INTRODUCTION
Early identification and intervention play a fundamental role in maximizing the potential of children with developmental disabilities. The provision of effective intervention services has the potential to reduce the long-term negative effects of developmental disabilities and subsequently reduce or eliminate the need for special education services. Longitudinal research involving children with developmental disabilities is essential to understanding the impact of early identification on child outcome.

RESEARCH QUESTIONS
This study utilized integrated statewide data sets to address the following questions:

1) What proportion of preschool children identified with a developmental disability continued to receive special education services?
2) What proportion of children who continued to receive special education services maintained the same disability classification and what proportion were reclassified?

The following disability classifications were studied:

- **AT** - Autistic
- **DD** – Developmentally Delayed
- **EH/SED** – Emotionally Handicapped or Severely Emotionally Disturbed
- **EMH** – Educable Mentally Handicapped
- **SI/LI** – Speech or Language Impaired
- **SLD** – Specific Learning Disabled
- **TMH/PMH** – Trainable Mentally Handicapped or Profoundly Mentally Handicapped
METHODS

Data Sources
Preschool disability status was obtained from the Children’s Registry and Information System (CHRIS). CHRIS was developed in 1990 to track children in Florida who are potentially eligible for services under IDEA, Part B. The CHRIS database contains referral, screening, evaluation, and eligibility information for preschool children throughout the state of Florida. Data entry for CHRIS is conducted at each of the 36 sites of the Florida Diagnostic and Learning Resource System (FDLRS). The CHRIS database provides the State of Florida, Department of Education with a means of documenting Child Find efforts to locate, evaluate, and provide necessary services to at-risk children as well as providing a useful tool for service coordination. Additional information about CHRIS may be obtained from the CHRIS website at www.chris.miami.edu.

Outcome disability status was obtained from the 2001-2002 State of Florida, Department of Education public school record database. This database contains educational information (including primary exceptionality) for all children attending a Florida public school.

Data Integration
The integration of databases was accomplished using deterministic data linkage techniques whereby a child’s unique record was identified in each database and joined across data sets to establish one record. Records were linked based on an exact match of the child’s last name, first name, and date of birth. If any of the matching variables differed, the pair was considered a non-match and was not included in the linked sample.

Subjects
The sample consisted of 9,523 children (6,665 boys) who were born in Florida, were identified with a developmental disability in CHRIS, and attended 3rd, 4th, or 5th grade at a Florida public school during the 2001-2002 academic year.

RESULTS & DISCUSSION

Continuity of Special Education Services
Results indicated that the majority of children identified with a developmental disability as preschoolers continued to receive special education services in 3rd, 4th, or 5th grade (see Table 1 and Figure 1). The proportion of children no longer requiring special education services varied across preschool disability classifications. Nearly half of all preschool children identified with SI/LI no longer had an identified disability at outcome. In contrast, nearly all preschool children identified with EMH, TMH/PMH, or AT remained in special education at outcome.

Consistency of Disability Classification
Consistency of classification also varied greatly by disability (see Table 1 and Figure 1). According to Florida statutes, all preschool children identified with DD must be reclassified with another disability by age 6 to continue receiving special education services. Therefore, no children were able to maintain the DD classification at outcome. Preschool children with all other disability classifications could maintain the same classification. The lowest rates of
consistent classification were found for SI/LI and EMH, where only 22% and 50% of children, respectively, maintained the same disability classification at outcome. The highest rates of consistent classification were found for TMH/PMH and AT, 69% and 86%, respectively. Therefore, it appears that reclassification is less likely for young children identified with severe disabilities and more common for children with milder disabilities.

**CONCLUSIONS**
A better understanding of the future disabilities (if any) that children are likely to be assigned later in elementary school will allow school systems to better plan and manage resources in order to provide services to these children.

Additional research is needed to better understand the factors that influence changes in disability classification. Such information can be used to enhance early identification practices and service provision for children with disabilities, ultimately improving outcomes for these children.

**ACKNOWLEDGEMENTS**
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<table>
<thead>
<tr>
<th>PK DISABILITY</th>
<th>SI/LI</th>
<th>SLD</th>
<th>EH/SED</th>
<th>EMH</th>
<th>TMH/PMH</th>
<th>AT</th>
<th>Other</th>
<th>Totals Disability</th>
<th>No Disability</th>
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<tbody>
<tr>
<td>SI/LI (n = 5213)</td>
<td>22.1</td>
<td>19.4</td>
<td>3.6</td>
<td>2.6</td>
<td>0.4</td>
<td>0.9</td>
<td>2.6</td>
<td>51.5</td>
<td>48.5</td>
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<td>SLD (n = 708)</td>
<td>5.1</td>
<td>58.8</td>
<td>5.4</td>
<td>5.4</td>
<td>1.7</td>
<td>2.4</td>
<td>1.6</td>
<td>80.2</td>
<td>19.8</td>
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<tr>
<td>EH/SED (n = 345)</td>
<td>1.2</td>
<td>8.4</td>
<td>64.1</td>
<td>2.0</td>
<td>0.6</td>
<td>5.2</td>
<td>1.2</td>
<td>82.6</td>
<td>17.4</td>
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<td>EMH (n = 506)</td>
<td>4.5</td>
<td>13.8</td>
<td>3.2</td>
<td>50.0</td>
<td>14.8</td>
<td>5.5</td>
<td>2.6</td>
<td>94.5</td>
<td>5.5</td>
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<td>TMH/PMH (n = 291)</td>
<td>0.7</td>
<td>1.0</td>
<td>0.7</td>
<td>8.2</td>
<td>69.4</td>
<td>11.3</td>
<td>4.1</td>
<td>95.5</td>
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<td>AT (n = 262)</td>
<td>1.5</td>
<td>3.4</td>
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<td>0.4</td>
<td>1.9</td>
<td>86.3</td>
<td>1.5</td>
<td>95.8</td>
<td>4.2</td>
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<td>DD (n = 2198)</td>
<td>10.3</td>
<td>26.8</td>
<td>7.3</td>
<td>15.3</td>
<td>4.1</td>
<td>4.8</td>
<td>5.0</td>
<td>73.5</td>
<td>26.5</td>
</tr>
</tbody>
</table>

Table 1. Distribution of Outcome Disability Classifications for Children Identified with a Developmental Disability as Preschoolers
Figure 1: Distribution of Outcome Disability Classifications for Children Identified with a Developmental Disability as Preschoolers

Preschool Disability Classification

- SI/LI: 51.5%
- DD: 73.5%
- SLD: 80.2%
- EH/SED: 82.6%
- EMH: 94.5%
- TMH/PMH: 95.5%
- AT: 95.8%

Percentage of Children with a Disability at 3rd, 4th, or 5th Grade

Other Outcome Classification
Consistent Outcome Classification