## Early Intervention – Evolving contexts of need

Carpenter, in Limbrick 2007 –
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Currently, Early Childhood Intervention typically deals with babies and pre-school children with disabilities and special educational needs. It usually involves input from various professionals from backgrounds such as health, psychology, social care and education, in an attempt to enable the child and his or her family to become as functional as possible.

Early Childhood Intervention services will have to extend their criteria of need to allow them to take account of family circumstances which place children at risk of negative educational and life outcomes. By providing very early support, services can increase the likelihood of the family being able to engage or re-engage with mainstream societal services (e.g. education, health), thus reducing the long-term costs to society (Barnett and Hustedt, 2005; Guralnick, 2001). Studies by researchers such as Champion (2005) and Perry and Pollard (1998) indicate that the disabling side effects of birth accidents, such as multiple birth and premature birth, can be ameliorated with very Early Childhood Intervention and prenatal intervention.

Many families, when reaching out to professionals during traumatic periods of their lives, have found that the intrinsically supportive process of Early Childhood Intervention (in its appropriate form) has sustained them (Carpenter, 2002). This is very much the experience of families who, for example, have been involved in the National Autistic Society's EarlyBird programme (Morris, 2002), which bridges the gap between diagnosis and the start of formal schooling, and empowers parents with the skills and knowledge specific to autistic spectrum disorders (ASD). Recently, Wylie and Foster-Cohen (2004) reported an early intervention approach through music, which encourages early communication and social interaction. The mother of India, born at 24 weeks, said of this programme:

"My husband and I felt as if we were on a different planet where everyone but is knew what to do for our baby. Music seemed the only way of creating a safe, intimate environment where I could truly become connected with my little girl."

Sherborne Movement, too, can be a catalyst for strengthening relationships between young children and families (Hill, 2006). What is central to many of these programmes is the goal of establishing shared communication in the infant-key carer dyad. Augmentative communication approaches (e.g. signing, pictures, objects of reference, etc.) have a particular contribution to make (Romski and Sevcik, 2005).

The world of Early Childhood Intervention (ECI) is continually evolving. The early intervention service system today, with the plethora of new initiatives, is considerably different to that in the 1980s. The early intervention services (where they existed in the UK) were developed based on the assumption that mothers and children would be home during the day and available to receive early intervention practioners in their

home or to travel to an early intervention service clinic or centre. Maternal employment patterns now render this impracticable for many families. As a consequence, other figures – e.g. childminders, grandparents – find themselves interfacing with ECI service providers. Alternatively, Warfield and Houser-Cram (2005) suggest accommodating parent work schedules may mean that visits have to occur very early or very late in the day (i.e. before or after work), which may not be an optimal time for intervention for the child, the parent or the provider.

Despite these considerable changes, the goal of Early Childhood Intervention remains, as it has always been, to meet the developmental needs of the eligible child and the needs of their family related to enhancing the child's development.

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