

# Early Childhood Care and Education – a Shared European Experience



BY MARIA GAIDAROVA

## MARIA GAIDAROVA

Former school head and educational innovator, presently Deputy Minister of Education and Science in Bulgaria

## KEYWORDS

#early childhood  
#good practices

Early childhood care and education is much more than just preparation for primary school. UNESCO believes it can be the foundation for emotional wellbeing and learning throughout life and one of the best investments a country can make as it promotes holistic development, gender equality and social cohesion. UNICEF thinks that quality pre-primary education sets a strong foundation for learning; helps make education systems more effective and efficient and equitable and is an effective strategy for promoting economic growth.

One of the important priorities of the Bulgarian Ministry of Education and Science is to create a quality framework

for early childhood education and development. As the Deputy Minister of Education and Science in Bulgaria, I initiated a study regarding good practices for care and assessment in early childhood in Europe. School-age prevention approaches have also been explored. The completed survey has been distributed on the ESHA's network.

Good practices and experience were shared by Croatia, Italy, the Netherlands and Scotland. Some countries implement multidisciplinary developmental assessment and diagnostics in preschool and employ a team of specialists who carry out evaluation and diagnostics. The Netherlands and Scotland use standardized methodologies. Scotland shares opportunities for fully digitalized assessment tools to facilitate assessment and to keep the research data up-to-date. In the Netherlands integrated methods are used to create the preschool curriculum. Local institutions provide conditions for early identification of developmental delay. In Italy, the first step is a report from a teacher to carry out an assessment and diagnostics. A team is formed, led by a paediatrician, that includes a neuropsychiatrist, a psychologist, and a speech therapist. In all four states, parental consent is required when the assessment is placed beyond observation and day-to-day interactions.

As part of the national policy, Scotland trains specialists in certain areas – education, impact of trauma and insecure attachment prevention. Early childhood specialists, teachers, educators, as well as other specialists work together. The teams are visited by medical workers, speech and language therapists, play therapists and school psychologists.

The number of children in the groups in Scotland and Italy are age-appropriate, with the number growing in the first three years up to 10 children per teacher. In the Netherlands, groups are formed with a maximum of 16 children. Emphasis is on learning through play and the learning environment

and materials support the development of speech, communication, and motor skills. The groups are led by pedagogical leaders, supported by pedagogical assistants, and, if necessary, speech therapists, psychologists, physiotherapists. External organizations are also involved. The curricula are diverse, they are prepared in cooperation and based on scientific research, and control over the activity is exercised by the mental health services.

The Netherlands and Italy use prevention programs based on psycho-pedagogical interaction. In the Netherlands, prevention is integrated into the curriculum. In Scotland, challenging behaviour is considered at several levels. The first step is the teacher's observation, and intervention is provided at various levels. Schools work intensively on the attitudes and values of children which are generated in the school community through various forms of social and personal learning, student councils, parent councils, conferences.

Scotland has incorporated children rights into its legislation. A curriculum has been created which promotes health and wellbeing.

Media campaigns and websites respond to problematic behaviour and risks. Scot education is underpinned by GIRFEC (Getting it right for every child) policy and legislation, complete with wellbeing indicators SHANARRI (Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible, Included). There are many practices and tools which are used effectively to identify additional learning needs and appropriate next steps for learners. The support available is highly dependent on the finances and budgets available at the time.

In Croatia, educators first turn to professional services (educator, psychologist and speech therapist) who then monitor the child and inform the parent. The educational system in Bulgaria has developed a standard for inclusive education. Support teams include various specialists at the school level and also external ones, materials provide guidelines for the prevention of violence and harassment. The shared experience stimulates the processes for forming policies and approaches for early prevention and quality child education and development.

