13.8%
Moved out of state	94	4.5%	14,540	3.7%
Deceased	19	0.9%	851	0.2%
Attempts to contact unsuccessful	274	13.0%	27,023	6.8%
Total	2,106	100.0%	396,163	100.0%

NA = Not applicable | \*only an option in select states | Source: U.S. Department of Education (2018-2019)

## Where do we go from here?

These roadblocks are not insurmountable; there are key strategies that have demonstrated success in improving the growth and development of children in other states. Recommendations include:

- Evaluating Mississippi's funding of Part C programs and considering any adjustments that could be made in order to meet the needs of all eligible children
- Examining the structure of the early intervention system components that affect identification of services provided to children in need, such as provider education, provider contracting, and family outreach<sup>11</sup>
- Providing more information to early childhood care providers about early childhood development<sup>12</sup>
- Educating families and providers about the importance of developmental screenings at well-child visits (9, 18, and 30 months) as recommended by the American Academy of Pediatrics or any time there is a concern about a child's developmental progress<sup>13</sup>
- Equipping child care centers with adequate and appropriate referral resources<sup>12</sup>
- Examining challenges to the early intervention system flowing smoothly, including transitions from Part C to Part B<sup>11</sup>

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*Mississippi KIDS COUNT, based at the Children's Foundation of Mississippi, is part of the national KIDS COUNT network of state-based organizations supported, in part, by the Annie E. Casey Foundation. The Annie E. Casey Foundation creates a bright future for the nation's children by developing solutions to strengthen families, build paths to economic opportunity, and transform struggling communities into safe and healthy places to live, work, and grow.*

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