** Taylor**

The newest member of Miss Dorina’s preschool classroom is Taylor, who is three years old and full of life. Balls, cars, and anything that makes noise are favorite play things for him. Until recently, Taylor received early intervention services at home. He has made terrific progress since he was first diagnosed with an autism spectrum disorder, but he still has significant delays in receptive and expressive language and social-emotional development.

When Taylor’s mother, father, and grandmother met with Miss Dorina last week, they mentioned that he sometimes has difficulty interacting with adults, expressing his needs or feelings, and connecting with other children because of his language delays. His family also shared that Taylor is usually eager to interact with the other children but does so in ways that may be too rough and frightening to them.

Miss Dorina counts on Miss Laura, Taylor’s speech-language pathologist, for ideas about supporting Taylor within classroom routines. Still, she finds herself wondering: How can I make my classroom welcoming and supportive for Taylor? How can I help Taylor to make friends and play with his classmates? And how can we all work together in ways that support Taylor and all the other children, too?

**Marcus**

Marcus just turned 4 years old and loves to move. He is active and enjoys running and other large motor activities, even though his family and teacher agree that he falls down a lot. He lives with his mom and dad and his newborn baby sister. Both his parents work full time and he has been enrolled in a large, well-established full day child care center since he was 2 ½ years old. Prior to that, he stayed with his maternal grandmother.

Recent evaluations have revealed delays in speech and language that are significant enough to quality him for early childhood special education services. In addition, a physical therapist noted that Marcus’ muscle tone is mildly low, which may account for him falling and bumping into things.

At school, Marcus has little interest in classroom materials with the exception of the block area where he loves to knock down towers, whether he built them or his friends did. At home and at school Marcus has “meltdowns” when transitions interrupt his play. Marcus’ speech-language pathologist says he has mild to moderate articulation delays, low expressive vocabulary, and sentences that are usually two to six words long. He frequently substitutes one word for another that sounds similar and then is frustrated when others don’t understand what he said.

** Dusty**

This energetic 2-year-old lives in the northeastern corner of the state with his grandparents, Mac and Mabel. Dusty’s mom is in a residential treatment program and the whereabouts of his father are unknown.

Mac is a retired mechanic and Mabel is a homemaker; they are both in their 60s. While they were both looking forward to hunting, fishing, gardening, and canning at this phase of their life, they are instead raising a very busy and unpredictable toddler. By their own admission, neither of them is “much of a reader.” Television is their primary source of information.

Dusty is up at the crack of dawn every day and wants to do whatever his “pawpaw” does, especially if that activity is noisy. Mabel describes Dusty as headstrong and stubborn, “just like his mother.” When Dusty has tantrums or is destructive, Mac says he’s just “ornery.” They’re both tired and frustrated, but also acknowledge how much they want to make sure Dusty gets a good start in life.

** Everly**

Everly is 2½ years old and full of life. She joined her family when she was six months old through a private adoption. Everly is completely enchanted with princesses and watches Disney movies like Frozen as often as she is allowed.

For the first two years, Everly’s mother and father were her only companions, with little exposure to other children. Recent assessments revealed significant delays in receptive and expressive language and social-emotional development. Everly’s mother recalls one of the “testers” describing Everly’s behavior as “autistic-like.”

Everly is currently receiving early intervention services at home and participates once a week in a play group at a local park. Staff at the park program describe Everly as challenging due to a lack of ability to follow directions or respond to requests. They report that Everly seems eager to interact with the other children but does so in ways that are often rough and frightening to them.

Both Everly’s mother and therapist report that changes in routines can also evoke strong responses. One reason may be that two months ago, Everly’s parents were in a serious car accident. Everly’s mother was hospitalized with a concussion. She still has some difficulty with memory loss and decision-making and becomes agitated when others “talk down” to her or imply that she is not a capable decision maker.

 **Anthony**

Three-year-old Anthony and his family are behind on rent. They are facing possible homelessness and worrying they will run out of food. Many of these challenges can be linked to the difficulty Anthony’s mother is having accessing treatment for opioid addiction. A consequence of these stressors may be seen in how Anthony’s behavior has changed at his child care. He has become more socially withdrawn and has begun hitting and punching other children and having tantrums.

What state and community resources can help Anthony’s family identify the housing and food resources and then ensure the family is able to connect to them? How will they make the connections for this family to feel a sense of belonging and social connectedness while supporting Anthony’s mother to access treatment? How will they support Anthony’s family to partner with his teachers, so everyone is working together to help Anthony manage and express his feelings more positively? Who can help support Anthony’s teachers with how to provide safe, affordable care and an accepting environment during this difficult time? Where can Anthony’s teachers find resources to bolster all aspects of his learning and development, including helping him self-regulate? Will they examine their core values and beliefs, provide role-modeling, and promote opportunities for him to improve his social and emotional skills during play with classmates? Will agencies and organizations supporting Anthony’s family examine policies and practices to provide equitable access to opportunities, supports and services for Anthony?

**Drake**

Two and one-half-year-old Drake’s life has changed dramatically in the last six months. He was diagnosed with a profound bilateral sensori-neural hearing loss and had surgery to install cochlear implants.

Armed with new insights and new motivation, Drake’s mother and father are eager to support him to be fully bilingual in American Sign Language (ASL) and English. They’re eager to work with the educators at Drake’s preschool program and specialists, like Drake’s deaf educator, to support both languages in home and school settings.

His family, his teachers, and his specialists have lots of questions. How can they help support this young dual language learner in home, program, and community contexts? What are the most effective ways to talk with Drake’s peers about sign language and to help them to be willing and enthusiastic communication partners? What do evidence-based practices say about the most effective ways to support Drake’s development in all domains?

  **Gabrielle**

At 20 months, Gabrielle’s family made the decision that her mother would need to return to work full time. The family simply could not make ends meet on the single salary of her father. Grandmere, Gabrielle’s paternal grandmother, agreed to care for her two days a week; the other days Gabrielle would attend a nearby early childhood program.

For the Mirepoix family, it is essential that Gabrielle learn two languages: her parents speak French and English, but both sets of grandparents speak only French. Mr. and Mrs. Mirepoix have communicated this priority to Gabrielle’s child care program. While program staff say they are not skilled in implementing a program for a young dual language learner, they are eager to try to be a resource. But they have very important questions: What does a quality program look like for a toddler who is a dual language learner? Where might the program get resources to support translation of key words, environmental labelling, and verbal interactions? What would be the best way to teach the other children about a second language and to help them to both learn words in Gabrielle’s language and share words in theirs (English)?