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Early intervention in preventive perspective

In years 2003-2004 the European Agency for Development in Special Needs Education realized the project "Early Intervention in Europe", having on aim the analysis of the state of hitherto workings from the domain of early intervention, defining the most important problems in this area, as also formulating recommendations in order to improve the process of services and provision. Experts from 19 European countries from the early intervention field were involved in the realization of the project. The discussion of the conducted results of research resulted in a report (Analysis of Situations in Europe, Key Aspects and Recommendations) in which one of the most important achievements of the project was introduced - the proposal of the European definition of early intervention. The early intervention determines the set of services/provision offered to very small children and their families on request of the latter, in the definite period of the child's life. It includes all undertaken actions in response to the child's special needs, and having on aim the support of his development, enhancement of the family's competences, as well as support of the proper social functioning of the child and his family. These actions should take place in the child's natural environment, at best on local ground , in frames of interdisciplinary, oriented towards the family of the program led by a team of experts¹.

Early intervention as prevention

Prevention is an action which has on aim the decrease of the probability of appearance of unfavorable phenomena as well as the limitation of their consequences for man and society. The aim of preventive intervention is the enhancement of chances so that the development in childhood and growing up period will run normally and that the possibility of the appearance of later disorders will get smaller².

Existing preventive programs can be situated on three levels:

¹ Summary Report Early Childhood Intervention-Analysis of Situations In Europe. Key Aspects and Recommendations"- Summary Report (2005). European Agency for Development in Special Needs Education.

² Mirkowska -Mankiewicz A. (2004).Rola wczesnej interwencji – przegląd światowych badań. Kompleksowa pomoc. Materiały z Międzynarodowej Konferencji Naukowo-Szkoleniowej” Wielospecjalistyczna , kompleksowa pomoc małemu dziecku z zaburzeniami rozwoju i jego rodzinie w ośrodku wczesnej interwencji”. Warszawa, s.37

1. level of primitive prevention
2. level of secondary prevention
3. third level of prevention

In frames of primitive prevention, actions and services are offered which aim is to decrease or prevent the appearance of a disease or disability, e.g., the young girls' vaccination in prepuberal age against German measles or enriching cereal products in folic acid in aim of decreasing the risk of appearance of defects of the nervous system. It is a prevention of strict sense, thanks to which the risk of the appearance of disorders is being prevented.

Secondary prevention includes operations and services focused on, so called, groups of high risk, and so the kind of groups in which a disease or disorder already exists or there is a high probability of their appearance. Thanks to early detection and treatment of initial symptoms, one tries to prevent their development.

Prevention of the third level consists of providing for the ill persons or touched with disorders operations and services having on aim the limitation of consequences of these disorders.

Undertaken actions are directed on the environment in order to dismiss situations which favor the appearance of a disorder or call them out³.

Early intervention, as a directed action on helping the child in whom, on basis of prenatal examination or the early developmental diagnosis, was affirmed the risk of appearance of developmental disorders, is the essential element of prevention.

Early intervention - the most important questions and recommendations

The report summing up the project Early intervention - the analysis of the situation in Europe; the most important questions and recommendations, describes the evolution of ideas and theory on the subject of EI, which led to a new point of view on this field, being in the area of direct interest of the service of health, the sector of education, as well as social services. It was acknowledged that a modern, dynamic interdisciplinary approach stands in the opposition to the classic model of early intervention, in which professionals took over, in whole, intervention actions, focusing only on the child's deficits. Modernly, elements of a principle meaning for the realization of the new EI conception have been determined, acknowledging that early intervention is a system of complex services, allowing the child to discover and

³ Firkowska-Mankiewicz A. (2004). Rola wczesnej interwencji – przegląd światowych badań. Kompleksowa pomoc. Materiały z Międzynarodowej Konferencji Naukowo-Szkoleniowej” Wielospecjalistyczna , kompleksowa pomoc małemu dziecku z zaburzeniami rozwoju i jego rodzinie w ośrodku wczesnej interwencji”. Warszawa.

develop his individual. The view from this perspective prevents setting for parents and the child unrealistic aims. On the other hand, a suitably led and a really early intervention in conditions of integration, can contribute to beneficial changes in the domain of the child's development, strengthening the family's potential and proper quality of the educational - therapeutic process.

In frames of the Agency's project, elements of a principle meaning for the realization of the new EI conception in Europe were defined:

- accessibility, closeness, financial accessibility and variety of services
- target groups, team work, professional trainings and work tools.

Taking into account the above mentioned key elements, a series of recommendations, directed to all the participants of the process and realizing the ecological EI system model, were formulated.

Therefore, the success of the early intervention process depends on overall, team, and interdisciplinary actions, based on the following theoretical contexts:

- preventive perspective,
- ecological theory of the man's development,
- system theory of the family,
- individualization of approach⁴.

The appearance of new factors and tendencies, in the approach to problems of helping the family of a small child, is the effect of practical realization of system theory of the family, based on notions of: autonomy and unity of the family. The basic aim of intervention is, therefore, supporting and aiding the child in his development and helping in creating a good quality life for the children and their families, in assumption that the individual and the family are inseparably connected with each other. An important aspect of supporting influences is improving the families' quality of life through offering provision and services that strengthen the feeling of parental competency and the family's mental well-being. This tendency can be noticed both in reference to the process of the child's diagnosis and the educational-rehabilitation work, and what is important - it helps the family to positively perceive the work of experts. This aspect is underlined in the report published by the European Agency for Development in Special Needs Education, in which the experts underline the necessity of

⁴ Skórczyńska M. (2006). Współczesne tendencje we wczesnej interwencji u dzieci zagrożonych niepełnosprawnością lub niepełnosprawnych. Kraków.

assuring high quality of co-operation with the families as the main partners of the intervention process, based on the following elements:

Co-operation is used in the text in a sense of families and professionals working together, both providing their own expertise and combining efforts and responsibilities.

- professionals have to initiate co-operation and have an open and respectful attitude towards the family, in order to understand their needs and expectations and avoid any conflict arising from different perspectives on needs and priorities, without imposing their point of view;
- professionals should organize meetings in order to discuss the different points of view with parents and together set up an agreed written document, called an Individual Plan.
- The Individual Plan should present an agreed plan defining an intervention which has to be conducted, and also the aims, strategies, responsibility, and the evaluation of procedures. This kind of agreed written plan should be regularly estimated by families and professionals⁵.

Above mentioned recommendations are based on the principle that ECI⁶ is suitable for all children and families that need support. In order to assure proper quality of ECI one should strengthen efforts undertaken by experts together with families taking into account these particular priorities:

1. Families and professionals need policy measures that are carefully co-ordinated in terms of strategies for implementation, objectives, means and results;
2. Policy measures should aim to support and ensure co-ordination of the process of education, along with social and health services. Overlapping or contradictory measures within or across the services should be avoided;
3. Policy measures might include developing regional and national ECI support centers, acting as a link across the policy, professional and user family levels.

Taking under consideration the above mentioned elements, a series of recommendations directed, first of all, to engaged in ECI experts, was formulated. They have to serve the improvement of quality of services offered in frames of existing EI centers, as well as consolidation of their workings. Reaching out to meet the needs of families and children

⁵ Summary Report Early Childhood Intervention-Analysis of Situations In Europe. Key Aspects and Recommendations"- Summary Report (2005). European Agency for Development in Special Needs Education.

⁶ Intervention in early childhood

should, first of all, manifest itself in factual, precise, and extensive information on the subject of ECI services/provision. Special attention, in the opinion of professionals, should be paid to the use of precise, but accessible language of information. In the case of families from different cultural backgrounds, their preferred language is to be used in order to avoid excluding them from access to any relevant information. This means that:

- families have the right to be well informed from the moment when the need is identified;
- families have the right to decide, together with professionals, on the next steps to be undertaken;
- ECI policy cannot be imposed onto families, but should guarantee the right of the child to be protected. The rights of the children and families need to converge;
- Families and professionals share an understanding of the meaning and the benefit of the type of intervention recommended to families and the child;
- The development of written documents (such as an Individual Plan, Individual Family Service Plan, or equivalent) prepared by professionals together with families, facilitates transparency and common agreement on the ECI process: planning of intervention, formulation of goals and responsibilities, evaluation of results;
- Families should receive training upon request, which would help them obtain the required skills and knowledge, therefore facilitating their interaction with professionals and with their child.

Interdisciplinary work

Services/provision in early childhood require the participation of experts from various specialties in many fields. In order to ensure high quality teamwork each ECI professional should work in an inter-disciplinary way before and whilst carrying out the agreed tasks. They need to share principles, objectives, and working strategies. The different approaches must be integrated and co-ordinated, reinforcing a comprehensive and holistic approach rather than a compartmentalized one. Special attention should be paid to the following aspects:

- Information needs to be shared within groups in order for team members to complement each other, according to both their individual skills and competencies;
- Decisions should be taken by the team/professionals following discussion and agreement;

- A contact person should be nominated in order to co-ordinate all necessary actions, ensure permanent contact with the family and avoid numerous unnecessary unilateral contacts between the services and the family. The contact person should be the reference person for the family and the professional team. He/she should be nominated according to the skills required for each specific situation;
- Professionals from different disciplines need to know how to work together. Common further or in-service training should be organized in order for professionals to share common basic knowledge related to child development; specialized knowledge related to working methods, assessment, etc., and personal competences on how to work with families, in a team, with other services and on how to develop their personal abilities;

Adequate co-ordination of sectors

The variety of sectors involved in the ECI process should guarantee the fulfillment of aims of all prevention levels through adequate and co-ordinated operational measures.

In order to ensure that the health, education, and social sectors involved in ECI services and provision share responsibilities, the following recommendations are suggested:

- Health, education and social services should be involved in early detection and referral in order to avoid gaps or significant delays that might affect further intervention as well as waiting lists in the case of overloaded services or teams;
- Developmental screening procedures are there for all children. They need to be well known and systematically implemented;
- Consistent monitoring, advice and follow-up procedures need to be provided to all pregnant women.

Adequate co-ordination of provision is necessary in order to guarantee the best use of the community resources. Good co-ordination means that:

- Services should ensure continuity of the required support when children are moving from one provision to another. Families and children should be fully involved and supported;
- Preschool settings should ensure a free place to children coming from ECI services/provision.

As it was mentioned above, these recommendations are mainly addressed to professionals working or planning to work in this field, but they also concern decision-makers at the policy level. This is why an evaluation of impact of ECI policies should be regularly carried out and

communicated in order to promote discussion and to stimulate research in this field. It should be taken into account that early childhood intervention policies are the common responsibility of families, professionals and policy makers at local, regional and national levels.

Early intervention - ecosystem approach

The mentioned in the report areas in which changes are being made and also the evaluation of existing achievements, allow to perceive a wider, than so far, perspective in which we can describe the practice of early intervention. It seems that the proposed perspective of the ecosystem approach of the situation of the child with development problems, gives fully a modern and dynamical approach in early intervention. Taking into account the existing tendencies, one can ascertain that, at present, EI is considered as multidisciplinary services (educational and therapeutic) offered to children in aim of improving their state of health and well-being (comfort) in connection with the plan of supporting their families⁷.

Thanks to this kind of interventionist perspective, one works, first of all, with the family, not neglecting any of the levels: individual level, family level, and social level. The strength of the new model is based on appealing and using the family's existing potential to search for immunity inherent in them and the child, and on co-operation, the partnership of professionals and support services, with the family⁸.

Ending

The standards of the European Union in the field of systematic early help place before us numerous challenges, some are in the phase of ideas, others took a concrete dimension. With hope one waits for the realization of the national Health Program for years 2007-2015, with a primary and long-term aim: The improvement of health and, connected to it, the quality of the population's life. The key objective, in the context of prevention actions undertaken in the population of children, is the strategic aim III in the domain of:

- improving the care of the mother and child,

⁷ Firkowska-Mankiewicz A. (2004). Rola wczesnej interwencji – przegląd światowych badań. Kompleksowa pomoc. Materiały z Międzynarodowej Konferencji Naukowo-Szkoleniowej” Wielospecjalistyczna , kompleksowa pomoc małemu dziecku z zaburzeniami rozwoju i jego rodzinie w ośrodku wczesnej interwencji”. Warszawa.

⁸ Firkowska - Mankiewicz 2004, s.40

- improving the early diagnosis of health disorders and active care of the children and youth.

The proper application and realization, by Poland, of accepted objectives will require including recommendations contained in the European standards⁹. Accepting the ECI process in the perspective of the ecosystem model as a set of services and provision offered to the children and their families, requires a strategy of possessing a wholesome vision, in which the temporary effect is introduced into a composition of the future perspective - in thought of the EI European idea, **from patient to citizen**.

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⁹ Summary Report Early Childhood Intervention-Analysis of Situations In Europe. Key Aspects and Recommendations”- Summary Report (2005). European Agency for Development in Special Needs Education.

