

What do we know about improving outcomes for children and young people with disabilities?

Summary



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Why is the issue important?

Traditionally disabled children are likely to have poorer outcomes across a range of indicators than their peers, including:

- Low educational attainment
- Poorer access to health services
- More difficult transitions to adulthood
- Poorer employment outcomes

Aiming high for disabled children, pp 11-12.



Priorities of review

Improving the well-being of disabled children (up to the age of eight) and their families through **increasing the quality and range of early interventions**

Improving the well-being of disabled children and young people through **improving access to positive activities**

Ensuring all disabled children and young people and their families **receive services which are sufficiently differentiated to meet their diverse needs**

Early years intervention

- *“..multidisciplinary services provided for children from birth to five years of age to promote child health and well-being, enhance emerging competencies, minimize developmental delays ... and promote adaptive parenting and overall family functioning.”*

(Shonkoff and Meisels 2000)



How do we know early years' intervention is effective?

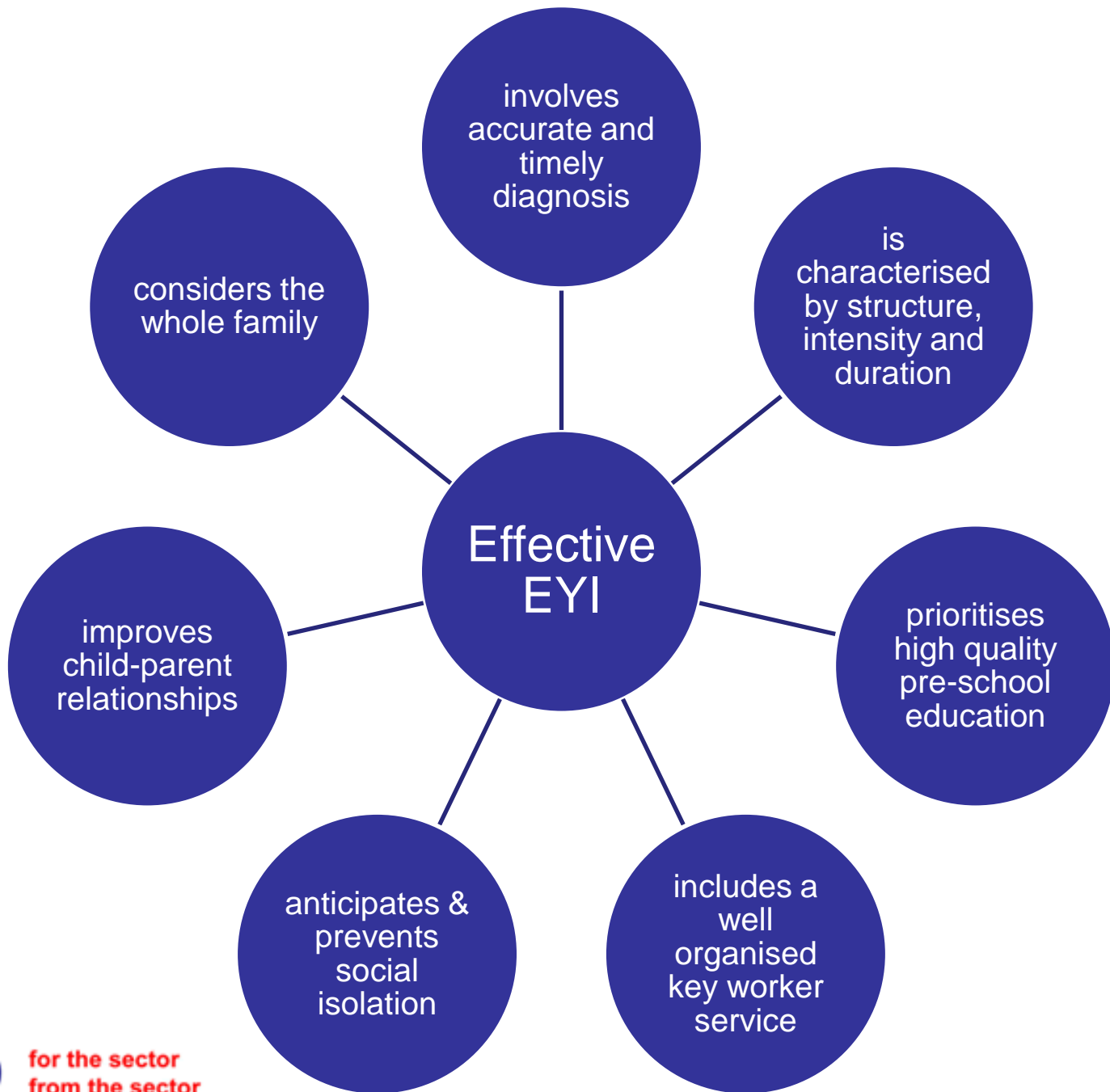
Evidence that EYI → improved outcomes, including:

- Parents reporting long term benefits
- Improved child-parent relationships

BUT

- How long do gains persist?
- Are gains a **direct or indirect** consequence of the intervention?
- Few approaches have major advantages over others.
- No single intervention for ASD has consistent advantages over others.
- Research relates to mothers primarily.

**What characterises
effective early years
intervention?**



Implications

Policy:

- Effective services see themselves as part of an overall strategy for improvement in children's services

Practice:

- respect the capacities of parents, especially mothers
- include a well organised key worker service
- recognise whole family
- develop strategies to moderate social disadvantages

Research

- More information needed on children >3 yrs, and especially >5 yrs
- Little outcome data for parents or other family members
- No data on outcomes for fathers
- More UK empirical studies are needed
- Long-term impact studies of EYI needed

Positive activities



Definitions

Inclusive provision...

is proactive in facilitating participation in settings, activities and/or social interaction by disabled c&yp

- in settings / activities where there are disabled and non-disabled c&yp
- in settings or activities where there are only disabled c&yp: 'opportunity inclusion'.

Positive activities...

take place out of school hours such as: sport, play, arts, learning, clubs

- children's centres
- extended services
- youth service
- school-based extra-curricular activities
- play and leisure services
- sports and recreation services
- arts services

Are disabled children and young people participating in positive activities?

- Lower levels of participation compared to non-disabled c&yp
- Lack of choice in the positive activity opportunities available to them
- Groups least likely to be participating in positive activities:
 - Learning difficulties
 - Autism
 - Multiple impairments





What disabled children and young people value about positive activities

- An opportunity to meet up with friends outside of school
- A means by which to meet with others in similar situation / similar experiences
- Social opportunities provided by the activity influences choices about positive activities
- Separate or segregated activities can be preferred
- Disabled c&yp would like more opportunities and more choice



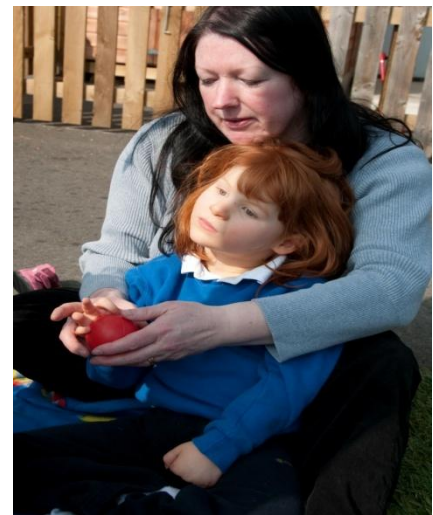
Barriers to participating in positive activities

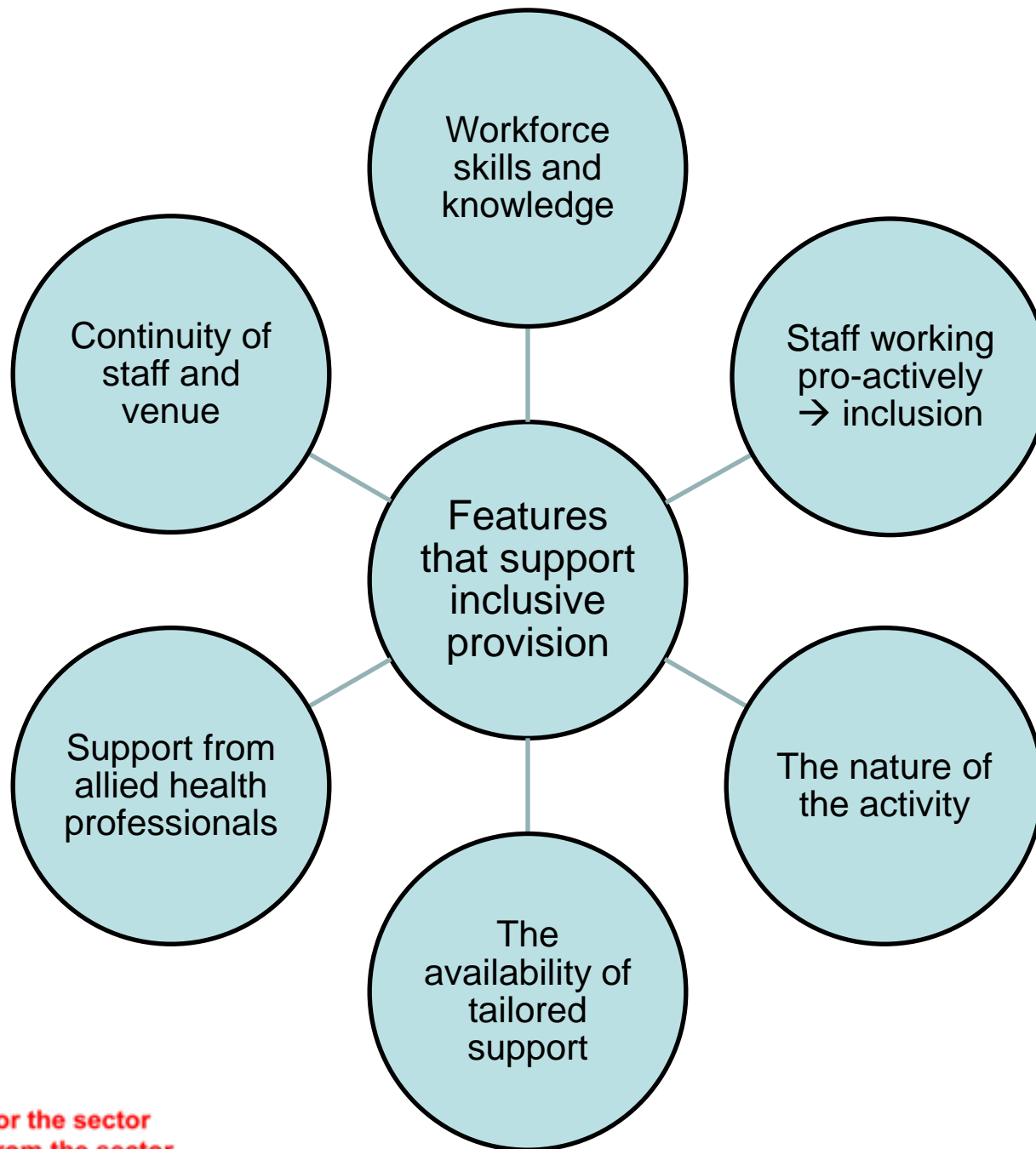
- A lack of opportunity
- Inaccessible provision
- Unsupportive staff
- Bullying and negative attitudes
- Financial costs
- Lack of information
- Older children / teenagers not always catered for



Barriers to families accessing inclusive services

- Costs
- Parents' support need
- Not having anyone to go with
- Perceptions of own competence and physical abilities
- Social skills
- Transport
- Practical issues





Policy implications

- Comprehensive information about inclusive play & leisure provision
- Cross-sector, cross agency information strategy
- Shared interpretations of ‘inclusion’ across **services** - the ‘true inclusion test’ : Are agencies supporting disabled young people to pursue their own leisure interests?

Practice implications

1. Provision & planning must promote inclusion
2. Inclusive extra-curricular activities are available via extended schools and/or in out of school clubs / play schemes
3. Learn from early years – eg Children’s Centres
4. Improve workforce skills and knowledge
5. Address environmental and practical barriers
6. ‘Access audits’ of services and community facilities
7. Zero tolerance of bullying in all settings
8. Taster sessions
9. Separate and inclusive provision
10. Provision which supports social/friendship outcomes
11. Consultation – service development and evaluation

Research implications

- Robust, national evidence on the out of school lives of disabled c&yp
- Information about the impact of policy initiatives and impact on disabled c&yp
- What works in supporting the development and maintenance of truly inclusive practices
- Comparative work on outcomes of using inclusive vs non-inclusive provision
- Arts, cultural, learning activities

Differentiation & Diversity

The Government's aim is to ensure that every child, irrespective of race, gender, background or circumstances gets the best start in life and the ongoing support that they and their families need to allow them to fulfil their potential.

Aiming high for disabled children, p 9



Considering c&yp...



What are the barriers to providing differentiated services?

BME

- Intensity not type of need is the main differentiating feature of BME families with disabled children.
- Widely held – incorrect - belief that high levels of informal family support exist in many BME communities.
- Children from some BME communities will be disproportionately affected by some disorders of genetic origin, low birth weight and psychosis.

Asylum seeking children

- Data on the prevalence of child disability in asylum seeking families are scarce
- Families may not report impairments due to their perceptions of how this may affect applications for UK residency status. Needs may therefore be hidden

What are the barriers to providing differentiated services?

Children with complex needs

- Over-represented in residential care, inc health care settings. Likely to require additional protective and procedural care.
- These children are defined by *either* a) the nature of their impairment and corresponding medical support needs *or* b) the complexity of the support arrangements they require.
- Different definitions will result in greatly differing estimates of prevalence.

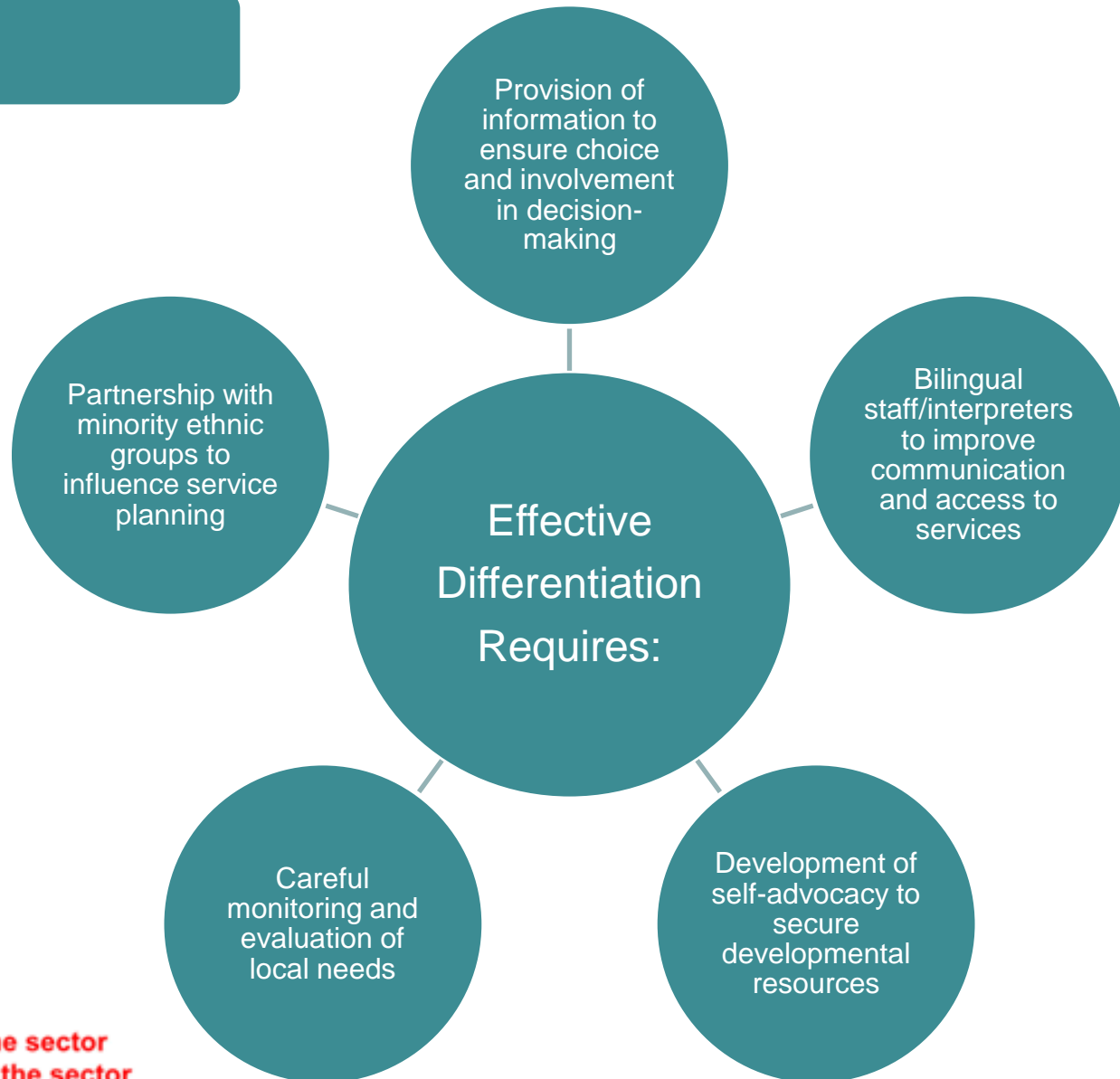
Children living away from home

- Few outcome studies available
- No views of younger children

What characterises effective differentiated provision?

What works?

BME



What works?

Asylum seeking children

- Attention should be made to the promotion and maintenance of resilience

Complex needs

- An effective key worker and case co-ordination system is essential, especially where multiple agencies are involved

Away from home

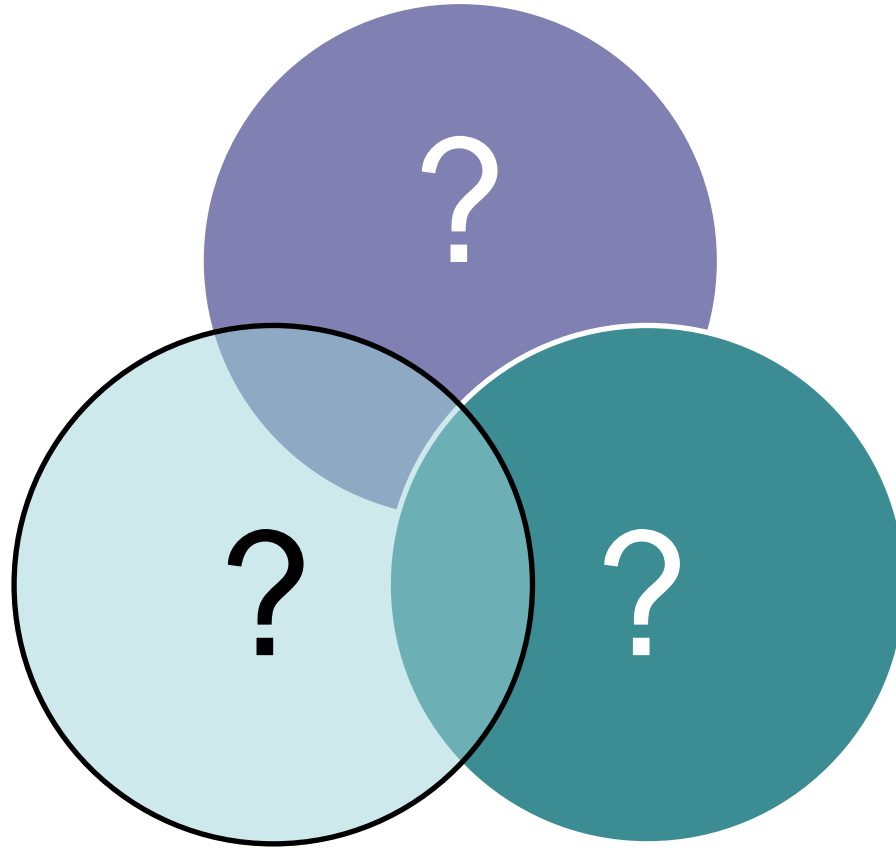
- Most parents and children want placements close to home
- Many parents believe that earlier intervention would have prevented need for an away from home placement

Implications for local service improvement

- Differentiated responses require more sensitive assessment
- The whole family and their circumstances must be considered
- We need to know more about children's views
- In most areas, outcomes are more strongly associated with social disadvantage than with ethnicity
- What BME families consider '*good practice*' is, in most cases, very similar to what parents of all disabled children consider good practice.
- greater attention for the disproportionately vulnerable—
esp to children living away from home.

Research implications :

- Government sponsored cross-sectional and longitudinal surveys designed specifically to collect data on childhood disability.
- A consistent definition of disability in different surveys.
- Intervention studies.
- More literature on **BME groups** other than South Asian children with learning disabilities.
- Studies that explore the situation of disabled **asylum seeking children** other than studies of PTSD and studies that examine resilience factors in asylum seeking and refugee children in general.
- Evidence that differentiates between the needs of children with **complex needs** and other disabled children.
- **Children living away from home**, information on outcomes, on the views of younger children and on their legal status.



Questions?