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Integrated
Early Childhood Education and Care

Results of a
European Survey and Literature Review

2016

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Table of Contents

'States parties are urged to develop rights-based, coordinated, multisectoral strategies in order to ensure that children's best interests are always the starting point for service planning and provision.' (Committee on the rights of the child, General comment nr. 7: 'implementing child rights in early childhood, par. 22. CRC/C/GC/7Rev.1)

1. Introduction

INTESYS is a three year (November 2015 – October 2018) Forward Looking Cooperation Project co-funded by the European Commission's Erasmus+ Programme undertaken by a consortium of partners.[1] The project focuses on piloting new approaches to Early Childhood Education and Care (ECEC) systems in Europe, by which we mean and refer to all possible kinds of services that support families with young children (childcare and pre-primary education, parental support, out-of-school care, health, culture, etc.). The aim is to ensure that children and families in vulnerable situations have access to high-quality ECEC provided by services that are better integrated across the different sectors (education, health, welfare, etc.), different professions and across age groups and governance levels. High quality integrated ECEC services are an important factor for improving young children's overall development and well-being, especially for the most disadvantaged groups for whom they can make a tremendous difference in reducing the disparities before the start of compulsory education. Currently, inequality in the ECEC systems in Europe has a strong impact on the most vulnerable groups: migrant children, Roma children, children with special needs and/or living in poverty. Inspired by the Transatlantic Forum on Inclusive Early Years (TFIEY), the INTESYS project seeks to deepen the knowledge about and understanding of practices that support integrated working (contexts, conditions, dynamics, added-value, critical success factors, etc.). Integrated working was the topic of the Forum's meeting in Dublin (January 2015) and more detailed information can be found on the project webpage.

This report was written for Work Package 2 undertaken during the first year of the project in order to map the state of integration of ECEC provision in EU Member States, with a special focus on vulnerable groups regarding workforce policies and practices, stakeholders, governance and also key success factors, gaps (policies, practices etc.), obstacles and inspiring good practices Three activities were undertaken:
  - survey in each of the four pilot countries (Belgium, Italy, Portugal and Slovenia);
  - European survey focusing on promising and inspiring practices;
  - literature review.
This report presents the results of the European survey and literature review.

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[1] The partners are: King Baudouin Foundation (BE), Universal Education Foundation (NL), ISSA – International Step by Step Association (NL), Innovations in the Early Years - VBJK (BE), Compagnia San Paolo (IT), Emanuela Zancan Foundation (IT), Calouste Gulbenkian Foundation (PT), Aga Khan Foundation (PT), Pedagoski Institut – Step by Step Center for Quality Education (SI).

1.1. Methodology

The survey on promising and inspiring practices was undertaken to obtain a perspective on how integrated working is taking shape in selected European countries focusing on critical success factors and potential difficulties. The underlying question is somewhat paradoxical: if integrated work and close cooperation are so evidently positive, how did we end up with such segregated services in the first place?

For this purpose we questioned experts, working in practice and research, or involved in ECEC policy-making and evaluation. Some of them had already been involved as researchers and experts in the TFIEY meetings. A questionnaire with open questions sought their views on integrated approaches to ECEC services and provision, based on their knowledge and experience. (For more information see Annex 1) This survey, conducted for the project, was not intended to be exhaustive but illustrative. Examples were provided by the respondents that they considered could inform other local and national situations relevant. They also provided their perspectives on integrated approaches to ECEC based on research undertaken and involvement in the evaluation of policy and practice. This rich source of data enables the project partners to draw lessons about characteristics of successful integrated working. Complementary to the survey, a literature review was undertaken to provide a well-rounded picture of the state-of-play concerning the current approaches to and levels of integration (or lack of it) in different European countries. Drawing on previous and other on-going work by the project partners, it focuses on governance, systems, workforce, transitions and what is meant by addressing the needs of the 'whole child'.

1.2. Structure of the report

Section 2 of this report includes a brief presentation of the context in which the project is undertaken and issues underpinning the trend towards more integrated working in ECEC services and provision.
Section 3 focuses on the lessons learned from the European survey about what works and the contributions of research focusing on vision, goals and key criteria for integrated working, management and team professionalism, family participation and child-centred approaches, and policy issues and challenges. The final section highlights key points emerging. The questionnaires used for the European survey are in Annexes 1 and 2. A list of references is provided at the end of the report.

2. Context and trends

2.1. Brief presentation of the European context

Contemporary Europe is faced by complex issues – such as poverty, social exclusion, 'superdiversity' - for which there is a growing awareness of the need for multi-sector, multi-agency approaches. It is also recognised that remedies addressing the symptoms rather than the root causes are no longer sufficient. Thus the 2013 Communication from the European Commission, Investing in Children: breaking the cycle of disadvantage, was a joint communication of several Directorates-General responsible for issues facing children and childhood. It focuses on the need to strengthen synergies across sectors and develop integrated strategies. The Recommendation which followed called for a children's rights approach and integrated strategies based on three pillars:

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- access to adequate resources – which includes supporting parents/carers' participation in the labour market and providing for adequate living standards through a combination of benefits;
- access to affordable quality services - which includes investing in early childhood education and care; and the education system; improving the responsiveness of health systems to address the needs of disadvantaged children; providing children with a safe, adequate housing and living environment; enhancing family support and the quality of alternative care settings;
- children's right to participate – which includes the participation of all children in play, recreation, sport and cultural activities and in decision-making that affect their lives. (EU Alliance for Investing in Children 2014)

Poverty has increased significantly in many European countries, with families with younger children facing a higher risk of poverty than any other group. Children particularly exposed to the risk of poverty include those from low-income families; households with a migrant background; Roma children; street children and those who are exposed to a series of social risks such as homelessness, violence and trafficking. (Bennett, 2012). In their briefing paper drafted for the first meeting of the TFIEY (Ghent, January 2013), Vandenbroeck and Lazzari draw attention to the growing concern about accessibility of ECEC for children from ethnic minority and low-income families citing international policy documents (e.g. European Commission, 2011; European Parliament, 2002) and international reports (e.g. OECD, 2006, 2012; UNICEF Innocenti Research Centre, 2008). They note that at the European level, this concern is rooted in a broader commitment toward the reduction of child poverty rates across the Member States and accompanied by the recognition that high quality ECEC has an important role to play in tackling disadvantage from an early stage (European Commission, 2006; Education, Audiovisual and Culture Executive Agency, 2009).

Despite this consensus at the policy level, it is well documented that children from ethnic minority and low-income families are less often enrolled early years provision and preschools and that – when enrolled – these children are more often to be found in provisions of poorer quality than their more affluent peers. (Vandenbroeck & Lazzari, 2013). The main barriers to participation in ECEC are summarised in Lazzari & Vandenbroeck (2012) as follows:
- Low socio-economic status including a low level of parental education, low family income or parental unemployment;
- Living in poor neighbourhoods/rural areas/marginalised settlements (OSCE, 2010);
- Ethnic minority background influenced by the length of time parents have been residing in the host country and their ability to master the host country language

On the supply side, factors hindering participation in ECEC and use of other services for families may include factors such as whether families understand what the services can offer and provide and whether they feel they will be beneficial for their children and helpful for them.
For the Directorate General for Education and Culture (DG EAC), while recognising that ECEC systems vary considerably across the member states, it considers that ECEC *'can lay the foundations for later success in life in terms of education, well-being, employability, and social integration, especially for children from disadvantaged backgrounds*'.

Looking specifically at publicly supported child care and early education, compared to other regions in the world, European enrolment figures are relatively high and have increased since the beginning of this century (Bennett 2012). Informed by research that identifies numerous benefits for children of attending ECEC, there is now an overwhelming consensus in Europe that ECEC should be available and affordable for all children. This has been largely achieved for children in the year (or even two)

before primary education. Thus in the EU-28, on average, 93 % of children between the age of 4 and the starting age of compulsory primary education are enrolled in preschool or nursery provision. The situation is very different for younger children because only 30 % of under-3s are in ECEC (Eurydice, 2014). The target is that by 2020 at least 95% of children of 4 years or older should participate in early childhood education and countries' improvements are monitored on a yearly basis (http://ec.europa.eu/education/policy/school/early-childhood_en).

Policies, strategic targets and attitudes have evolved considerably over the last 20 years.

> *'ECEC has gained, since the Council Recommendations on Childcare in 1992 (92/241/EEC), an increasingly prominent position on European policy agendas. Initially, the main rationale for investing in ECEC was driven by socio-economic concerns about employment, competitiveness and gender equality. Most EU level action was focused on increasing the quantity of childcare places in order to enable parents (mainly mothers) to join the labour market. In more recent times, EU policies have been accompanied by a growing attention to children's rights, equal educational opportunities and social inclusion (Commission of the European Communities, 2006a & 2006b; Council of the European Union, 2010). By acknowledging the social and educational value of ECEC, recent EU policies have moved beyond the issue of quantitative expansion of provision to encompass at their core the issue of the quality of ECEC services as a necessary condition for the promotion of children's learning, personal fulfilment and social development (European Commission, 2011).*' (Lazzari & Vandenbroeck, 2012)

2.2.   Trends - why focus on integrated approaches?

2.2.1.   Evidence from the survey responses

There is growing evidence about the importance of early years in an individual's life and of the benefits that high quality and equitable early childhood and family support services bring to children and families, especially to those in the most vulnerable situations. The complexity of the challenges that societies are facing today have a dramatic impact on families and consequently on young children: increasing poverty, weakening welfare systems, increasing inequalities, job insecurity, increased mobility and migration, and rapid change in economic and political landscapes. In addition, ECEC systems are subject to policy and structural changes which move between universal and targeted interventions, public and private provision, generalised and compulsory services, sectoral and integrated approaches. Seen from the perspective of the child and the family, the encounter between these challenges and changes often translate into missed or missing opportunities to fully benefit from quality services, in particular if children live in poverty, have a migrant background, belong to minority groups, or have special needs. Multifaceted problems require multiple, as well as aligned and well-coordinated, support and interventions. Poverty, discrimination and increasing inequalities need to be addressed in an integrated manner in order to bring about qualitative and quantitative change.

Early childhood is a period of enormous opportunities for children to develop and learn, to express and fulfil their unique potential, to build solid foundations for their well-being and life achievements. Therefore, the way ECEC *systems* are designed, governed and financed, and the way ECEC *services* are delivered can make a dramatic difference in the life and overall well-being. of children as well as of their families.

Integration is a global trend in the EU and beyond, addressing a common problem, albeit

- In diverse ways (cooperating in a network vs. integration under one management vs. integration under one roof, area based vs. population-based vs. universal, integration vs. alignment and transitions, case-management vs. management of integration, top-down vs. bottom-up etc.);
- For different reasons (reduce governance complexity, increase economic efficiency, improve programme quality);
- Based in different contexts (progressive universalism vs. targeted approaches);
- Raising different questions and issues (leadership vs. identity, alignment of cultures and professional status, efficiency vs. privacy, participation of families and communities…).

Integrated working ranks highly on the EU agenda as well:

> *'A systemic approach to the ECEC services means strong collaboration between the different policy sectors, such as education, employment, health, social policy. Such approaches allow governments to organise and manage policies more simply and efficiently, and to combine resources for children and their families. This requires:*
> - *A coherent vision that is shared by all stakeholders, including parents,*
> - *A common policy framework with consistent goals across the system,*
> - *Clearly defined roles and responsibilities at central and local levels.'[2]*

The different contexts lead to different forms of integration of services:

> *'Integration can be vertical, implying more systematic, closer cooperation between several levels of government, or horizontal, linking services provided by separate entities. Integration across agencies can happen to different degrees: co-location (having all related agencies in one location); collaboration through information-sharing, training and the creation of joint networks; and cooperation through working together on issues of common concern. There is a distinction between the integration of existing services and the establishment of integrated services from scratch…'[3]*

Integrated working is difficult to grasp in one single definition, but it includes:
- Professional cooperation within some kind of network or partnership
- Providing different types of supportive services for families
- Participation of parents/carers as first educator and their children
- Guaranteed access for all

It can have different types of advantages. For children and families less fragmentation of services can be beneficial and make access to services easier. For organisations, existing expertise can be shared and further developed. On the policy level, is can lead to less complexity of governance and to more economic efficiency. However, reality and practice show a very diverse picture of integrated work, supporting policies, target groups, the different partners, funding systems and so forth. Different models exist throughout Europe and there is not one single recipe for high quality integration or cooperation, since several different factors influence the design, the effectiveness and the quality. Some approaches have developed bottom-up; some were introduced top-down. Some build on stronger links between two or more sectors; some include the whole range of early years and family support services (e.g. education, employment, health…). In the following sections this report

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[2]http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52011DC0066&from=CS
[3]See Nora Milotay in
http://www.europarl.europa.eu/RegData/etudes/BRIE/2016/583809/EPRS_BRI(2016)583809_EN.pdf

highlights major contributing factors and issues raised by the experts who responded to the survey and corresponding research.

2.2.2. What does research tell us?[4]

The INTESYS project is focusing on children and families living in vulnerable situations often affected by poverty due to low incomes, migration, refugee status, etc. Poverty is a complex and multi-faceted problem. Therefore one of the main challenges in combating it is the fragmentation of services (Allen, 2003, Provan & Sebastian, 1998). Fragmentation of services affects all families.

Several dimensions can be noted:
- Sectorial segregation: services often specialise in one single area (education, parent support, child care, financial problems, housing, etc.). Yet families do not necessarily perceive these areas as separate 'needs'. Especially in the case of families living in poverty, needs related to health, housing, employment etc. are interlinked and hard to separate from educational challenges (Broadhead, Meleady, & Delgado, 2008; Lister, 2004).
- Age segregation: in some cases, services for 0 to 3 are distinct from services for the preschool and school age-groups; and services that benefit children may be separate from services that benefit parents/carers.
- Subgroup or target group segregation: some services address specific subgroups, such as single mothers, migrants, families in poverty, families with a child with special needs, (Mkandawire, 2005).
- Policy segregation: services can be governed at local, regional and state levels, making cooperation between services that are governed at different levels a real challenge (Statham, 2011).
- Organisational segregation: in some regions services are separated into government-led provision, NGOs or faith-based organisations and voluntary or community-led services and integration may mean collaboration between private and public partners (OECD, 2001).

Despite the observed general tendency to integrate services, the rationales for this evolution may significantly differ from one country to another, leading inevitably to different understandings of what integration means, as well as the different forms it may take. We outline below briefly some of the main rationales, yet it needs to be clear that integration of services does not necessarily means that all these goals are met in daily practice.

The socio-political drivers or rationales towards integrated working assume increased usefulness, increased efficiency and effectiveness (including cost effectiveness), and include:
- A reduction of complexity of governance and/or improvement of governance by increased coordination of action (Hood, 2012; OECD, 2001).
- Economic efficiency by saving overhead costs (Tsui & Cheung in: Roets, Roose, Schiettecat, & Vandenbroeck, forthcoming). It is assumed that integration at least does not generate additional costs (OECD, 2001).
- Improving the effectiveness of the programmes they implement by stimulating the use of measures that correspond to shared priorities; helping to adapt programmes to local needs and conditions; taking advantage of the knowledge of the various partners about local

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[4] This section draws on reports and literature reviews carried out by PPMI & VBJK : Dumcius, R., Peeters, J., Hayes, N., Van Landeghem, G., Siarova, H., Peciukonyté, L., Ceneric, I., Hulpia, H. (2014) Study on the effective use of early childhood education and care (ECEC) in preventing early school leaving (ESL). Report for the European Commission DG Education and Culture. Brussels.

problems and target groups; identifying and drawing on synergies between government programmes and initiatives that can enhance their mutual impact (OECD, 2001).
- Contributing to service quality e.g. taking advantage of the knowledge of different partners and sharing expertise (OECD, 2001; Oliver, Mooney, & Statham, 2010; Rochford, Doherty & Owens, 2014).

With regard to the improvement of public services, several other drivers can be distinguished in order to better care for families, such as:
- Improving communication and coordination in order to provide a seamless or continued provision of services (Allen, 2003; Anthony, King, & Austin, 2011; Moore & Fry, 2011; Messenger, 2012; Raeymaekers & Dierckx, 2012; Statham, 2011) aiming at 'closing the gap' and avoiding 'overlaps' (Dep. Of Education, 2013a; Kalland, 2012; McKeown, Haase & Pratschke, 2014; Rolfgaard, 2012, Moore & Fry, 2011) in order to better serve local needs, with a focus on children 'at risk'.
- Responding effectively to complex needs of families, communities and the social problems confronting societies, considering that problems are now more complex and therefore need joined-up approaches (Moore & Fry, 2011).
- Increasing accessibility for clients, especially for 'hard to reach' families (Raeymaekers & Dierckx, 2012). Accessibility also includes families' understanding about what is available and whether they consider it useful from their standpoint (see background paper of the first meeting of the Transatlantic Forum).
- Strengthening communities and building stronger partnerships at the local level (Moore & Fry, 2011); improving social inclusion and social capital for families (Martin, 2010; Gilchrist in: Broadhead, Meleady & Delgado, 2008)
- Helping to support key life transitions, e.g. the transition from an early years' service to primary school (Rochford, Doherty & Owens, 2014)

From a governance point of view it is important to make a distinction between a policy that drives the integration of existing services (often with progressive universalism as a guiding principle) such as in Belgium, The Netherlands, Scandinavia, France, certain German *Länder* etc. on the one hand; and a policy driving the creation of new integrated centres (such as Sure Start in England) on the other hand.

The movement towards integration and networking is conceptualised by different terms that are used interchangeably but can refer to different kinds of organisational configurations and methods of working more closely together with different professionals. Frost (2005) makes a useful distinction that successful integration depends upon building partnerships which can be divided into four dimensions, starting with the least joined-up:
- **Cooperation**: services work together toward consistent goals and complementary services, while maintaining their independence.
- **Collaboration**: services plan together and address issues of overlap, duplication and gaps in service provision towards common outcomes.
- **Coordination**: services work together in a planned and systematic manner towards shared and agreed goals.
- **Integration**: different services become one organisation in order to enhance service delivery

The integration of (social) services is not only promoted on different levels, but also involves partnerships between the public, private and civil sector (OECD, 2001).
Integrated services can be organised in a universal way, in order to support all families with children (e.g. Scandinavian countries), or in a selective/targeted way, in order to give priority to families in

vulnerable situations or at-risk (e.g. Sure Start) (Doherty, 2007). In reaction to this old debate about the way in which public services have to be organised, the principle of 'progressive universalism' is now promoted throughout Europe, *as a combination of universal services with targeted attention for certain groups* in order to achieve high quality in provisions for all families with children, including poor and migrant families (Warren-Adamson, 2001; OECD, 2006). An explicit example of the choice of progressive universalism is the recent legislation on the '*Huizen van het Kind*'[5]in Flanders: "*a universal service in which a broad basis of services is offered to every child and every family. In addition there is an integrated supplemental offer of services, adapted to the needs of specific families and with particular attention towards the support of vulnerable groups in society*" (see Flemish Parliament, 2131/5(2012-2013, art.6, own translation).

3. Lessons learned about what works

The table below summarises the critical success factors drawn from the TFIEY meetings and the responses of the experts to the survey undertaken for this project and research.

Table 1: Critical success factors for integration

Vision and goals of integrated working	- Collaboration between partners from different sectors (e.g. welfare, health and education); multidisciplinary/interdisciplinary - Equality among partners - A shared vision and mission, knowing why you join forces and for whose benefit (requires time and a willingness to give up some of your own views, working methods...) - Strong and explicit commitment to shared values (e.g. mutual respect, inclusion, co-construction, embracing diversity) - Real and continuous commitment from every partner with clear communication and ongoing dialogue - Clear planning and appointment of responsibilities - Clear rules (e.g. on data sharing) and transparent monitoring - Work from the perspective of children and families rather than from the organisation's perspective - Use what is already there
Management and team professionalism	- Powerful leadership (motivate, keep an eye on the goals, supporting...) - (Pedagogical) support for the teams and communication, self-reflection tools, regular team meetings, coaching...to move towards reflective practitioners - A certain level of qualification in the team (initial training and continued professional development) - Open mindedness, non-judgemental attitudes, being open to step away from traditional approaches (which have not worked for all families) - A clear and shared view on quality delivery (input of families is vital here) - Outreach work, reviewing existing thresholds and finding ways to avoid them - Clear decision-making processes, clear roles and responsibilities.

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[5] Literally translated, these are 'houses of the child', but in this project they will be referred to as 'Family Centres'.

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	- Collaborative mind-set of all staff - Secure working conditions (wages, in-service training, coaching, child/adult ratio...) - Close monitoring of actions and outcomes - Useful competences: innovative thinking, customer orientation, understanding of working with social and cultural diversity
Family participation	- Families participate in programming and planning (ideally from beginning) - Respond to the real needs of families (rather than those of providers) - Being accessible from the family's perspective - Openness to accept the knowledge of parents/carers in addition professionals' knowledge (co-constructing)
Policy and funding	- Political will and commitment - with government support (legislation, policies, funding) - Preferably with one minister or department responsible for coordinating - Locally embedded& public funding - Combination of top-down support and bottom-up initiative and cooperation - Aim for structural, systemic change (going beyond the individual solutions services can render to families) - Both qualitative and quantitative data needed for monitoring - Embedded in wider social and rights-based policies (housing, social security, employment...)

3.1. Vision, goals and key criteria for integrated working

'Integrated work is of value when agencies are more able to deliver outcomes, agreed with the users of services, more effectively and efficiently than they would on their own or when the outcome could not have been achieved by a single agency' (Daniela Kobelt-Neuhaus, Germany)

3.1.1. Shared vision

The recurring view on integrated working in responses to the survey was the strong conviction that supporting children's overall development is best served by working at all the different levels and with the different sectors and fields. Prevention, intervention and empowerment were all mentioned as areas to work on because as our societies are becoming more diverse, so are the needs of all families. Practitioners face increasing challenges in searching for answers to those needs. Reliable and sustainable partnerships are needed to develop the competences to deal with those challenges and to be able to offer the support needed and desired to families and children.

One of the overall imperatives for strong integrated work seems to be the development of a shared vision. Countries with well-developed integrated services experienced that this is a step by step process that takes time (e.g. the Finnish reform towards integrated family centres).This process faces a variety of challenges need to be overcome, e.g. sector-based service cultures, differences in

professional disciplines and discourses, different views on parents/carers and children, as well as more practical issues such as sector-based funding and scattered political responsibilities. Investing in continuous dialogue on many different levels is a basic requirement in this process. This needs to be facilitated in different ways: dialogical places and spaces for professionals on concepts of support and care and agreed practices; continuous professional development among professionals, networks and learning communities; dialogue with families and so forth.

3.1.2. Service development and delivery

For all families, but especially the more vulnerable ones and those who have had bad experiences with so-called 'help', some characteristics for integrated work need to be taken into account. Overall integrated services should be accessible for all, affordable, useful, available and comprehensive. Provisions should be free-of-charge and offered in a 'neutral' setting, meaning that it should be welcoming to all, not only to specific 'target' groups. This does not mean that there is no outreach work done for the so-called hard-to-reach families. But even more so, services should be co-constructed with the families, which in turn requires a flexible, multi-model and ongoing strategy, near to where families live, work or meet.

Many services are mentioned in the responses, but some are mentioned more often as a necessary minimum provision in integrated working for families and children: early education and care, parental support, (preventive) health and social work. Again, this is not always the case everywhere; integration can also be developed between childcare and preschool (in split systems) or between schools and the library, etc.

What is important, though, is that the network should contain sufficient mainstream, low threshold and universal services (like a preschool or advice services) and that there should be generalist functions besides the more specialist ones.
Some respondents also mention that, to be welcoming enough, there should be an offer of very low threshold services, such as meeting places, open preschools, etc. where families can meet each other. Some add even more (possible) partners such as migration and asylum services, community services, libraries, and vocational training institutes.
To be successful, integrated working needs to be deeply rooted in the community, knowing what happens there, being responsive to those communities as well as very flexible, as the community is constantly changing.

It is also vital that services are already being offered during pregnancy so future parents/carers understand what services are available for them from the start. In doing so, a welcoming and truly supportive approach is required to avoid possible stigma (e.g. the REAAP in France).

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through integrated early
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The **Réseaux d'Ecoute, D'Appui et d'Accompagnement des Parents (REAAP), France**

In France parents are considered as having the primary responsibility for raising their children. In an effort to create a coherent system of family support, the REAAP was developed for listening to, giving support to and providing guidance for parents. Within a philosophy of community associations, parents come first and all possible professional partners, who are working for or with families, combine their strength to support them. The main principles here are 'good treatment' and 'co-education', starting from the belief that parents are indeed quite capable and competent to raise their children and do what is best for them (as opposed to the more problem-focused approach in many countries: if you set up preventive services, it is partly because you assume things can or will go wrong). In the REAAP, parents and professionals enter into a dialogue to learn from and with each other.

While it is basically up to the parents and local partners to design supportive educational projects together, aligned with the local reality, there is a main framework, the 'charter' of the REAPPs in which the main principles are stated. They include valuing parents as first educators, respecting diversity, being accessible to all, connecting parents and investing in partnership on the local level.

One of the main issues is the question of whether an integrated service should actually be the combination of different offers under the same roof, in the same physical place. Although legislation does not always require that, several experts pointed out how important this is in terms of accessibility and clarity for the users. Users know where to find what they are looking for, and it is also more stimulating in terms of creating a place where families can meet each other, not just the services offered. Working in the same physical space can also stimulate formal and informal contacts, feedback and concertation among professionals. It makes it easier for them to get to know each other's work, professional cultures and methods, which can increase the mutual trust. Others point out that it is not always necessary to work in the same space. (One could imagine that such services could possibly grow into rather big conglomerates of services, which in turn could become a new threshold.)

3.1.3. The time factor

Making a shift towards more cooperation, developing a common vision and rethinking one's practice, takes time. Depending on the context, existing traditions and culture in organisations and sectors developing integrated working will either go smoothly or be more difficult. The trust required and

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the commitment to the concept needs sufficient time to grow, develop and deepen. It is important to allow for these processes to develop at the pace of the partners concerned. In the Flemish experience, with the multitude of possible ways of creating a family centre, it has become clear how much time it takes to bring partners together, to find committed initiators, to combine public and private partners, and to develop a shared vision. Also on the parent's side, it will take a while for them to understand how and why some services are changing and connecting to others.

3.1.4. Communication

Clear strategies for communication, information and deontological codes need to be in place concerning how information about families is used and shared. What information is gathered, by whom and why? What are the communication lines between colleagues? Who has access to that information? What are the rules on disclosure of sensitive information? How are people informed about these rules? Can they object?
For vulnerable families, barriers to access are often linked to the lack of information. They are often not familiar with precisely what services are offering and can worry about possible effects of stigmatisation. Or they do not always understand how services can benefit their family. Having a more integrated offer can add to the confusion if the communication and information are not clear enough about services, how to use them and the connections that exist (or not) between them. Families may be hesitant to use one universal, basic service because of fear of being 'sucked into' the whole system. People need to know clearly what is offered, what the conditions and possible consequences are.

3.1.5. What does research tell us?

What vision for childhood?

The economic crisis has raised many questions about what sort of society we want to live in including how to balance the main approach to measuring progress in society through Gross Domestic Product (GDP) with new and more complex measures that take account of more aspects of the individual's and societal well-being. Over the last decade, there has been increasing discussion about this because the methods used for the last 50 years are less and less satisfactory for understanding what makes people happy, satisfied with their lives and more importantly what they need in order to flourish in inclusive and sustainable societies. OECD's Better Life Index includes 11 topics including education and health but the indicators taken into account (e.g. for education: years in education, educational attainment and students' skills) do not give us information that constitutes a holistic approach or a 'whole child' perspective. Likewise for health, the indicators are limited to life expectancy and self-reported health. In general, indicators for evaluating education systems measure achievement, mainly in academic terms, but not the holistic development and flourishing of children. Desjardins argues that one of the effects of neo-liberalist policies on schools has been on what they should be prioritising given the perceived impact of education on economic outcomes and also what education systems are expected to achieve, including which learning outcomes. This is increasingly seen to be in competition with the socialisation function of education and its role in identity and value formation (Desjardins, 2015) as opposed to a more rounded view:

> 'Early and primary education … are the critical first levels in education systems for nurturing students who will be independent but respectful of the ideas and feelings of others; autonomous yet socially skilled to collaborate peacefully with others; and well-balanced individuals with a strong sense of self-knowledge and identity that extends to empathy and tolerance for others.' (Takanishi, 2015)

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Moving from looking at education in general to ECEC in particular, leads us to the debates around the 'schoolification' of ECEC and to discussions about if and how to measure outcomes in ECEC. The key question here is about the consequences for developing holistic processes that take account of all aspects of children - what Loris Malaguzzi called the 'hundred languages' of childhood and the image of the child who is *'rich in potential, strong, powerful, competent and connected to adults'* (Moss in Cameron & Moss, 2011). The notion of nurturing children and thus enabling them to develop certain attitudes, ethics, a sense of meaning, etc. though expressed a bit differently by different authors, nevertheless presents this rounded picture of the 'hundred languages' of childhood and notably the role of early education. For Fielding and Moss in the neo-liberal approach, *'The dominant values are cognition (above all other facets of human being), competition (between children, between teachers, between schools), calculation (of best returns on investment), commodification (in which everything can be costed, calculated and contracted), choice (of the individual consumer variety), and inequality (fuelling and fuelled by competition*'. This clearly sits uncomfortably in a scenario in which a holistic process focusing on the whole child is valued and in which democracy is a fundamental underpinning concept (Fielding & Moss, 2012).

Service delivery

This section focuses on research undertaken in the ECEC sector. As the pilots progress during the INTESYS project, we will increasingly focus on all the other sectors involved in developing more integrated ways of working. This includes health, the social services, parental support of different types, etc.

Literature indicates that staff wages is a factor affecting teacher quality, and in turn the overall quality of ECEC. NIEER (2003) and Ackerman (2006) suggest that high staff wages can increase the motivation of current staff and attract highly motivated and qualified professionals to the sector which can indirectly improve child developmental outcomes. Low wages reduce the attractiveness for qualified staff to work in the sector. Equally important, low wages in general lend support to the perception that work in the ECEC sector is of relatively low status and, therefore, the risk is of failing to attract committed staff (Ackerman, 2006) Pianta et al. (2008). Experiences of giving fully qualified caregivers high wages demonstrate strongly that this is related to process quality. Also that higher staff wages can help ensure the teachers' job satisfaction and lower staff turnover rates, which is widely recognised as another prerequisite for quality ECEC. Papanastasiou & Zembylas (2005) concluded that teachers' job satisfaction was related with high quality ECEC, because it helped to guarantee staff stability. Loeb et al. (2004), Huntsman (2008), Love et al. (2003), and Cuciureanu (2009) found that stability in early childhood education and care is positively related to child outcomes and better child development.

Finally, greater diversity in ECEC staff is one more characteristic associated with high quality ECEC. OECD (2006) notes that diversity of staff is beneficial for children to open their minds to new ideas, counter stereotypes, encourage respect for multi-cultural learning. Bauchmüller et al. (2011) show that a bigger share of male teachers in ECEC provision has a significant positive effect on child outcomes. The CoRe study (2011) findings show that successful strategies to attract educators from ethnic minorities include the creation of varied pathways to qualifications, focused on the recognition of prior learning for experienced untrained practitioners and the provision of additional support courses for working with children with an ethnic minority background.

In summary research underlines that services should be:
- physically safe but intellectually challenging, promoting curiosity, enquiry, sensory stimulation and aesthetic awareness

- combining indoors and outdoors, the cultural and the natural
- providing free access to a rich range of materials that promote open-ended opportunities for play, - representation and creativity
- demonstrating the nursery to be an integral part of the community it serves, working in close partnership with parents/carers and other skilled adults
- educative rather than merely amusing or occupying
- promoting interdependence as well as independence, community as well as individuality and responsibility as well as freedom

http://www.friedrichfroebel.com/elements.html (accessed 7th July 2016)

3.2. Management and team professionalism

It is becoming clear that more integration between sectors is needed to face the fact that the everyday life of families and children constitutes an inseparable whole in all the areas that are taken care of by different sectors and professionals. A more integrative response, however, requires strong coordination and cooperation, combining strengths and capacities, not only to better serve the variety of needs of families but also to build on the competences of all professionals involved. Integrated work can offer professionals more opportunities to engage in dialogue, to reflect on their sometimes very different images and ideas about children and families. This way they can keep their own professional identity but at the same time grow professionally and be able to see and learn about new or other perspectives within the cooperation.

3.2.1. Leadership

On the management level, a specific kind of leadership is needed. Strong leadership in integrated services is not so much about strict hierarchies, but rather about being able to connect, to motivate and empower staff, to develop and implement in a participative way a clear vision, to stay on track, to communicate well and to support staff in their development towards more cooperation. Leadership in this context is about coordination, organising common practice and professional development and mediating between the different actors. It is much more about facilitating and shaping values of cooperative work; mutual respect and solidarity; and democratic decision-making than it is about top-down management of a combination of services and service providers.

This type of leadership requires not only for 'leaders' to be competent and committed, but also to be familiar with the different services and be highly credible. This is not always very easy to grasp when examining professional profiles or checklists. In order to take all this into account, there also needs to be a clear mandate, both from the authorities and within the cooperation.

All in all, leadership in this context is not only about the required competences but also about the ability to take up a coordinating and motivating role within a competent system. In a competent integrated system, leadership is shared between professionals, as real integration cannot be developed well in a strictly vertical structure. Working on integration needs some regulations, but also needs space to grow bottom-up.

3.2.2. Workforce

One of the salient factors of the quality of integrated working is the competence of the staff. Integrated work requires both professional competences relating to the specific task, but also a certain attitude pertaining to willingness to cooperate, trusting partner organisations, open-mindedness towards shared learning, awareness of the risk of stigmatisation and knowing how to avoid it, etc. Working in an integrated low-threshold way for 'hard-to-reach' families requires

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different attitudes and values of professionals: the old 'expert' way (including paternalistic attitudes) will need to make way for a more enabling, welcoming, participative and inclusive work attitude. Parents/carers and children should receive the services they actually need, not what professionals think they need. This will make the services more accessible as well and will make people more motivated to work together.

In order to deal with all these different questions and challenges, it is necessary to continuously offer guidance and training to all staff members. Reflective practice, moderated group discussions to address issues, group activities and so forth can keep all workers connected, motivated and committed to their cooperation.

For integrated work, it is essential that all staff members participate in continuous professional development (CPD) on how to work for and with families, all kinds of families with all kinds of different needs. They will all need support in developing the shared understanding of the philosophy and values of the integrated service where they work. Combining the work from different fields and disciplines requires building on the initial training as this will never be sufficient for people to learn how to work in a seamless and integrated fashion. Different professions and fields of work should be combined and join forces with the repartition of roles and responsibilities clearly defined.

3.2.3. What does research tell us?

In international research on ECEC there is a consensus that better educated staff members are more likely to provide high quality pedagogy and stimulating learning environments, which in turn, foster children's development leading to better learning outcomes (Lazzarri et al, 2013). Competences of the educational and support staff proved to be one of the most salient indicators of ECEC quality, especially in ensuring higher process quality (Bowman et. al, 2000.; Huntsman, 2008; Litjens and Taguma, 2010). Burchinal, Howes, & Kontos (2002) conclude that this structural variable is a better predictor of quality than the two other most researched structural indicators – group size and adult-child ratio. Moreover, Sheridan (2011)suggests that effective professional development schemes can enhance quality of ECEC despite lower staff-child ratios. Sakellariou & Rentzou (2011), Urban (2013), Jensen et al. (2009) and Sheridan (2001) state that sensitive and responsive caregiving is one of the most important indicators of the quality of ECEC. A study by Buyse et al. (2008) showed that with emotionally supportive teachers, children who demonstrate internalising or externalising behaviour are no longer at risk of developing less close or more conflictual relationships with their teachers.

Most research claims that better educated preschool teachers with specialised ECEC training are more effective in providing stimulating, warm and supportive staff-child interactions leading to positive child developmental outcomes (Huntsman, 2008; Ivić&Pešikan, 2009; Sylva et al., 2004; Fukkink & Lont, 2007. The NIEER review (2003) and Bauchmüller, Gørtz, & Würtz Rasmussen (2011)also show that teachers who have Bachelor's degree are used to responding more sensitively to children's needs; are more actively engaged with the children; and give children more positive feedback and encouragement. Moreover, it is important to ensure a high level of initial qualifications for staff working with all age groups of children. However, the tendency is that early care staff (working with children of 0-3 years old) have much lower initial training qualifications (vocational training or a secondary school diploma), than preschool teachers (working with children from 3 to 6 years old) (OECD Network on Early Childhood Education and Care, 2011). Pessanha, Aguiar, & Bairrão (2007) found that younger and better-paid teachers provide better toddler child care quality. Rivas & Sobrino (2009), Pineda Herrero et al. (2008) and Rivas, Sobrino, & Peralta (2010) also emphasized that training of ECEC staff is one of the key factors of positive outcomes for children.

Despite this substantial evidence showing that staff qualifications matter, research also points out that qualifications *per se* are not sufficient to determine the quality of ECEC provision (OECD, 2012).

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The content of the training – as well as the methodologies adopted for its delivery – also play a crucial role in increasing the professional competence of educators. In this sense the reciprocal integration of diversified training approaches (lectures, small-group project work, practicum, analysis of practices) that produce recursive interplay between theorising and practicing activities is a major success factor. In other words the initial professional preparation has to be characterized by a reciprocal relation between theory and practice (Vandenbroeck, Urban , Peeters, 2016).

Research findings also show that continuous professional development initiatives ('in-service training') may be equally important as initial professional preparation ('pre-service training' leading to officially recognised qualifications), provided they are of sufficient length and intensity (Fukkink and Lont, 2007). As several research gaps had been identified (both in relation to the content and delivery of professional development opportunities as well as in relation to their effective contribution to the qualification of ECEC services [OECD, 2012]) Eurofound launched a study in 2013 that aimed to explore how various forms of professional development interact to improve children's learning in ECEC settings. The systematic review of 41 high quality studies on CPD pointed out that continuous professional development initiatives, which succeed in improving the quality of ECEC services and children's experiences, are characterised by the following key success factors:
- a coherent pedagogical framework or curriculum that builds upon research and addresses local needs;
- the active involvement of practitioners in the process of improving educational practice enacted within their settings;
- a focus on practice-based learning taking place in constant dialogue with colleagues, parents/carers and local communities;
- the provision of enabling working conditions, such as the availability of paid hours for non-contact time and the presence of a mentor or coach who facilitate practitioners' reflection in reference groups.

Professional development initiatives based on research-based enquiry or action-research can help staff reflect on their pedagogical practice and therefore contribute to its ongoing improvement. Such initiatives, based on the analysis of pedagogical documentation or on video-feedback can sustain practitioners in elaborating practices that are more responsive of children's needs. Meanwhile, practice-based research can contribute to raising the quality of ECEC services through the dissemination and exchange of good practices, which in turn can support capacity-building and policy advocacy processes.

A further key factor is leadership. Researchers talking about 'poor quality' ECEC often refer to the lack of leadership (Bennett 2012). This reflects on many areas such as inadequate financing, fragmented services that are inadequate to the different needs of parents/carers and children, or access to ECEC not being universal/equal, insufficient attention to data collection, policy monitoring and research. Ang (2011) demonstrates that effective leadership and the visions leaders have of ECEC are important determinants of the quality of provision. Competent leaders play an important role in delivering integrated services equally available for every group of children (Vandenbroeck et al., 2014). Managers play an important role in supporting common professional development for the staff of integrated centres that have different qualifications, by influencing the extent to which centres support, stimulate and subsidise professional development. Staff quality is maintained by leadership that motivates and encourages working as a team, information sharing and professional staff development (OECD, 2012). The quality of leaders and managers of ECEC services is also strongly related to their level of education and professional development, as found in the EPPE study (Sylva et al., 2010) and by Ang (2011). Vandenbroeck et al. (2014) showed that leaders who had undergone coaching and peer group support rethought their access policies towards equalising

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accessibility. Effective leadership involves good quality systems of governance and monitoring of ECEC services.

3.3.   Family participation and child-centred approaches

Working in a more integrated way is not only about combining services but also about setting up a dialogue about the images of the child, the family and the professional, about the values governing the whole set of services and about a variety of theories and practices of working. There is not only an added-value for the families served, but also for the professionals: integrated working can open their views, widen their way of thinking outside their own professional box.

Ideally, high quality integrated centres can create opportunities to support higher community cohesion and offer families the support they need, regardless of status, level of education, ethnic, religious or cultural background. When parents/carers can meet, they can experience what they share - parenting, wanting the best for their children and the worries that may go along with that, exchanging information and tips…- instead of being focused on their differences. Learning to know each other, engaging in activities and learning with and from each other can create bonds, which can be of great support.

Family centres, Germany

Over the past 10 years German policy has been focused on the transformation of childcare centres into more integrated family centres (*Eltern-Kind Zentren*). In general the goal is to support and empower parents, especially those living in vulnerable situations. These family centres often include a childcare centre, often the core of the centre as they are quite well attended, and it is combined with other services for parents and children, including early education, adult education and parent support. They provide a cluster of services supported by other institutions, such as schools, cultural organisations, counselling and health services.
To add to the accessibility, also for more vulnerable groups, the policy is to create cooperation between supportive initiatives that are not reaching the vulnerable groups sufficiently, with services, such as child care, that have a higher attendance of children from families in vulnerable situations. This way, parents can learn about and be in touch with services that they otherwise would not have known existed. As in other countries, different organisation models are possible.

Family support systems of different types can step in at an early stage with tailored responses, avoiding an escalation of problems or other types of interventions. Support can be offered according to the needs either through more specialised services or more universal provision. In a Swedish family centre, for example, parents/carers can attend the open preschool with their 3year-old children, while also obtaining advice on how to relate to the acting-out behaviour of their 13-year old.
This way, more integrated work can be really meaningful, not only in enhancing access but also in reshaping the services to better answer to the needs of families. Professionals such as social workers, preventive health workers or home visitors, or others that have already built a relation of trust, can be key players to accompany families in their search for the support they need. (E.g.in several Scandinavian countries, all parents/carers receive free perinatal support and during this period they can find out about different services they can rely on).
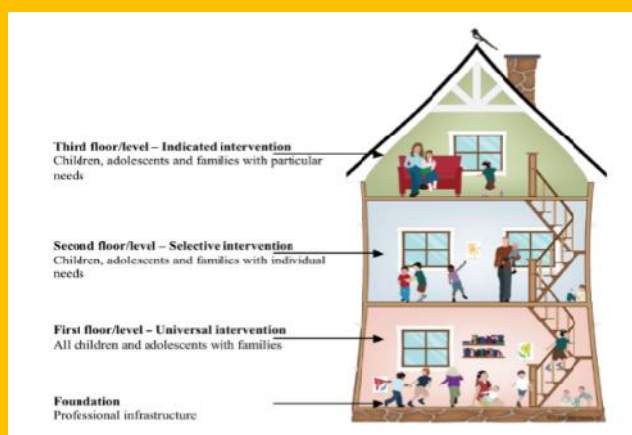
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Family Centres, Sweden

In Sweden, as in other Scandinavian countries[1], the Family Centres are a well-known type of integrated service for families with children. Already during pregnancy, parents are informed and offered preventive health services and this way, they are introduced to what is available for them. A Family Centre is a physical place ('where it smells like coffee'), where all families can drop in, either to use or attend a certain service or to meet other parents. Note that, in the context of regulations on parental leave, not only mothers attend the family centres, but also fathers.

Different provision can be offered in the same centre, but centres offer mostly the same 4 basic services: Prenatal care and advice, preventive health care, basic educational support and the open preschool, which is considered to be the 'heart' of the centre. The open pre-school is a meeting place where parents can come with their children to engage in fun and educational activities.

In addition to these basic services, offered to parents because they have children and not because of a specific problem, other more differentiated services can be offered, whenever there is a need (such as youth care, mental health issues…).

Third floor/level – Indicated intervention
Children, adolescents and families with particular needs

Second floor/level – Selective intervention
Children, adolescents and families with individual needs

First floor/level – Universal intervention
All children and adolescents with families

Foundation
Professional infrastructure

'Huis van het Kind'(Family Centre), Flanders, Belgium

While Flanders has a wide range of services in the field of family support (preventive health centres, child care, parenting support…) not all of them are as accessible as they should be for all families and not all of them have been closely linked or integrated. That is why new legislation in 2014 introduced the concept of family centres[1]. The goal is to stimulate inter-professional collaboration between local actors to provide a range of family support services in an integrated and accessible way m attuned to m local needs. The decree includes some principles and goals, while leaving flexibility to partners at local level to take into account the local context.

To be recognised as a Family Centre, certain services must be involved in the network but many others can also become involved. The centres where preventive health services (vaccinations, growth…) and follow-up are provided are considered to be the heart of the family centres because they have a very high attendance (96% of all parents go there at least once) and can serve as the link to other family support services and organisations within the network. Minimally, it should organise preventive health care, parenting support, and activities that facilitate encounters and social cohesion. They can combine all types of services for families with children (material and immaterial support, childcare, education, preventive and mental health, leisure time, libraries etc.)

One of the problems, however, is that the Flemish government does not provide sufficient additional funding to support this process towards more integration and much depends on what the partner organisations want to invest from their own resources (staff, funds, building, materials…).

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Family Centres, Finland

During the past decade, Finland has initiated a fundamental reform and a move towards the family centre model, allowing for this model to grown at its own pace and be designed and developed by local stakeholders. Two inspiring practices were mentioned in the Finnish response to the survey, illustrating how every centre will develop in alignment with the local context.

The Family House of Pargas (Western Finland) integrates services of health, social welfare, early childhood education and NGO actors. Professionals involved are workers from mother and child health care services, family counselling, psychological services for children and families, family work, speech therapy, kindergarten and open kindergarten teachers, and special pedagogies. In-service training is offered for multi-professional participants on evidence-based practices (e.g. Beardslee's Let's talk about children, ICDP –International Child Development Program for parenting support, multi-professional model for evaluation of needs of services). The main aims are to promote the overall well-being of children and families, prevent exclusion and marginalisation, improve cooperation of professionals, combine resources of different services and develop collaboration structures for multi professional teams and networks to support families and children.

In the Kainuu region (North Finland), the model works slightly differently. This centre integrates primary health services and early preventive social services for families and children. It consists of eight small family stations, each of them with their own coordinator, situated in different municipalities of the region. There is one central family centre in the city of Kajaani. With support from the steering group, coordinators are responsible for coordinating services, team work and network-based meetings as well as collaboration with NGOs and local actors and volunteers. This family centre pays great attention to a service path from primary care to special services by integrating professionals from special health care to primary care and by agreeing on common care paths with specialist health care. Professionals use evidence based methods of observations, evaluation and follow-up and know each other's work practices. All the work starts from the family itself: professionals meet with all family members and next of kin and peer group resources are taken into use. Referrals are avoided by working in multi-professional meetings.

Working together more closely can also smoothen transitions from one service to another (e.g. from childcare to preschool). It is becoming clearer that existing transitions, changing to other provision or services, add more thresholds for vulnerable groups[6]. More integrated work can alleviate these complications as different services know each other better, can inform families better and guide them through the transition. The problems with transitions are better known and measures can be taken such as specific transitionary activities (a goodbye ritual, a period of finding out about the new service…) so that parents/carers and children can become familiar with the changes more comfortably. This also requires the development of a shared language, symbols and work methodologies (e.g. working under a same name, logo or providing information on connected services).

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[6] See e.g. Study on the effective use of early childhood education and care in preventing early school leaving (http://www.vbjk.be/files/Study%20on%20the%20effective%20use%20of%20ECEC%20in%20preventing%20early%20school%20leaving_FINAL%20REPORT.pdf)

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3.3.1. Child-centred approaches

Two examples of child-centred approaches are given here as illustrations of the necessary dimensions that are complementary to the considerations presented above.

The Berlin early years curriculum, built on the concept of *'Bildung'* explicitly refers to three levels:
- The image of the self - the child in [his/her] world
- The image of others - the child in the children's community
- The image of the world - experiencing the world, discovering the world

It defines a set of competencies (ego, social, knowledge, and learning method competencies) that are developed at each of the levels above through exploratory questions and tasks for the educator. The aim is both a holistic process and focusing on the whole child (Prott & Preissing 2006).

Curriculum of Excellence, Scotland:

As an example of a national strategy, the purpose of the Curriculum for Excellence in Scotland, which is for all children from aged 3 to 18, is *'encapsulated in four capacities - to enable each child or young person to be a successful learner, a confident individual, a responsible citizen and an effective contributor. The curriculum aims to ensure that all children and young people in Scotland develop the knowledge, skills and attributes they will need if they are to flourish in life, learning and work, now and in the future, and to appreciate their place in the world*.'[1]The early learning and childcare of very young children are not separate but considered as 'indivisible and seamless' with a learning pathway seen as continuous and starting from birth. One of the implications in practice is providing the training and materials for professionals to be able to develop active, experiential learning, a holistic approach to learning, smooth transitions and learning through play. It is part of the overall strategy for children - [Getting it Right for Every Child](#) (GIRFEC) - for improving outcomes and supporting the well-being of children, and supporting them and their parent(s) to work in partnership with the services that can help them. It puts the rights and well-being of children and young people at the heart of the services that support them – such as early years services, schools, and the health service – to ensure that everyone works together to improve outcomes for every child[1]. There is also a set of indicators to assess a child's overall well-being covering both physical and mental aspects: safe, healthy, achieving, nurtured, active, respected, responsible and included.

Both of these examples take a whole child perspective taking account of the physical, mental, social, emotional and spiritual dimensions of the child and of the immediate and broader environments in which the child is developing, learning and growing.

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3.3.2. Challenges of participation

Parents (and carers of cared for children) and children need to be considered as partners since it is their needs that are the central focus of attention. Their roles are potentially multiple: through their experience they are the experts in the use (or not) of services, they can be co-designers of services and co-constructors of practice, and they are important sources of feedback and evaluation.

All over Europe, participation of parents/carers and children has been a common trend in recent decades, but the search for authentic and meaningful participation can still be much improved. Though it is increasingly common to work in a participatory way, practice shows that this can be done in many ways, ranging from merely tokenistic to actually meaningful and authentic and resulting in actual changes in service access, content and delivery (Hart 1992). Developing participative structures and practices is an ongoing process that never really ends. Besides the practical aspects, there are underlying views on what participation really means: is it an instrumental measure to increase effectiveness and connectedness, or is it a fundamental pedagogical and democratic principle in itself? Can parents/carers and children co-design the services or do they have some say in how they can access services and organisations designed only by professionals? Participation should be developed in practice as a principle, as a means, as a condition and as a goal, though there is no detailed or single recipe for doing it.

> "The first step is to listen, respectfully, to what people think about their own lives, about the meaning they give to the situation perceived as problematic, and then try to create a process of empowerment, starting from that. The difficulties related to the engagement of 'hard to reach' families, is to find them where they are, not where we want them to be…" (Balduzzi and Lazarri, questionnaire response)

Taking the ecological approach (Bronfenbrenner, 1979) in which the child lives within a set of important and meaningful relations and interactions, the early childhood setting becomes one of these environments. Professionals need to learn about the home environment (what parents/carers find important, how they put their children to sleep, what the daily patterns are at home…) and about how to relate to the child in the service setting. Pen Green e.g. calls this the Parents Involvement in their Children's' Learning in which theoretical understandings of pedagogy are linked to how parents/carers raise their children, leading to the use of a shared language on how children develop, learn and grow (see below example on p23).

3.3.3. What does research tell us?

Child-centred approaches

For this project we are interested in, firstly, ensuring that services working with young children are sensitive to their physical, mental, emotional, social and spiritual needs and, secondly, how the environment supports a 'whole child' approach through holistic processes involving all services and agencies(McManus, 2011). Understanding human functioning within a web of relationships or a 'living systems perspective', weaves together the various aspects of the person, the process and the environment, all in dynamic interaction with one another (O'Toole & Gordon, 2015) and supports the notion of the unique assets of each child as being essential to learning, to the process of finding meaning and purpose in one's life and environment, and understanding how best we learn as human beings (Ramphele, 2015). Fundamental to Learning for Well-being is an understanding of the differences that can be noticed from infancy in how children interact with their environments. In

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early childhood, especially when children enter collective settings such as day-care, kindergartens, or school, these different ways of functioning are sometimes viewed as problems to be resolved rather than natural patterns of processing to be supported. This links to the environmental factors, among others, through a salutogenic approach to health assets, i.e. thinking about what needs to be done to create the conditions of health in its broadest sense, taking a life course approach from children's earliest years (Morgan & Aleman-Diaz, 2016). In the case of ECEC provision, this would include both the networking and integration of services as well as recognising children as social agents and ensuring their voice is central to all processes.

Such considerations are embedded in the foundations of early years education both in the principles of a Fröbelian approach and in the insistence on the dynamic relationship between the individual and his/her environment (Weston, 2002). The approach focuses on the recognition of the uniqueness of each child's capacity and potential; a holistic view of each child's development; an ecological view of mankind in the natural world; a recognition of the integrity of childhood in his/her own right; and a recognition of the child as part of the community.

> '*A broad encompassing view of learning should aim to enable each individual to discover, unearth and enrich his or her creative potential, to reveal the treasure within each of us. This means going beyond an instrumental view of education as a process one submits to in order to achieve specific aims (in terms of skills, capacities or economic potential), to one that emphasises the development of the complete person…*' (Delors, 1996)

One of the regular tensions in learning systems is between the more child/person-centred approaches illustrated in this quote from *Learning: the treasure within*, and approaches to learning that compartmentalise the individual through fragmentation of processes, learning content and places and that address different needs through fragmentation of services and provision from birth on. Increasingly research and practice are demonstrating the substantial advantages of considering learners as whole people, of '*learning how to be human in a world that's changing*' (Ramphele 2015).

Given the debates around outcomes-based learning approaches (including a tendency to reduce them to an expression of fragmented skills), it is important to note that the deep notion of competence is in itself holistic in that it involves the different aspects of each person:

> '*A competence refers to a complex combination of knowledge, skills, understanding, values, attitudes and desire which lead to effective, embodied human action in the world in a particular domain. One's achievement at work, in personal relationships or in civil society are not based simply on the accumulation of second hand knowledge stored as data, but as a combination of this knowledge with skills, values, attitudes, desires and motivation and its application in a particular human setting at a particular point in a trajectory in time. Competence implies a sense of agency, action and value.*' Hoskins & Deakin Crick (2010)

In recent years, brain-imaging technologies have made it increasingly possible to observe the working brain. The resulting research provides helpful insights into perceptual, cognitive and emotional functions that contribute to our understanding of the processes of learning and could help in structuring nurturing learning environments. Findings suggest that nurturing is crucial to the learning process and are beginning to provide indications of appropriate learning environments. recognising the close interdependence of physical and intellectual well-being and the close interplay of the emotional and the cognitive enforce the possibilities of taking advantage of the brain's plasticity, facilitating the learning process (OECD, 2007, Hinton et al, 2008). Learning is a relational process, thus in order to '*engage in reciprocal activity, an individual mentally creates self and other's feeling*'

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(Tayler 2015). Immordino-Yang and Damasio explore how the connections between emotion, social functioning and decision-making have the potential to *'revolutionize our understanding of the role of affect in education'.* The authors emphasise that recent findings underscore the critical role of emotion in bringing previously acquired knowledge to inform real-world decision-making in social contexts, they suggest the intriguing possibility that emotional processes are required for the skills and knowledge acquired in school to transfer to novel situations and real life" (Immordino-Yang & Damasio, 2007). Moreover it has been noted that during the early years developmental tasks are full of emotional issues which can be difficult for young children thus requiring emotional competence (Denham 2016). Observation suggests that young children who enjoy warm attachments and whose family and educators are aware of their emotional state are well placed to develop as competent human beings (Tayler, 2015). This underlines the importance for all professionals working with young children to have a shared understanding about children's development and learning which is happening in all the setting and activities they are in.

Transition from ECEC provision to school

For the purposes of the literature review from which this section is drawn (Peeters et al, 2012), transition is defined as a relationship between home, childcare and ECEC and compulsory schooling in three dimensions: readiness for school, strong and equal partnership between all stakeholders involved - ECEC educators, school teachers, children, parents and communities – and the vision of a meeting place. Within the INTESYS project, this topic refers to the more 'vertical' ways of integrated work.

Transition to school is not a one-time event, but rather a 'process of continuity' (Peeters, 2010) and change as children move into the primary school. This change refers to changes in relationships, teaching style, environment, space, time, contexts for learning, etc. (Fabian & Dunlop, 2006). And therefore, the process of transition occurs over time, '*beginning well before children start school and extending to the point where children and families feel a sense of belonging at school and when educators recognize this sense of belonging*' (Hayes, 2011).

High quality education and care play a significant role in children's development not only in terms of immediate outcomes: cognitive skills, like literacy and numeracy, social and emotional behaviours, readiness for societal interactions, but also long-term impact on children's performance and participation in later stages of education (Sylva et al., 2004; Mitchell et al., 2008; Broberg et al., 1997) and life (Peisner-Feinberg et al., 1999; Heckman et al., 2010). In order to achieve this, the integrity and consistency of the whole educational system is necessary. Children who have a positive start at school are likely to perceive school as an important place, to have positive attitude to learning and positive expectations of their abilities to succeed at school (A. Hayes, 2011; Dockett and Perry, 2007; Fabian & Dunlop, 2007; Margetts, 2007; Peeters, 2010; Einarsdottir, 2007; Moss, 2013).However, this is more likely to happen if the pathway of children through educational settings is smooth and well-organised.

Worldwide acknowledgement of the importance of early childhood education and care for later development and the necessity of investing in high quality early childhood education (OECD, 2006) also encouraged research about transitions as the next strand in the learning chain. Transition to school is an important part of quality, both in preschool services and primary education where different approaches, contexts, systems and philosophies intersect (Hayes, 2011) .The importance of a positive transition to school has been emphasised in research around the world. Positive or negative experiences during transition to school, both from the emotional and academic perspectives, can be a critical factor for children's future success and development (Dockett & Perry, 2007; Fabian & Dunlop, 2007; Margetts, 2007; Woodhead & Moss, 2007; Einarsdottir, 2007;Moss, 2013). Positive transitions can stimulate further development. However, negative experiences can

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engender lasting difficulties leading to problematic behaviour and possible poorer performance (Niesel & Griebel, 2005; Woodhead & Moss, 2007). Therefore, poor attention to transition processes can increase barriers for children, especially those with a disadvantaged background, to successfully integrate into primary school (Bennett, 2012).

The barriers that can affect a smooth transition process mostly relate to the structural differences among childcare, home, ECEC systems and compulsory schooling; and also to the differing views of parents/carers, childcare workers and school educators on children's development and school readiness. There are also communication gaps between educational levels, families and communities (Neuman, 2000; Broström, 2005).These existing barriers and system differences are in themselves indications about the benefits that could lie in more vertically integrated work. Potential outcomes of smoother transition from ECEC to school are summarised in the following table.

Table 2: Potential outcomes of transition from ECEC to school

Outcomes of positive transition experience
• Children feel safe, secure and supported in the school environment. • Children display social and emotional resilience in the school environment. • Children feel a sense of belonging to the school community. • Children have positive relationships with educators and other children. • Children feel positive about themselves as learners. • Children display dispositions for learning. • Families have access to information related to the transition to school tailored to suit the family. • Families are involved with the school. • Relationships between families and the school are respectful, reciprocal and responsive. • Educators are prepared and confident that they can plan appropriately for the children starting school.

Source: Nolan, A., et al (2009)

3.4.   Policy issues and challenges

3.4.1   Economic motivation

Finally, many respondents mentioned the potential benefits of integrated work in economic terms. By avoiding overlap, by developing common frames for training and professional development, by better serving a variety of needs within one organisation, integrated work can be financially more viable than a fragmented and scattered system of help, care and support.

> *"Integrated work in early years has the best position to save money and suffering" (VibekeBing, Sweden)*

Some experts also mentioned that the most feasible way to move ahead is to bring services together to think about new ways of using and connecting already available services and resources instead of 'inventing' new structures.

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3.4.2   Co-production

With inspiring practices like the French REAAP (see above) and the Pen Green Centre (UK) integration is all about a co-production approach where families and children are involved in developing the services they are going to use, i.e. a service can only be labelled as integrated when families experience it as such.

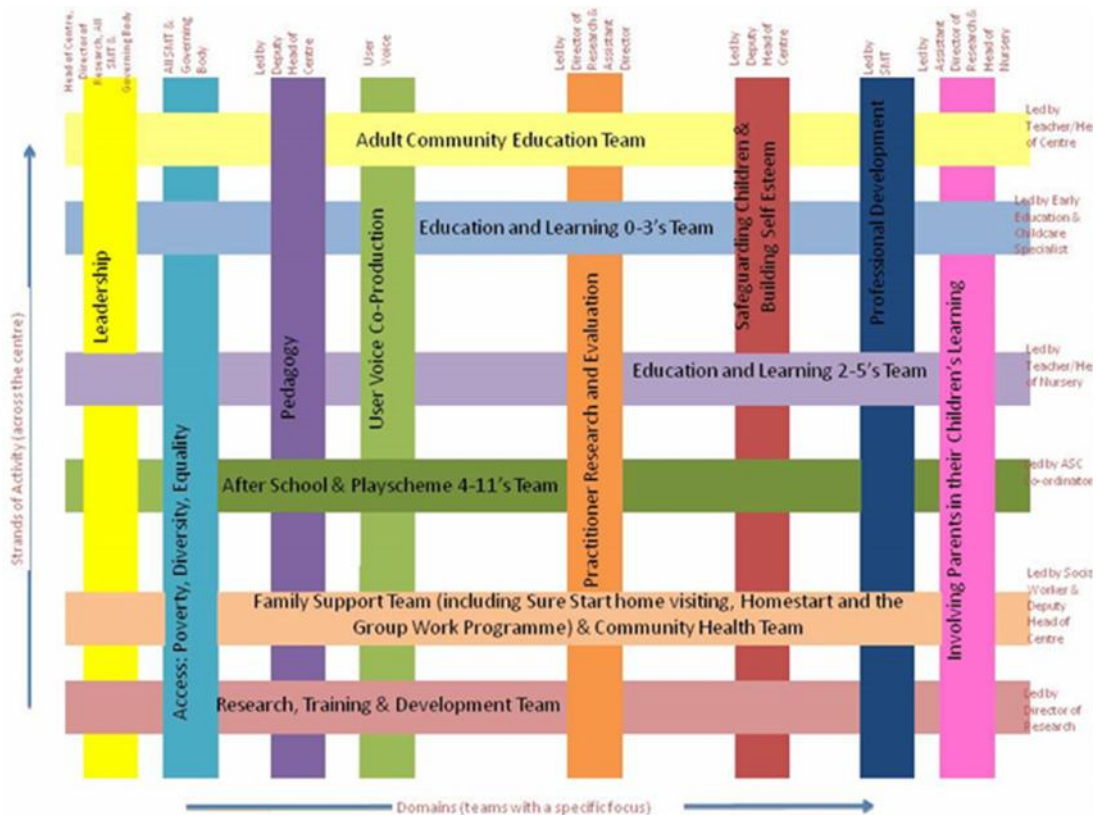**Pen Green – Children's Centres, UK**

The Sure Start Children's centres in the UK[1] have the core purpose '*to improve outcomes for young children and their families and reduce inequalities, particularly for those families in greatest need of support'*. These centres have been developed on the local level, involving all possible actors working for and with families, as well as the families themselves. This explains the many different types of Sure Start centres throughout the UK.

The Pen Green centre in Corby may well be one of the stronger examples of teams of professionals and parents working in a thoroughly integrated way, offering all kinds of services to families in quite a disadvantaged area. When it started in 1983, Pen Green had six staff and worked with 50 children; today the centre has been a designated children's centre (since June 2004) and has more than 110 staff, including teachers, nursery nurses, social workers, play workers, midwives, health workers and support staff, and works with over 1200 families. (*See diagram below which shows how complex and cross sectoral integrative work can be developed.)*

One of the main characteristics of Pen Green is that parents are partners in developing and evaluating the services and practice, participate in training modules, are staff, partners in appointment procedures and co-learners and co-constructers. Another typical asset of Pen Green is the focus on training for all the staff and for parents. A Masters programme on Integrative Services and Settings was developed and disseminted across the country.Over half of the staff is former 'users', parents who visited the centre and could engage in professional training. Every staff member needs to engage in multi-discplinary training and to research and reflect on their own practice. Training modules are offered on groupwork, parents involvement in their children's learning, integrated work, etc.

> *"…as you are working…in an environment where the social conditions are very challenging and oppressive, this actually makes for more effective integration. In these conditions, there is no possibility of people being passive, people are constantly needing to challenge existing systems and structures because they don't work for poor people." (Margy Whalley)*

Staff at Pen Green are willing to go out of their way on behalf of children and families and are aware that they work as partners, in an equal relation, with the families,not working for them but engaging with them. They cannot be judgemental and need to have an attitude of 'cultural humility'. Pen Green honours a philosophy that everyone is a leader and instead of hierarchy they developed the concept of 'sidearchy'. The underlying idea is that everyone is constantly part of the leadership and that they are constantly learning from each other.

3.4.3. Challenges facing decision-makers

Not only do the professionals need to make their commitment to integrated work explicit but the same needs to be done on the policy level, both through legislation and facilitating regulations, for example in budgetary terms. Given the differences across Europe, challenges depend on the particular context though some are prevalent. When moving towards services from different sectors working together, a division of competences across ministries is not helpful. It is sometimes felt as quite illogical that services in the field are required and willing to cooperate more, when the policy level remains segregated. But bridging policy levels is quite a complicated exercise. One approach is to introduce a broad, overall legislative framework at national level, with different implementation models developed at local levels, though all working towards one goal: a well-defined framework for public policies on children's welfare and education, combined with family and social support. Such a framework needs to stimulate and facilitate cooperation rather than regulate the exact content of the integrated services in detail.

Starting from a strong commitment on all policy levels and ministries, reforms will require interventions of different types such as setting up new structures or re-dividing responsibilities, a design of a coordinating body or level, monitoring systems, centres of excellence, work on lowering thresholds etc. In terms of funding, a suggestion was made to have 'earmarked' budgets for integrated work/actions rather than budgets allocated to the different sectors and departments.

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In the responses, we also found a common call for progressive universalism, avoiding targeting certain groups, and for free-of-charge services as much as possible.

Depending on what the current situation and political culture is at this point, radical changes in strategy may be needed. Besides a change in policies, some mentioned the need for a fundamental cultural shift, towards reconceptualising families' needs as a societal issue, rather than just a private one. (cf. the concept of education being a shared responsibility).A critical voice pointed at the risk of becoming too integrated and surrounding families in a way that can become controlling more than supporting. Considering this risk, it was suggested that making critical thinking a central part of professionals' education would be important as well as taking democracy as a fundamental value and practice, and ensuring that services are really accessible for all as a universal entitlement. A clear deontological framework (how, why, when and among whom to share private information on families) is one of the more concrete dimensions of these concerns.

3.4.4. What does research tell us?

This section draws on the literature review drafted by Dumcius, Peeters et al. (2014). The level of integration of the ECEC system can largely contribute to the quality of ECEC. Research shows that several areas define the level of system integration. They can be divided into the structural and the conceptual.

The structural covers five key areas: policy making and administration; access to services; funding (including what parents/carers pay); regulation (including curriculum or similar guidelines); and workforce (including structure, education and pay). A sixth structural area that could be added is the type of provision. Conceptual aspects refer to the extent to which the whole ECEC system shares an understanding of its purpose and what it is doing, and how far is this expressed in a common language (UNESCO, 2010).

The OECD has already indicated in its Starting Strong studies how the separation of 'education' and 'care' in some cases may undermine the delivery of quality ECEC. In such split systems, little attention is often paid to the cognitive development of children between the ages 0-3, whereas the health and social-emotional development of children aged 3 and above may no longer receive sufficient attention. Unitary systems on the other hand are not built on 'artificial' age categories and integrate goals for child-care with early education An OECD study on the teaching force (2005), Oberhuemer et al (2010) and UNESCO's ECEC regional report (2010) found that professionalism of staff in early education and care systems is higher in what are termed 'unitary systems', where provision for the youngest children is integrated into the educational system or other single administrations in comparison with 'split systems', in which childcare for the youngest children (under three or four years-old) and the kindergarten/preschool for older children (up to primary school age) are under separate administrations.

The EPPE study (2004) found quality was higher overall in settings that fully integrate care and education and in nursery schools than in local authority day nurseries, playgroups, private day nurseries and nursery classes; even though in general good quality services can be found in all types of pre-school.

From the perspective of children's outcomes, in split systems it is considered that younger children need only care and nurture and that education starts at the age of 3-4 years old. This approach can lead to neglecting younger children in an educational sense and too much 'schoolification' of programmes for older children (Eurydice 2009). However, it is also important to ensure continuity between ECEC and primary school, which may be neglected in both unitary and split systems. Krasowicz-Kupis (2006) showed that kindergartens in comparison with the school-affiliated units

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provide a wider scope of services and provide better quality services in general, especially for younger children. More precisely, the researcher found that the reading ability of children at the age of 6 years old does not seem to be differentiated according to the location of the 'zero class' (school vs. kindergarten).

However, even with a lot of evidence in favour of integrated systems in terms of structural aspects, split systems are not by default less successful. Countries with a split system may also have ECEC providers that integrate education and care. In Romania, as in the Netherlands, local providers and communities are developing initiatives to integrate the provision of education and care. Similarly, other countries like Germany that are on paper unitary systems, also have ECEC providers that offer education and care in separate settings for different age-groups (Panteia, 2013)

Increasingly, EU member states are working towards integrating governance structures for ECEC (provision of all age groups and of health, education and care). It is recommended that policymakers responsible for the youngest children work closely together with their colleagues developing policies for older children. Integrating ECEC into the wider education systems helps creating a fertile ground for ECEC providers on the ground to also take a unified approach to children's development (Panteia, 2013). Options like coordination between levels through a coordination body or other structure has proven to have its downfalls. Choi (2003) provides evidence that, while coordination mechanisms can work well when they are established for a specific purpose (e.g. to coordinate a particular early childhood task) or to focus on a targeted population, they are not successful in promoting a coherent overall policy and administrative framework across sectors. Limitations of coordinating bodies and cross-sectoral cooperation (health, parental support and education) are also reported in Starting Strong II (OECD, 2006): in countries such as Ireland ministerial boundaries remain an obstacle in achieving a coordinated and coherent approach to ECEC provision, despite a growing understanding of programme objectives for young children across government departments (UNESCO, 2010).

Within integrated centres there is a tendency to focus not only on the children but also on the parents/carers, because poverty and immigration may have a strong impact on parental functioning and (in)directly on the development of children. In the literature researchers are calling this approach two generation programmes, that are designed to deal with the multigenerational, multidimensional aspects of low income and migrant families. These two-generation programmes seek to cope with the problems of parents/carers and children in two continuous generations by offering services such as early childhood education and parenting education to help young children have a good start in life and, at the same time, by offering services such as job training, literacy training, and vocational education to help their parents/carers become economically independent[7].

Being born into a poor or migrant family may represent developmental risks in so far as parents/carers are more likely to live in stressful situations that make it more challenging to take up their parental roles and neighbourhoods are often more harmful and have less high quality provision, factors that negatively may influence child development. Moreover, educational institutions in poor neighbourhoods are more often of poorer quality than in more affluent neighbourhoods. Poverty is a societal problem and loving families, whatever their circumstances, can also represent a crucial protective factor against negative neighbourhood influences or failing educational systems. Rather it is important to invest in high quality provision in poorer neighbourhoods, according to a concept of progressive universalism. Two-generation programmes, combining interventions with children,

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[7]See the TFIEY background paper by Dr.Wim De Mey (VBJK Centre for Innovation in the Early Years) and Michel Vandenbroeck (Department of Social Welfare Studies, Ghent University), with contributions from Nima Sharmahd (VBJK).

parents/carers and the socio-economic environment may play an important role in such policies of investments in the early years.

3. Key points emerging

Both the European survey on inspiring practices designed and carried out for the INTESYS project and the literature review highlight the following key points about integrated working in ECEC.

Governance in which certain conditions are met is a precondition for an effective ECEC workforce working in integrated centres with children from low-income and migrant families. Developing competent practices cannot be considered as the sole responsibility of individual practitioners but is a joint effort that involves teams, training centres, local administrative institutions and non-governmental bodies, as well as national and/or regional governance systems that provide the conditions for staff development (Peeters, De Kimpe, Brants, 2016). Successful initiatives are characterised by a coherent policy on institutional and inter-institutional levels, involving:
  - Training the coordinators/managers/directors of ECEC centres;
  - Exchange of practices among centres (documenting, networking and disseminating);
  - Peer group meetings (learning communities);
  - Pedagogical mentoring by specialised staff.

For families and children, integrated approaches support increased accessibility and it is easier for families to find the services and provisions they need. In general the services and provisions are better linked to their needs and the diversity of issues arising from the different situations. Such approaches can support more community cohesion and should underpin smoother transitions from one service to another, e.g. from ECEC to school.

For professionals and organisations, integrated working at its best leads to combining strengths and capacities of the different components, thus strengthening overall how challenges can be addressed and dealt with, and adding to the quality of services.

Co-learning among and across teams and professional development, should increase efficiency at all levels and in all services, reducing overlap and fragmentation at both the policy and implementation levels. Furthermore it contributes to better use of scarce resources.

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Annexes

Annex 1: Questionnaires

Dear Respondent,

Thank you very much for cooperating with us in this European survey on inspiring practices of integrated working in the context of the European co-funded project, INTESYS: Together – Supporting vulnerable children through integrated early childhood services (Erasmus+ project). This project focuses on piloting new approaches to Early Childhood Education and Care (ECEC) systems in Europe with a view to ensuring that children and families in vulnerable situations have access to high-quality ECEC provided by services that are better integrated across the different sectors (education, health, welfare, etc.), professions and across age groups and governance levels.

We hope that the questionnaires (and telephone conversations) will bring valuable information and insights from professionals on the field from different countries in Europe, whose work makes an important contribution to ensuring high quality services for children and their families during the early years. Your experience and expertise and your perspective on integrated working will definitely enrich this survey and may add to the recommendations to be drafted at the end of this project.

Needless to say that all information and opinions will be treated with full confidentiality and that all respondents will also receive a copy of the survey.

Information for respondents

The INTESYS project focuses on ECEC systems that are responsive to and inclusive of vulnerable children and their families due to better integration of services and a more holistic child- and family-centred approach. More integration and alignment of services can have several beneficial effects on different levels. Not only can it improve access for families and children, especially the more vulnerable ones, it can also smoothen transitions between services, add to overall quality and more efficient budgeting.

The project consists of several work packages (with e.g. pilots in 4 countries), among which work package 2 aims at gathering information on existing practices through surveys and a literature review. Building on research, existing practice and information gathered at the meeting of the Transatlantic Forum on Inclusive Early Years in Dublin (Jan. 2015, see TFIEY_DUBLIN) we aim at gaining a deeper understanding of the current state-of-play and scope for improvement in the integration and alignment within ECEC systems in Europe. This 'glance' on European practice, research and policies will not be an exhaustive one, but it should give a good view on what is happening in Europe.

In this work package, VBJK will be in charge of drafting this European survey (see www.vbjk.be).

We will send 2 separate questionnaires: one for experts on the field (directors and coordinators of integrated ECEC centres or initiatives) and one for researchers and intermediaries in order to get a broad view on the state of play in integrated working.

Next to the questionnaires, more information can eventually be added by means of a telephone or Skype contact.

While the list of questions may look quite long, as a respondent, you have some leeway to fill in the questionnaire: you may skip some questions if you feel they may not be so relevant for you, you can combine questions or you can choose to respond in great detail or in more general terms. Also, please do not hesitate to get in touch when some elements are not clear to you. We do not expect you to invest too much time in searching for additional information, but we invite you to share with us what you already do, experience and know. Also feel free to add more information, such as articles, websites, reports or other. We look forward to read your responses and ideas on integrated working.

Feel free, to contact us for more information:

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Common questions for all respondents

With these questions, we would like to get information on your general approach and perspective in integrated work and its importance towards more vulnerable groups of families and children (low-income, migrant background, minorities…)

General information	According to you, what is the essence of integrated working? What are the main characteristics or conditions for 'effective' integration?
Conditions	What about the required competences, both on management and staff level? How can families participate in the design and quality of integrated centres? How can integrated working smoothen transitions between services?
Added value	What is the added value of integration or stronger cooperation (feel free to add 'evidence')? How and when can a service be really accessible and meaningful for families in disadvantaged living situations (the 'hard to reach families')?
Policy	What policy is needed to facilitate and support integrated working?
Other	What other question should we have asked you that we didn't? What information or views would you like to add?

Questions for directors-coordinators of integrated centres or practices of integrated working

Please start by giving your name and short description of the initiative/organisation, including the mission and major tasks as an introduction to the questionnaire. If possible, explain a little bit about the organisational structure (E.g. staff levels, decision-making process...) as well as on the partnership.

General organisation and motivation	- What partners are involved? E.g. who, if any, is the leading organisation or is there rather a co-leadership among different partners? Who are the core partners? What does the broader network look like? Are there mainly specialized or rather generalist partners? Is there a clear design on what everyone's role is? - What type of service(s) do you offer and towards which families and children? Are there specific target groups or is it a rather universal service? - What type or level of integration are you involved in (several answers are possible): cooperation between services, working with different age groups or target groups, integration of different sectors, etc.
Specific elements on the setting	- Do you have a policy on parent/family involvement/participation? How are families involved? - Do you have a specific deontological framework (e.g. on how and why to share information among whom versus professional secrecy)? How is the information shared between the partners? Is this framework known and shared by all people in the organisation? - Can you give specific information, from your service/organisation, in relation to the decision-making procedures, the workforce qualifications, professional development, certain working methods, required attitudes and competences? - According to you, what are the supportive regulations or policy framework? What is the role of local-regional-national policy? - How and by whom is the integration monitored/evaluated? Is this internally, externally or both?
Added value	- What do you consider to be the added value for families/organisations/policy? - What has been done differently that makes it easier for (vulnerable) parents/carers to reach your service?
Perception and approach	- Why do you work together? What is the main driver for the cooperation? What would be the main purpose of working in an integrated way, for your organisation as well as from the perspective of families and children? - What are your strengths, what is working well? How do you explain this? What makes this happen? What are crucial success factors? Of what initiatives or actions are you really satisfied; can you give concrete descriptions? - What are pitfalls/obstacles for integrated working? How do you deal with this? - How do you know that you're doing a good job? What systems are in place to monitor that you reach the set goals?

Questions for researchers, experts and intermediaries

Added value	- According to you, what is the essence of integrated working? - Why do you think investing in integrated working is needed? What is the added value of integrated working or stronger cooperation (feel free to add 'evidence')? This can refer to different aspects or positive effects: in terms of economic efficiency, in terms of quality of programs, in terms of better serving existing needs of families and children… - How and when can a service be really accessible and meaningful for families in disadvantaged living situations (the 'hard to reach families')? - How can integrated working smoothen transitions between services?
Conditions	- What would be the basic conditions for integrated working in your context: what services need to be involved? How should it be designed? How to design a shared vision and commitment and keep this alive? - What about the required competences, both on management and staff level? - What would you understand under 'strong' leadership?
Policy	- What policy is needed to facilitate and support integrated working? How can policies facilitate (or hinder) more integration, alignment or cooperation among services for families and children? - How do you see governmental responsibilities in this context (regulations, funding, monitoring…or other)?
Participation	- Can you give some requirements for the decision-making process in an integrated setting? Do you see a certain role for the families/children? If so, how do you see this?
Inspiring practices?	- Do you know of inspiring practices? Can you explain why you think this is a good example of integrated working?
Extra?	- What other question should we have asked you that we didn't? What information or views would you like to add? -

Calendar

If possible we would like to receive your responses by May 27th. 2016. After going through all the information, we can look into the possibilities of an additional conversation by phone or Skype.

Analysis of the incoming information and drafting the report will be done during the summer, aiming to finalise this European survey by September 2016.

Annex 2: List of respondents/people who sent information

Directors/coordinators of integrated services	Researchers, policy advisors, intermediaries
• Marie Nicole Rubio, coordinator of REAAP (FF) • Margy Whalley, coordinator of Pen Green (UK) • Zoran Bikovski, NGO Kham (MK) • Milena Nikolova, National Network for Children (BG)	• Susanna Mantovani, University of Milan (IT) • Daniela Kobelt-Neuhaus, Karl Kübel Stiftung (DE) • Vibeke Bing (SE) • Peter Moss, Prof. Em. University College London (UK) • Freya Geigner, University of Ghent (BE) • Wannes Blondeel, Kind en Gezin (BE) • Marjatta Kekkonen, National Institute for Health and Welfare (FI) • Bronwen Cohen, University of Edinburgh (UK) • Philine Zimmerli, Jacobs Foundation (CH) • Lucia Balduzzi and Ariana Lazarri, University of Bologna (IT) • Liesbeth Lambert, Katelijne Debrabandere, VCOK (BE) • Josette Hoex, Youth institute (NL)

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