

The State of Early Childhood Intervention and Opportunities for Development in Hungary

INTRODUCTION

The importance of providing preventative and intervention services in the first few years of life, in terms of their impact on the child's development and later possibilities in life, has become increasingly recognised in both professional and public opinion in Hungary. These services not only play a decisive role in the child's individual development, future physical and mental health, but also have a profound effect on the stability of the family's situation besides strengthening its competences. Moreover, their societal usefulness and their long-term influence on social integration and economic life are also significant.

Due to research and developmental programmes related to early childhood intervention, the stronger representation of professional interests and efforts made in accordance with the goals of the European Union, the issue of early childhood intervention has also attracted considerable attention in Hungary. Since 2014, this field has been coordinated by the State Secretariat for Family and Youth Affairs. The most significant measures concerning early childhood intervention were summarised in a Government resolution in 2015 [Hungarian Government Resolution 1246/2015. (IV. 23.) on Measures Necessary for Successful Intervention in ECEC].

In the past ten years, several projects in relation to early childhood intervention have been carried out under the aegis of the various sectors concerned. Although these projects attempted to establish connections with each other, they were unable to achieve a comprehensive systematic change.

This made it reasonable to initiate an intersectoral project that channels in the results obtained so far and involves the co-operation of sectors such as health care, education, social and family affairs. This project has the potential to better ensure the application of a complex and interdisciplinary approach to early childhood intervention.

In February 2017, EFOP 1.9.5 *Intersectoral Development of Early Childhood Intervention* was commenced, as a high priority project. Its main objectives are: (1) initiating a client-centred reform of early childhood intervention services and (2) providing guaranteed access to services for children under six in need of special support, as well as for their parents, based on particular needs.

1. THE MEANING OF EARLY CHILDHOOD INTERVENTION

The term early childhood intervention can have different meanings in different countries. One of the most frequently used definitions is the following: early childhood intervention is a composite of services for very young children and their families, which provide help and take action when a child needs special support in order to ensure and enhance her/his personal development, in addition to which they strengthen the family's competencies and promote the social inclusion of the family and the child (European Agency for Development in Special Needs Education, 2005, 2010).

Hungarian experts interpret this in a wider sense. For them, early childhood intervention incorporates preventative services covering the pre- and peri-conceptual periods as well as the entirety of the provision of services targeting children and their families from the time of conception to the age of the child entering school.

The early childhood intervention system consists of all institutions and professionals working in the fields of health care, education, social policy, child welfare and other related fields providing services to and working with young children and their families from the time of conception until the child enters school. There are three stages of early childhood intervention: the first one is the screening and problem detection stage, the second is the diagnostic stage and the third covers the provision and supply of services and support, including therapies, skills-development support, habilitation, rehabilitation, etc. This level also contains family support and social welfare (Kereki, 2015a; Kereki & Szvatkó, 2015).

While early childhood intervention services can be universal, that is, accessible to all, such as in the case of health visitor services, they can also be specifically targeted at several groups in need of special support (e.g. education services). Its universal nature includes the concept of a differentiated approach that determines the nature of the preventative and intervention activities in view of the various needs of these groups of children and their families.

The target groups of early childhood intervention can be classified according to the various needs as well as legal regulations and the categories appearing in the Hungarian services. Based on the above-mentioned aspects, we can distinguish the following groups:

1. Children living with biological risks who are affected on a biological (organic) level: children born with developmental risks (e.g. premature babies), children with developmental delay, and children living with disability, chronic illness or rare diseases;
2. Children who are vulnerable in terms of psychological development,
3. Socially vulnerable children; as well as
4. Exceptionally talented children and their families who make up the often-overlapping clusters of early intervention policies (Kereki, 2015b).

2. INTERNATIONAL TRENDS IN EARLY CHILDHOOD INTERVENTION

The field of early childhood intervention is expanding rapidly. Several emerging trends favouring an expanding family-centred approach can now be identified, as well as a tendency towards integrated and coordinated service models.

In recent years, the role of early childhood services centering on the family has increased in significance. After the previous child-centred approach, features increasingly focus on families. The family and its closer and wider environment has moved into the centre of service provision, in parallel with the shift towards a strength-based (rather than a deficit-based) approach. (Turnbull, Turbiville & Turnbull, 2000; Bernheimer & Weisner, 2007; Coulthard, 2009). 'The overall aim of these services is to provide parents and families with the knowledge, skills and support to meet the needs of their child and to optimise the child's development and ability to participate in family and community life. All services are provided, using a family-centred approach, recognising the importance of working in partnership with the family' (Moore, 2016, 1). In order to identify a need and mobilise social support networks and community resources, it is important to gain a profound understanding of the impact of a family's cultural background, cultural beliefs and values on interactions between children, families and practitioners (Stayton & Bruder, 1999, cited in Coulthard, 2009).

The family-centred approach is closely aligned with the spread of the ecological family model, which interprets the functioning of the family in the context of their closer and wider environment, rather than in isolation (Bronfenbrenner, 1994; Guralnick, 2005). Instead of fragmented services, here the focus is on a holistic approach, with integrated services (Guralnick, 2008). The form of collaboration has shifted first from multidisciplinary to interdisciplinary teamwork, then from interdisciplinary to transdisciplinary teamwork (Carpenter, 2000; Rapport, McWilliam & Smith, 2004; Moore, 2004; Drennan, Wagner & Rosenbaum, 2005). Similarly to the interdisciplinary or transdisciplinary team, the 'key worker model' requires professionals from across diverse disciplines to work collaboratively, meet regularly and develop a co-ordinated and comprehensive service. This model supports families and caregivers in providing the environment and experience necessary to foster their child's optimal development. It simplifies the family's relationship with the team through a single key worker, ensuring that advice is well planned, considered and coordinated, and involves the family in all decisions (ECIA, 2014).

A universal approach is the best way forward for ensuring that all children and their families have access to the services they need for the best outcomes in education, care and health. In a universal approach, early intervention for children with a disability or developmental delay is available from birth in mainstream services through evidence based practices and education and with the support of child and family consultants, key workers or other early intervention professionals (Moore, 2011, 2012, 2016). National practices show that the coordinated, integrated web of supplied services based on interdisciplinary teamwork functions more efficiently. These systems typically materialize rather at a local level and as good practice than at a system level. Integrated early childhood intervention systems are inclusive, with careful monitoring for equity, and especially targeted at the most marginalised and disadvantaged as well as disabled

children. This type of system is also concerned with ensuring continuity between age levels and smooth transitions between age-linked services. Building capacity is a priority at every level. The training of sector specialists remains a priority, but with a shared vision of integrated early childhood development (Woodhead et al., 2014).

3. AN ASSESSMENT OF THE HUNGARIAN SITUATION

In Hungary, one of the most important parts of early childhood intervention is that of early development and care, which is provided by the education sector. Early development services are provided for individual early development from 0 to 6 years. Target groups addressed by the services are children at risk, children with developmental delay, and those who have a diagnosed disorder or condition, such as intellectual disability, physical disability, speech delay, behavioural disorder, hearing or visual impairment, multiple disabilities or autism. It is the task of the expert committees of education authorities to propose early development support services, which is a state responsibility and provided by educational institutions. If the education authorities are not able to organise the service delivery in their own physical location, service can be provided at the home of the child or at other institutions with which the education authorities have a contract (such as a nursery, children's home, care home, etc.). The tasks of early development and care are complex early childhood prevention, counselling and consultation, as well as developmental support. Typical intervention activities include complex special needs education, conductive education counselling, the development of motor, cognitive, social and communication capabilities, and psychological support. After the age of three, either individual early development may continue or developmental support is provided in the nursery, which may be a special or an inclusive nursery. Inclusive nurseries are for all kinds of children including those with special needs. Early development services, educational counselling and speech therapy services can be provided from birth by the education authorities. In the health care system, different therapies, habilitation or rehabilitation services can be provided for children with biological risk, developmental delay or diagnosed disabilities.

It is estimated that 5–10% of the cohort require some early intervention services under the age of six. However, according to the assessment, close to 40% of this group do not get the support they need (Kereki & Lannert, 2009). New research studying the functioning of the system of early childhood intervention in Hungary has revealed several shortcomings that limit the system's efficiency.

As previous studies have revealed (Kereki, 2013; Kereki, 2017), besides inconsistencies in the legal and financial framework, inefficiencies in the institutional system, non-traceable, unregulated consecutive phases of service delivery and a chronic lack of information are creating obstacles for children and their families. Collaboration between experts of different sectors is non-systemic and weak or non-existent. The various professionals do not know enough about each other's jobs and competencies. The long-standing lack of certain expert positions creates problems within the various areas of provision. The parents' knowledge and parenting skills in relation to their children's development are frequently inconsistent, so parental competencies and the sense of responsibility evolve only with difficulty. Moreover,

parents are not aware of the services available and where they could turn, if they have doubts or questions in connection with their children's development. Professionals in health, education and social services tend to know little about each other. The sectoral IT systems are not linked to each other and there is no interworking between them. Their clients' data cannot be combined or accessed by professionals in other fields. Geographical inequalities of access to early childhood intervention services also make it difficult for children and their families to be admitted into the care system and gain access to the services they need.

4. PERSPECTIVES, FUTURE POSSIBILITIES

A new programme supported by the European Union aims to solve most of the identified problems and improve the functioning of the early childhood intervention system. The EFOP 1.9.5 *Intersectoral Development of Early Childhood Intervention* project commenced on 1 February 2017 and will be continue to be implemented until 31 January 2021. The partners involved are typically different institutions of the concerned sectors (public education, health care, social care).

The main goal of the project is to improve the efficiency of services for pre-school children and their families. The programme focuses especially on helping families with children who need special care and early intervention. The overall aim of the project is to define a common, so-called Children's Pathway through the various sectors of care and service provision. By following the Children's Pathway, children and their families will be able to receive the most adequate support, from the recognition of potential problems and diagnosing them, to receiving the necessary therapeutic services.

According to the project plan, this Children's Pathway will be developed in coordination with the institutions of the different sectors based on the formal rules regulating the work of professional personnel in these institutions. The necessary protocols will be elaborated in detail and the supporting legal background will also be set. The main contribution of the project is to provide a detailed description of the possible means of help within the care system from conception, through the perinatal period and the development phase after birth to the time of entry into primary education. The programme covers all the players participating in the service provision in each particular phase, and any roles and connections between them defined by the current legal framework. It identifies critical but weak or non-existent connections and suggests changes in the legal framework in order to improve the performance of the early childhood intervention system by way of a definition of a more efficient and effective Children's Pathway.

Moreover, this European Union supported project focuses on improving the effectiveness of cooperation between experts working in early childhood intervention, such as special needs teachers, psychologists, nursery teachers, social workers, health visitors, paediatricians and general practitioners. The programme also aims to achieve a higher quality of service by developing the methodology, education and supporting information technology. It will help parents improve their abilities and support them in becoming more competent and aware in performing their parental role from the very first days of the child's life. A very important aspect of this development is to improve the provision of services for children and their families living in those

counties and municipalities where the availability and provision of services are less than adequate or even lacking. According to the current plans, the supply and provision of the services will be delivered to the target groups in the form of complex 'mobile' early intervention support services.

4.1. System-level developments

The project will assess the availability of services in all areas of the country and identify problems. This information will then underpin subsequent action. The legislation, the professional guidelines and the system of documentation will be reviewed and the legislation harmonized. The study and review of the competencies, tasks and cooperation between persons involved in early childhood intervention will help improve the functioning of the service system. Promoting cooperation and defining the various competencies and tasks for professionals involved in primary health care, specialist education, public education, social welfare, child protection, child welfare and early childhood intervention as well as for families with children under school age is an important principle.

The Children's Pathway, as a pathway of care, will be set up with the cooperation of professionals from different disciplines. The methodology of intersectoral, interdisciplinary and intra-institutional interdisciplinary team activities will be prescribed, and the definition of modes of sending referrals and signals will be defined. This is accompanied by the description of the data and access permissions needed by professionals from different fields, which form the basis of the interconnection of the professional IT systems. A single, integrated cross-sectoral IT system will be introduced to provide an interface to connect with the IT systems of the institutions. A more efficient flow of electronic information and thus the traceability of the children's cases in the system will be established. The interconnection and development of the existing national filing systems in the fields will greatly improve professionals' access to information.

Focusing on the development of complex service networking in service-deprived areas, a model for complex 'mobile' service delivery will be developed to facilitate local provision, in particular access to services for children below school age and their families in small settlements and disadvantaged micro-regions. In areas where there is a shortage of services, special services are needed, which would be provided by the development of an incentive system. The project will deliver a complex 'mobile' service to hundreds of municipalities through a pilot programme.

4.2. Methodological support for professionals

The project seeks to improve the knowledge of professionals working with children under school age and their families. Methodological manuals will help professionals gain knowledge. The recognition of divergent knowledge of child development, everyday educational issues and how to solve them all contribute to the broadening of expertise, primarily among professionals working in community settings. Furthermore, practitioners can use the methodological materials for early screening, identification

and diagnosis of developmental disorders, besides referring to a handbook on early family-oriented counselling and intervention.

Knowledge of the care system and of a unified Children's Pathway may serve to develop a common approach among professionals involved in early childhood intervention. Currently, efforts are being made to develop and test the necessary professional background, with guidelines and protocols for entry into the Children's Pathway (e.g. aftercare policy, school readiness protocol, exercise therapy protocol, screening protocol, etc.). A sensory integration testing procedure, a school readiness test and a child development questionnaire will be developed for playgroup educators (0–2 years old) and nursery teachers (3–6 years old). Quality care is based on the development of quality indicators for early childhood intervention.

Currently, some diagnostic tools are obsolete or do not have a Hungarian standard. As a result, the toolkit needs to be updated to ensure effective development, primarily the diagnostic toolkit for education services. The professional output of the project will be posted on the project website (gyermekut.hu) and will be made publicly available.

4.3. Broadening the competences of professionals

Most of the project's methodological improvements are channelled into advanced training materials and are delivered to practitioners in various fields in small groups or via distance learning. Free, accredited, certified in-service training is being organised for the 10,000 professionals involved in early care. The content relevant for all professionals appears in complex training sessions and is taught in small mixed groups by professionals from different disciplines. Within the complex groups, professionals will learn about typical developmental pathways and the temporal recognition of developmental differences in children from birth to school entry age, and the roles and competences of professionals working in other sectors, as well as learning about communication with professionals and parents.

Subject-specific training sessions will introduce practitioners to screening procedures that are currently being developed, including health awareness, early complex family-centred counselling and intervention. Group-specific training is aimed at preschool educators and early childhood educators in acquiring basic educational counselling skills and assisting professionals working in early childhood intervention. The aim of these training sessions is to promote integration, inclusive approaches and practices in institutions for young children. Similarly, specialist clinical psychologists in the education services will be trained in the field of therapeutic care based on parent-child relationship diagnostics, in line with the expansion of services.

Another important aspect is the appearance of early childhood intervention training in graduate training. To this end, regularly convened workshops of higher education institutions are designed to facilitate common training output, content and the channelling of project results into graduate training. Institutions of teacher training and humanities as well as social science training are involved in this process. Professionals also receive mental health support, take part in supervision and case discussion groups with members working in various fields of early childhood intervention and model the workings of mixed early childhood intervention case-discussion groups with parents and families.

4.4. Supporting parents, developing partnerships with families

The project gives importance to the education of parents of children under school age, to improve their knowledge of early childhood development and parenting, broaden their knowledge of the care system, and develop appropriate parental competences.

One of the cornerstones of early childhood intervention is early access to services. That is why it is important to become acquainted with the Children's Pathway and to increase knowledge of the care system. The brochures, designed both for professionals and for families, provide help in early recognition and information about the care system. Workshops, lectures and training sessions provide information on preparing for childbirth, the early childhood intervention system, child development, development services and problem recognition.

An interactive website helps parents, families and professionals find guidance on care paths, and helps families contact the right care provider corresponding to their needs as soon as possible. Through the appropriate transfer of knowledge, the project aims to increase parental awareness and competence in the development, care and upbringing of children, and to enhance the work of professionals. Through the project, parents are able to handle problem situations in a more informed manner. Parents can participate in case discussion groups, parent groups and parent clubs. Parenting groups provide support for parents of children with various delayed development issues.

4.5. Specific Children's Pathway pilot

International experience has shown that more functional early childhood intervention systems are characterized by the operation of coordinated, interdisciplinary, integrated services. There is an agreement that in terms of more integrated service delivery, moving from a multisectoral approach to an intersectoral approach will result in a more efficient and cost-effective care system. In the specific Children's Pathway pilot, a new model is being tested, building on the experiences of previous developments, and using their adaptable elements. An appropriate impact assessment must be conducted from the very beginning of the project. Based on the evaluation of the project, including the necessary corrections, the final institutional model will be developed and implemented after the approval of the decision-makers.

SUMMARY

It is necessary to identify the most important problems in order to make good policy decisions. Among these, it is worth emphasizing the following: sectoral fragmentation makes regulation difficult to interpret, the laws of the different sectors are disconnected from each other, and a regulated path from primary health care to the public education system is missing. Moreover, the various professionals have a very heterogeneous knowledge of child development and different care options, and they do not have enough information of the knowledge and competencies of professionals working in other sectors.

In choosing the key areas and setting the proper aims for the development of the system, it is important to understand international trends and identify adaptable elements of successful practices. Those systems that function well are based on a family-centred approach, in which an interdisciplinary team is built around the children and their families, involving the collaboration of experts and members of the family with a key worker who follows the Children's Pathway in the system. It is also important to establish natural learning environments that enable specialists' skills to be applied through everyday family routines.

For the programme to be a success, it is also important to take into account the results of different research studies and earlier developmental programmes. The *Intersectoral Development of Early Childhood Intervention* project initiates the development of an evidence-based service. The project is expected to lead to a more efficient care system, with a transparent, traceable Children's Pathway and an increased number of better quality and accessible services for all. At the same time, geographical areas with a lack of services will be provided with care, and regional inequalities in provision will be reduced. As a result of the training sessions, the competence of the professionals concerned will increase, their unified knowledge will be developed, and they will become familiar with the professional expectations and service paths related to the common Children's Pathway. Families will be better informed, more satisfied, and increasingly competent in recognizing and supporting their children's strengths and abilities. They will be able to navigate better in the care system, experiencing a decrease in stress and isolation and an increase in their family's quality of life.

References

- Bernheimer, L. C. & Weisner, T. S. (2007). 'Let me just tell you what I do all day...': The family story at the center of intervention research and practice. *Infants and Young Children*, 20(3), 192–201. <https://doi.org/10.1097/01.IYC.0000277751.62819.9b>
- Bronfenbrenner, U. (1994). Ecological models of human development. *Readings on the development of children*, 2(1), 7–43.
- Carpenter, B. (2000). Sustaining the family: Meeting the needs of families of children with disabilities. *British Journal of Special Education*, 27(3), 135–144. <https://doi.org/10.1111/1467-8527.00176>
- Coulthard, N. (2009). *Service Trends and Practitioner Competencies in Early Childhood Intervention: A review of the literature*. Melbourne: Victorian Chapter of Early Childhood Intervention Australia (ECIA). <http://www.eciavic.org.au/documents/item/26> [Accessed: 15. 10. 2019.]
- Drennan, A., Wagner, T. & Rosenbaum, P. (2005). *The 'Key Worker' Model of Service Delivery: Keeping Current Services*. Hamilton, Ontario: Child Centre for Childhood Disability Research, McMaster University.
- ECIA (2014). *Early Childhood Intervention Best Practice discussion paper*. ECIA. <https://www.eciavic.org.au/documents/item/859> [Accessed: 10. 10. 2019.]
- European Agency for Development in Special Needs Education (2005): *Early Childhood Intervention Analysis of Situations in Europe Key Aspects and Recommendations*. Odense: European Agency for Development in Special Needs Education.
- European Agency for Development in Special Needs Education (2010). *Early childhood intervention. Progress and Developments 2005–2010*. Odense: European Agency for Development in Special Needs Education.
- Guralnick, M. J. (2005). An Overview of the Developmental Systems Model for Early Intervention. In Guralnick, M. J. (ed.), *The Developmental Systems Approach to Early Intervention* (pp. 3–28). Baltimore, Maryland: Paul H. Brookes.
- Guralnick, M. J. (2008). International perspectives on early intervention: A search for common ground. *Journal of Early Intervention*, 30(1), 90–101. <https://doi.org/10.1177/1053815107313483>
- Kerek, J. (2013). A kora gyermekkori intervenció rendszer működésének legfontosabb problématerületei és fejlesztési lehetőségei. *Gyógynevelési Szemle*, 41(1), 23–38.

- Kereki, J. (2015a). A koragyermekkori intervenció rendszere – utak és kapcsolódások. *Gyermeknevelés*. „Korai intervenció” különszám, 55–76. http://gyermekneveles.tok.elte.hu/6_szam/pub/kereki.html [Accessed: 01. 10. 2019.] <https://doi.org/10.31074/gyntf.2015.2.55.76>
- Kereki, J. (ed., 2015b). *Kliensút Kalauz*. Budapest: Educatio Társadalmi Szolgáltató Nonprofit Kft.
- Kereki, J. (2017). *Utak: A korai gyermekkori intervenció rendszerszintű megközelítése*. Budapest: ELTE Eötvös Kiadó – ELTE Bárczi Gusztáv Gyógypedagógiai Kar.
- Kereki, J. & Lannert, J. (eds, 2009). *A korai intervenció intézményrendszer hazai működése. Kutatási zárójelentés*. Budapest: TÁRKI-TUDOK ZRT. – Fogyatékos Személyek Esélyegyenlőségéért Közalapítvány. <http://fszk.hu/kiadvany/a-korai-intervencios-intezmeny-rendszer-hazai-mokodese/> [Accessed: 08. 10. 2020.]
- Kereki, J. & Szvatkó, A. (2015). *A koragyermekkori intervenció, valamint a gyógypedagógiai tanácsadás, korai fejlesztés, oktatás és gondozás szakszolgálati protokollja*. Budapest: Educatio Társadalmi Szolgáltató Nonprofit Kft.
- Moore, T. G. (2004). *Blazing new trails: Finding the most direct routes in early childhood intervention*. In Proceedings of the Sixth Biennial National Conference of Early Childhood Intervention. Melbourne. https://www.researchgate.net/publication/228874603_Blazing_new_trails_Finding_the_most_direct_routes_in_early_childhood_intervention [Accessed: 08. 10. 2020.]
- Moore, T. G. (2011). *Early childhood intervention reform project. Executive summary. Revised literature review December 2010*. Melbourne: Programs and Partnerships Division Department of Education and Early Childhood Development.
- Moore, T. G. (2012). *Rethinking early childhood intervention services: Implications for policy and practice*. Pauline McGregor Memorial Address presented at the 10th Biennial National Conference of Early Childhood Intervention Australia, and the 1st Asia-Pacific Early Childhood Intervention Conference, Perth, Western Australia, 9th August. http://www.rch.org.au/uploadedFiles/Main/Content/ccch/profdev/ECIA_National_Conference_2012.pdf [Accessed: 08. 10. 2020.]
- Moore, T. G. (2016). *DEECD Early Childhood Intervention Reform Project: Revised Literature Review*. Melbourne: Centre for Community Child Health, Murdoch Childrens Research Institute, The Royal Children's Hospital. https://www.researchgate.net/publication/290438286_DEECD_Early_Childhood_Intervention_Reform_Project_Revised_Literature_Review [Accessed: 08. 10. 2020.]
- Rapport, M. J., McWilliam, R. A. & Smith, B. J. (2004). Practices Across Disciplines in Early Intervention. The Research Base. *Infants and Young Children*, 17(1), 32–44. <https://doi.org/10.1097/00001163-200401000-00006>
- Stayton, V. & Bruder, M. B. (1999). Early intervention personnel preparation for the new millennium: Early childhood special education. *Infants and Young Children*, 16(4), 284–295. <https://doi.org/10.1097/00001163-199907000-00009>
- Turnbull, A. P., Turbiville, V. & Turnbull, H. R. (2000). Evolution of family-professional partnerships: Collective empowerment as the model for the early twenty-first century. In Shonkoff, J. P. & Meisels, S. J. (eds), *Handbook of Early Childhood Intervention* (pp. 630–650). Cambridge, Massachusetts: Cambridge University Press. feltüntetni: <https://doi.org/10.1017/CBO9780511529320.029>
- Woodhead, M., Feathersone, I., Bolton, L. & Robertson, P. (2014). *Early Childhood Development: Delivering Intersectoral Policies, Programmes and Services in Lowresource Settings. Topic guide, November (2014)*. Oxford: Health & Education Advice & Resource Team (HEART). <http://oro.open.ac.uk/41552/1/Woodhead%20et%20al%202014%20Early-Childhood-Development-Topic-Guide.pdf> [Accessed: 08. 10. 2020.]

Legal regulation

Hungarian Government Resolution 1246/2015. (IV. 23.) on Measures Necessary for Successful Intervention in ECEC.