



MINISTERSTVO ŠKOLSTVÍ,
MLÁDEŽE A TĚLOVÝCHOVY



INVESTICE DO ROZVOJE VZDĚLÁVÁNÍ

Early Intervention in the Czech Republic

Home preparation

Read the article introducing basic facts about early intervention and fill in the missing words. Make sure you understand all of the offered words :

Early Intervention

aware training problem-solving screening emotional at risk
inclusive childhood appropriate proves toddlers physicians enters
duration relationships

Children _____(1) of a developmental **delay** or disorder are routinely referred to Early Intervention by their _____(2). If a child qualifies, he or she may **receive** a range of services at no (or low) cost to the family. Early Intervention is designed to improve **outcomes** for children with disabilities by providing early, _____(3), and intensive interventions.

Early Intervention (EI) refers to the right of every very young child and his/her family to receive the support they might need. EI aims to support and **empower** the child, the family and the services involved. It helps to build an _____(4) and **cohesive** society that is _____(5) of the rights of children and their families.

According to Park & Peterson (2003), recent research on brain development _____(6) that positive and rich experience during early _____(7) can have positive effects on brain development, helping children to **acquire** language, to develop _____(8) skills, to form healthy _____(9) with peers and adults and to acquire different abilities that will be of importance throughout life.

In 1986, the U.S. Congress created the mandate for a range of services to be provided to infants and _____(10) with disabilities, through what is referred to as "Early Intervention."

"Early Intervention," according to the law, is: "a statewide, comprehensive, coordinated, multidisciplinary, interagency system that provides early intervention services for infants and toddlers with disabilities and their families." In simpler terms, it is a range of services designed to intervene at the early stages of an infant or toddler's disability. Early intervention in the USA is designed to serve children with disabilities under the age of three, and the families who care for them. Contrary to the USA where EI takes place from birth to three years of age, in European countries the _____(11) of intervention is variable. As a principle, support is provided to a child and his/her family until the child _____(12) the school system. In some countries, this means the beginning of compulsory education.

Today, each state **is provided** grants from the federal government to provide comprehensive services to infants and toddlers with **disabilities**.

Infants or toddlers with disabilities in one or more of the following areas of development may qualify for Early Intervention: physical, cognitive, adaptive, communicative, or social and/or _____(13) development.

EI consists of services focused on very young children and their families, provided at their request for the purpose of: ensuring and enhancing child's personal development, strengthening the family's own competences, and promoting the social inclusion of the family and the child.

These actions are to be provided in the child's natural setting, preferably at a local level, with a family-oriented and multi-dimensional teamwork approach.

A network of professionals offer services including: _____(14) and assessment; family _____(15), counseling, and home visits; speech therapy; occupational therapy; psychological services; audiology services; vision services; social work services; and transportation. These are provided, with some exceptions, at no cost to the family.

(adapted from <http://www.firstsigns.org/treatment/EI.htm>)

In-class material

1. Read the following sentences talking about early intervention and say if they are true or false:

1. Early intervention applies to children of school age or younger who are discovered to have or be at risk of developing a handicapping condition or other special need that may affect their development.
2. Early intervention focuses on the child alone not on his family.
3. Early intervention consists of different specialized services that should help to reduce the effects of the handicapping condition in child.
4. Early intervention can be remedial or preventive - remediating existing developmental problems or preventing their occurrence.
5. Early intervention programs can be provided only in specialised centres.
6. Early intervention may begin at any time between birth and school age; however, there are many reasons for it to begin as early as possible.

2. Read the following paragraphs and match the appropriate heading to each of the paragraphs:

Five Bad Reasons to Avoid Early Intervention

1. _____

The "label" your child gets to qualify for early intervention doesn't go on with him through his whole life -- many kids go from EI right into regular education preschools and kindergartens. The idea is to label now so that there's no need to label later. Because those labels that come later stick a lot harder.

2. _____

Mothers and fathers and in-laws and siblings are always full of advice, but as a parent, you are the one who has to decide finally. You spend more time observing your child than anyone, and if you have **concerns**, they need to be respected -- if not by others, then absolutely by yourself. Follow your intuition.

3. _____

Maybe, but you're gambling with your child's life here. When your child is five and still delayed, you're not going to be able to dial things back and try early intervention. Early intervention will do no **harm**, and may do a great deal to help.

4. _____

Sending your child to early intervention is not like sending him to boot camp. It's fun. Your child will think he's playing as he does things to strengthen his motor skills and **gain** meaningful language. You'll have fun watching it, too.

5. _____

There are only 24 hours a day! If you decide to do early intervention for your child only by yourself, it will be terribly demanding and you can never reach the quality of the services provided by the skilled professionals. They are the ones who know which way will be the most effective for your child.

(adapted from <http://specialchildren.about.com/od/earlyintervention/tp/EIbadreasons.htm>)

Headlines:

A: My family thinks it's a bad idea.

B: Children need to play and have fun, not do therapy.

C: I don't want to make my child stigmatised .

D: I'll just work with my child myself.

E: My child will catch up on her own.

3. Have a look at the table showing the system of early intervention for children at risk from their birth to school. Fill in the names of institutions that provide the mentioned services at certain ages in the Czech Republic:

Age	0-9 months	6 months - 2 years	2-6 years		6-18 years
Institutions	_____ : birth control, scanning, health care	_____ : support of child's development	_____ : education, social skills development, specific training and support	_____ :	_____ :
	_____ : institutional care providing full boarding services, social care, health care, education				
	_____ : social and emotional support from relatives				

4. Now read more detailed information describing the system of early intervention according to authorities responsible for providing the early intervention:

Authorities responsible for providing the early intervention

Education

*Ministry of Education, Youth and Sports,
Regional school authorities, Community authorities*

Educational authorities overtake the responsibility of child/family educational support mainly from 2 years of age.

A specialist from **Special-Pedagogical-Psychological Centre (SPCs)** and/or from **Early Intervention Centres** visits the child to provide the educational support to the child with special needs. This takes place either at home, or in any of the preschool institutions (children's home, nursery, kindergarten, day care centre...), or yet at school (from 6 years old). In SPC, professionals from education, social and health area are working together; other specialists can also be involved. Special teacher, psychologist and/or social worker are in charge of supporting parents and/or professionals working with a child (in day care/kindergarten/pre-school centres/homes) and must also provide professional support to the child.

There are special classes in **kindergartens** and a certain number of special kindergartens for children with special needs. The educational programme is formulated to meet the needs of the child. Special kindergartens provide broad integrative range of educational, health and social services to children with special needs and counselling to their families.

Health

Ministry of Health; Regional health authorities

Health authorities at regional level are responsible for both policy and the delivery of health support services from birth through the whole life of a child.

A **health nurse** visits the family from the 1st week of the baby's life to provide the information and/or counselling about the nutrition, development and care of the child and the care of the mother. The key person is the **medical doctor**. There is a regular visit schedule (at the medical centre and/or hospital or clinic) and schedule of screening: they include developmental tests and inoculation of the child as well as checks of the mother's health

conditions. A **link** exists from general health services to special medical services; there is also cooperation with educational and social services supporting the family/child with special needs.

Children homes for children of early age and nurseries are under the responsibility of the national and/or regional health authorities.

Social

Ministry of Social Affairs, Regional / Community authorities

Social authorities at national, regional and/or community level are responsible for social care and social services delivery from the child's birth till the social need exists. Social authorities provide financial support, counselling to families with a child with special needs. Social care institutions and day centres are under the responsibility of the social sector.

Early Intervention according to the type of care provided:

	Provision	Location	Positive aspects
Health care	Medical care, developmental scanning, health control, counselling, specific treatment supporting development of skills and abilities of a child.	Nurseries- day care services Hospitals, Health centres, Rehabilitation centres	- All children are reached within health services. - Network among health services is good - Free access - Team work - Family-oriented services
Social care	Broad range of social care services and social family counselling. Social services are provided either within special institutions and/or delivered directly to families and children at family care.	Special children homes, Day care centres, Social institutions	
Educational care	Responsible for counselling, specific developmental support and stimulation of a child, education. These institutions develop Individual Educational Plan and are responsible for its fulfilling and following either at institutions and/or at home	SPC, Kindergarten (special kindergartens, special units within mainstream kindergartens, individual mainstreaming)	Qualified staff; interdisciplinary training. - Speech therapy, development of language and communication skills, are part of the education of children with special needs. - Medical staff (physiotherapist, eye-doctor, neurologist, etc.) are often members of the SPC team.

(adapted from <http://www.european-agency.org>)

Speaking

Answer the following questions with your partner:

1. How would you characterize the concept of early intervention? What is its main aim?
2. Give reasons why it is important to provide early intervention to children with some kind of impairment?
3. Is the child the only one who needs support? Who else and what kind of support they need?
4. When should the early intervention start and when should it finish?
5. What institutions provide early intervention services in the Czech Republic and what **precisely** do they focus on?