

The Need for Additional Support for Nursery School Children and the Reasons why It is Not Provided: A Teachers' Perspective¹

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Doc. dr. sc. Nataša Vlah²
Faculty of Teacher Education,
Rijeka
natasa.vlah@uniri.hr



Izv. prof. dr. sc. Martina Ferić³
Faculty of Rehabilitation
and Education, Zagreb
martina.feric@erf.hr

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² Nataša Vlah je zadnjih 20 godina socijalna pedagoginja, a specifična su područja njene ekspertize odgoj djece s problemima u ponašanju u redovitim i posebnim skupinama kao i suradnja i konstruktivno rješavanje sukoba kod djelatnika u odgojno-obrazovnim ustanovama. Trenutačno radi kao docentica u polju edukacijsko-rehabilitacijskih znanosti pri Sveučilištu u Rijeci gdje predaje studentima dodiplomske, diplomske i doktorske razine studija.

³ Martina Ferić radi na Odsjeku za poremećaje u ponašanju. Uže područje znanstvenoga interesa joj je preventivna znanost s posebnim naglaskom na obiteljsko okruženje i okruženje zajednice te kreiranje, postavljanje i implementacija znanstveno utemeljenih preventivnih intervencija u okruženje zajednice.

Abstract

The general objective of the research presented in this paper was to determine children's (12 to 48 months) needs for additional support (either in the form of individualized teachers' approach or additional professional support provided by a nursery school counsellor) in the day nurseries in Rijeka and perceived reasons for the lack of it, according to preschool teachers' assessment. The participants were 236 children who attended the day nurseries of the Rijeka Nursery School in the academic year 2014/15. Using a univariate analysis of the questionnaire, the nursery school teachers (N=78) assessed that 8.9 % of children were in need of additional support, receiving it partially or not at all. Teachers expressed greatest concerns regarding child's behaviour, interaction with other children and child's speech development. According to nursery teachers, children were not provided with additional support due to parents' misperception of its necessity or the shortage of nursery school counsellors.

The results of this study emphasize the importance of the early recognition of children who need additional support in all segments of development, regardless of the official decisions. Furthermore, it is important to have competent professionals as well as it is crucial to invest in nursery school teachers' competencies regarding establishing and maintaining good relationships with parents.

Keywords: children in need of additional support, nursery school teachers' perception, lack of support.

Introduction

Today's society has devoted big effort to improve children's lives on every level, from health, physical and psychological safety, and education to entertainment. Supporting children's positive development has become a priority of many societies. Social integration of children with developmental difficulties or special educational needs was carried out quite successfully in most countries.

Many countries have established legal frameworks such as standards, laws, regulations, and ordinances that regulate the area of rights, inclusion, and intervention of children with difficulties. The legal framework of the Republic of Croatia assigns additional professional support for children who have been identified with developmental difficulties classified in The State Pedagogical Standard of Preschool Education (2008, 2010). According to above cited document, children with special

educational needs are specified as: (1) children with difficulties (children with certain estimated degree and type of difficulty defined in social welfare legislation, who are included in regular and/or special educational group in preschool institutions or a special educational institution) and (2) gifted children (children who have above average ability in one or more areas and are included in nursery and preschool programs and education). If a child is diagnosed with some developmental difficulty, Social Welfare Centre has to issue an official decision. The next step is to develop an Individual Education Plan (IEP) for the child. IEP represents a guideline for everyone who works with that child. Preschool institutions in Rijeka Nursery School, in whose day nurseries this research was conducted systematically work with children who have developmental difficulties according to official decision issued by a responsible Social Welfare Centre⁴ and instructions given in the Individual Education Plan (IEP). Therefore, the term child with different difficulties manifested in his/her behaviour refers to children who have undesirable psychosocial development within their special educational needs.

In practice, however, there is a significant number of children who need additional professional support but do not have official decisions. These children are not even in the process of systematic and professional evaluation, even though their nursery teachers and/or nursery school counsellors have observed some developmental deviations in cognitive, emotional or social areas. Defining levels of needed support is the “grey zone”. Children in the “grey zone” are vulnerable because of the lack of clinical diagnosis and official documents based on which they could get additional professional support i.e., needed interventions. In that sense, children’s rights have not been protected (Langager, 2014; Rousseau et al., 2013). There are many misconceptions about the children in the “grey zone”. Therefore, there is a yawning gap in the current research regarding this group of children (Lillvist et al., cited as Sandberg, & Eriksson, 2008) although preschool teachers believe that most of the children who need some form of additional support are in the “grey zone”. Children

⁴ An Individual Education Plan is developed on parents’ or nursery school’s initiative. The child undergoes an evaluation process conducted by a multidisciplinary team consisting of a medical doctor, psychologist, special educational needs teacher, social worker and others. Afterwards, an official decision is issued. The IEP is written by the teacher and the education and rehabilitation professional (social pedagogue, special educational needs teacher or speech and language therapist). IEP serves as the basis to work with the child and his/her family. If a child does not have a decision following such an evaluation, then he/she is not eligible for professional’s services or the development and realization of an IEP. In the Rijeka Nursery School, IEPs are mostly developed for children who have developmental difficulties as a consequence of medical diagnoses (e.g. cerebral palsy, autism, visual impairment and hearing impairment).

in the “grey zone” are not formally identified as in need of special support but preschool personnel and parents believe they have developmental delay that requires adequate support in daily preschool activities (Sandberg, & Ottosson, 2010). Unfortunately, the availability of additional professional support depends on the good will and a haphazard set of favourable conditions. So far, systematic solution has not been achieved. In primary and secondary school education systems there is Ordinance on primary and secondary school education of children with disabilities (2015) which provides legal framework for required additional support immediately after the need is detected in the classroom. Meaning, teachers and school counsellors are obligated to provide additional support for all children, whether or not they have been officially designated. Unfortunately, the absence of such legal framework in preschool education widens the gap between the needs and offered support in preschool education system.

Scientific evidence highlights the importance of providing additional support to children in the “grey zone” because of their risk of undesirable psychosocial development (Andrew et al., 2008; Dunlap et al., 2006; Garmezy, 1996; Gettinger et al., 2010; Guralnik, 2006; Hawkins, 1999; Mann & Reynolds, 2006; Patel et al., 2007; Pollard & Ljubešić, 2004; Severson et al., 2007). It is evident that early internalized and externalized behavioural problems can have negative consequences, i.e., they can inhibit child’s development and progress. These problems may have long-term psychosocial consequences, such as learning difficulties and academic failure, problems in social integration and building relationships with other people, psychological problems, addictions, and delinquent and/or asocial behaviours like gambling (Colman et al., 2007; Nolen-Hoeksema, Girgus & Seligman, 1992; Perry & Carroll, 2008; Pulkkinen, 2001; Rubin et al., 1995; Shenasa et al., 2012). Therefore, it is of crucial importance to detect those behaviour patterns and factors in the environment that promote them as soon as possible. All above mentioned should be considered in order to implement comprehensive preventive interventions.

The risk factors that slow down and/or prevent positive development can be recognized on many levels. Most frequently, those are risk factors within the individual such as a difficult character, cognitive difficulties, and the lack of emotional and social skills. There are also risk factors in the child’s environment. Family, preschool institutions or schools and community are most influential (Bašić, 2000; Bašić, Ferić Šlehan & Kranželić Tavra, 2007; Hawkins et al., 2005; Kia-Keating et al., 2011; Murray, & Farrington, 2010; Youngblade et al., 2007).

The main aim of this paper is to state how many children in the Rijeka Nursery School need additional support due to different difficulties in behaviour assessed by nursery teachers.

In the research operationalization three concepts were used.

The first concept refers to the level of needed additional support with special interest in children who are in between the categories “no need for additional support” and “official decision issued by Social Welfare Centre”, the so called “grey zone”. The second one is Buhler’s pedagogical concept (1969, in Vlah, 2013). This concept discriminates two levels of additional support. On the first level, the person who teaches the child on an everyday basis in an educational group provides the additional support within his/her competencies. The second level requires teacher’ and professional’s specialized expertise (counsellor).

Figure 1. A diagram which shows in which way the concept of the need of support and the level of support complement each other. Additionally, this figure presents the population of children who are in need of additional professional support, according to their nursery school teachers’ assessment and the population of children who do not have official decision issued by Social Welfare Centre (SWC).

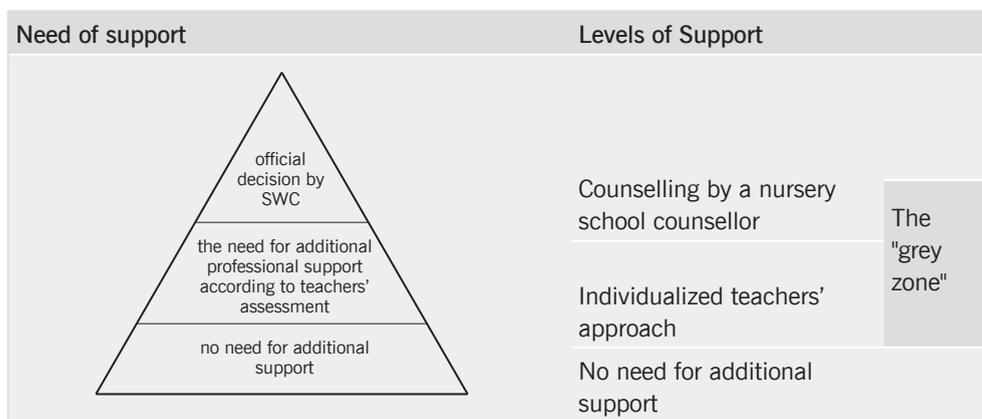


Figure 1. The relation between assessed need for support and levels of additional support

The third concept is taken from the Integral method (Bašić, Žižak & Koller-Trbović, 2005) and was used in this paper to analyse specific behaviours of children who need additional support. The concept suggests classification of assessed behaviour in three categories: (1) social developmental problems or externalized problems (aggressive behaviour, intrusive behaviour, defiance, lying, laziness, social withdrawal), (2) emotional developmental problems or internalized problems (fear, tearfulness, fearfulness, depression, jealousy, anger), and (3) disruption of habits (problems with elimination habits, feeding and eating disorders, sleeping disorders, speech and mo-

tor skill disorders, stereotypical actions, unusual behaviour). In the last 20 years, this concept was widely used in many preschool institutions in Croatia.

Objectives

The general objective was to determine children's (12 to 48 months old) needs for additional support (either in the form of individualized teachers' approach or additional professional support by a nursery school counsellor) in the day nurseries in Rijeka and perceived reasons for the lack of it, according to preschool teachers' assessment. Accordingly, the specific objectives (problems) of this paper were to determine:

- 1) The percentage of children who need additional support.
- 2) The percentage of children who need counselling service offered by a nursery school counsellor besides having individualized teachers' approach.
- 3) Specific behaviours of children who need additional support.
- 4) The reasons why additional professional help was not provided.

Methodology

Research participants

The sample of this study included 236 children who attended day nurseries of the Rijeka Nursery School⁵ in the academic year 2014/15, making up 36.9 % of the total number of children who attended the day nurseries of the nursery school founded by the City of Rijeka. The youngest child was 13 months and the oldest was 48 months of age. The average age of all children in the sample was 28 months, with a standard deviation of 8 months. According to gender, 119 (50.4 %) girls and 117 (49.6 %) boys were assessed.

The data collected were preschool teachers' estimations (N=78). The teachers' age was in the range from 25 to 61 year. The average age was 44, with a deviation of 9 years. All were female with 2 to 42 years of service, which is 20 years on average, with a deviation of 11 years.

The data represented in this research (specific aims of the paper 2 to 4) refer to children whom teachers identified as in need of additional support. Those children form subsample of this study.

⁵ In Croatia, day nurseries care for children from approximately 6 months to 48 months of age.

The subsample consisted of 21 children (8.9 % of the whole sample). In relation to the children's age, the subsample was made up of children aged from 19 to 42 months, with an average age of 33.5 months (2.8 years). Regarding gender, the subsample consisted of 17 boys (81 %) and 4 girls (19 %). Most children have attended their nursery group for 0–6 months (N=11, 52.4 %), 3 children (14.3 %) had been attending it for a year, and 7 children (33.3 %) had been attending it for two years.

There were N=11 teachers (14.1 %) who assessed children's need for additional support. The teachers were from 33 to 59 years old, with an average of 46 years. Regarding their years of service, teachers had between 6 and 37 years of service (24 years on average). Regarding their educational background, 2 teachers had secondary school qualifications (18.2 %), 7 teachers had a university degree (63.6 %) and 2 teachers (18.2 %) had a master's degree.

Measurement

For the purpose of this paper, a questionnaire consisting of 13 questions was created and given to nursery school teachers. The majority of the variables were constructed for this study, except for one which was taken from Glascoe (2002). The questionnaire was based on the three above described concepts.

Apart from the general socio-demographic information about the teachers who were included in the assessment and the children who were assessed, the questionnaire consisted of variables shown in the following table (Table 1.).

Table 1. Variables and Answer options used in the research

Variables	Answer options
Does the child have a Social Welfare Centre's decision on classification according to developmental difficulties?	Yes No, but he/she is in the process of evaluation No
Have you noticed the need for additional/individual professional work with this child or the need to adjust regular work because of one or more particular behaviours exhibited by the child in the group? (see the second paragraph of The Results)	Yes/No
Eight items given as possible answers to the question: Are you concerned about any of the following in this child? (Glascoe, 2002) (see Table 2)	Yes/No Multiple-choice question
Please state particular behaviours exhibited by this child that give you reasons to think there is the need for additional work (see Table 3)	Open-ended question

Variables	Answer options
Do you estimate the need for a nursery school counsellor's work with this child, along with teacher's additional work (see Table 4)	Yes/No
Nine possible reasons why a child does not receive additional professional help in entirety (see Table 5)	Yes/No

Procedure of data collection

The research results presented in this paper are a part of a larger research carried out at the University of Rijeka within the project *Risk levels for behavioural problems in the early stages of a child's development and professional intervention*. The main goal of the project was to determine risk levels of preschool children in the City of Rijeka in order to devise effective and need-based plans for different types of professional support that can be provided to children and their families. After having obtained the permissions from the City of Rijeka and the management of the Rijeka Nursery School, parents were given informed consent. Only 36 % of the parents signed the consent. One of the two day nursery group's teachers assessed the children by filling in the questionnaire that lasted approximately 10 minutes. Each of the two group's teachers assessed 50 % of children whose parents signed the consent. It was done in the alphabetical order which ensured random selection of assessment.

Data analysis

Quantitative and qualitative data analysis were used to realize specific objectives of the paper. Quantitative data was analysed using descriptive and nonparametric statistics (specific objectives 1, 3 and 4). In order to realize the second (2) specific objective, quantitative analysis (answers by Glascoe, 2002) as well as qualitative analysis were used (answers to open-ended questions were grouped according to the theoretical concept by Bašić, Žižak, & Koller-Trbović, 2005). In the qualitative analysis of teachers' answers to open-ended questions, authors of this paper classified content of the answers in three categories as early described. Interrater agreement was 95 %.

Research results

None of the 236 assessed children had a decision on classification based on the developmental difficulties nor were they in the official process of evaluation. Nevertheless, according to preschool teachers' assessments, 8.9 % of children (N=21) had the need for additional support because of one or more particular behaviours exhibited by the child in the group⁶.

From this point forward, the represented data will refer to children who were identified by the teachers to be in need of additional support (N=21).

Specific behaviours of children who required additional support can be seen in Table 2. The teachers expressed greatest concern about child's behaviour (more than 1/2) and the way the child socialized with other children (1/2). Child's speech (limited vocabulary regarding the age and the lack of verbal communication) also caused considerable concern to teachers (1/2). The teachers were less worried about the way the child had learned to take care of himself/herself (1/3) and his/her speech understanding (1/4). They expressed minimal concern given child's gross (1/10) and fine motor skills (1/5). Teachers indicated three additional behaviours in the "*something else*" question of Glascoe's categories (2002). For example, one teacher wrote she was worried because the child was talented at painting and there was no program in the preschool institution that would best suit her.

Table 2. Children's behaviours that aused concern to teachers (multiple-choice questions); N=21

Description of the behaviour	Yes N
The way the child speaks	10
Speech understanding	6
Fine motor skills	2
The way the child uses arms and legs	4
Child's behaviour	13
The way the child socialize with other children	11
The way the child learns to take care of himself/herself	7
Something else	3

⁶ A group of children who we call *subsample*

Table 3. Particular behaviours of children in need of individual work and/or additional professional support; N=21

Description of behaviour	Yes N
Social development problems	7
Emotional development problems	9
Disruption of habits	14

In order to gain a better insight into children's particular behaviours that require individual work and/or additional professional support, the teachers were asked to briefly describe these particular behaviours. As stated in the introduction, their answers were divided into three categories according to the model presented in Bašić, Žižak & Koller-Trbović (2005) to give valid interpretation. Table 3 shows the frequency of children's particular behaviours that caused the teachers to declare their belief that the child needs additional professional support and/or individual approach.

The data analysis showed that the most frequent behaviours teachers listed as requiring individual approach and/or additional professional support, belong to *disruption of habits* category (2/3) whereas other belong to *social development problems* (1/3).

Collectively analysing the data, it is evident that two-thirds of the children (N=14) exhibited particular behaviours in one of these areas. Disruption of habits was manifested in eight children (more than 1/3), emotional development problems were manifested in four children (1/5) and two of them (1/10) exhibited social development problems. Five children (almost 1/4) exhibited problems in two of three areas. In particular, one child exhibited problems in emotional and social development, two children manifested problems in social development and habits, and another two manifested problems in emotional development and habits. Only two children exhibited problems in all three developmental areas. According to given data, children who manifest disruption of habits often have problems in social and/or emotional development.

Additional analysis was carried out in order to determine whether children who exhibit disruption of habits require additional support provided by nursery school counsellors. The results of the chi-squared test indicated there were no significant relations between these two variables ($\chi_c=1.05$; $df=1$; $p=0.310$). Meaning, children who exhibit disruption in habits do not need additional help of a school counsellor despite teachers' opinion. As disruption of habits was indicated as the most frequent difficulty that urged for teachers' deeper engagement, its possible relation to

Table 4. The need for a nursery school counsellor's work with this child, along with teacher's additional work and the percentage of receiving additional professional help.

The need for a nursery school counsellor's work with this child, along with teacher's additional work (N=21)		
	Yes	No
	16	5
No support from nursery school counsellor	Support from nursery school counsellor	
11	5	

the length of the time spent in nursery school was tested. The test results indicated significant relations between these two variables ($\chi^2=11,57$; $df=2$; $p=0.001$) The analysis of the results presented in the contingency table⁷ showed that teachers noticed disruptions of habits, which manifested on the physical level proportionally more often in the children who had attended the day nursery for a period of 0–6 months than in the children who had attended day nursery longer than a year. This result can be explained by the fact that the newly-enrolled children had still not entirely gone through adjustment period. Meaning, they had not acquired the nursery school routine and socialization habits, and therefore requiring teachers' attention more than children who attended day nursery for at least a year.

The data in Table 4 show that 16 children from 21 in total (3/4) who needed additional support, as assessed by the teacher, required nursery school counsellor's help aside with individual teachers' approach, representing 6.8 % of all assessed children (N=236). The teachers stated that 11 of these 16 children (more than 2/3) did not receive any additional professional help, whereas 5 of them (less than 1/3) received it partially.

The possible reasons why additional professional help was not provided, according to teachers' opinion, are listed in Table 5. Observing the two middle columns (*Less likely* and *Highly likely*), it is evident that most frequent reasons were that parents/guardians believe that a child does not need additional professional help (almost 2/3 of parents) then parents'/guardians' practical organizational problems (more than 1/3) and the lack of counsellors in the nursery school (more than 1/3).

⁷ The results available upon request.

Table 4. The reasons why additional professional help was not provided

How likely are problems listed in these statements the possible reason why professional help was not provided to the child?	This is not the reason (N)	Less likely (N)	Highly likely (N)	I do not know (N)
Parents/guardians do not want to cooperate.	4	3	3	6
Parents/guardians want to cooperate, but have organizational problems (e.g. no one can bring the child to the nursery because parents are at work, no one can look after other children, etc.).	7	4	3	2
Parents/guardians estimate that help and support the nursery can provide is not sufficient.	7	2	1	6
Parents/guardians believe that the child does not need additional professional help.	2	3	7	4
There is not enough number of nursery school counsellors in the nursery.	4	2	5	5
There are no professionals in the nursery who can deal with the kind of difficulty the child has.	7	1	1	7
Nursery professional team estimates that there is no need for additional work with the child.	8	0	2	6
The child has multiple difficulties and additional professional help is provided only for some of them.	8	0	1	7

Discussion

The question of giving every child a chance for positive development and providing a comprehensive system of support for every child and his/her family has been greatly discussed in the last few decades (Ferić, 2015). Raising awareness of the scope of children who desperately need additional support, yet do not qualify for official classification according to developmental difficulties, is extremely important. Current practice should be changed in order to give additional support to all families who need it.

A meta-analysis of 40 studies conducted worldwide has shown that between 3.6 % and 57 % of children who attend nurseries exhibit problems in emotional development and behaviour (Qi, & Kaiser, 2003, Roberts et al., 1998, in Feil et al., 2005). The rather wide range in percentage can be explained by diagnostic validity and reliability based on the source of the informant (e.g. a parent or a teacher), severity

of rating scales' criteria, assessment instruments, and particular combinations of symptom and impairment measures (Feil et al., 2005).

This research has showed that the teachers who work in the day nurseries of the Rijeka Nursery School estimated that 8.9 % of the children have the need for additional support due to exhibited behaviours which deviated from children's normal development. Similarly, quantitative research which has been carried out by means of standardized measuring instruments in South East Europe, indicates a high percentage of children in preschool institutions who require additional support programmes, due to assessed risk in physiological or sociological area of development. According to Balenović (2006), there is 6.8 % children who need additional help. Bala, Golubović, Milutinović and Katić (2012) indicated 9.3 % and Mikas (2007) estimated 18 % of children who require additional help.

Evidently, nursery school teachers most frequently express concern regarding child's behaviour and interaction with other children. Similar results were obtained in the research carried out by Mikas (2007), where teachers observed concentration disruption and aggressive and delinquent behaviour as most common problems among older children who attended the institution. However, when asked to state which behaviour requires individual approach and/or additional professional support, nursery school teachers specified behaviours described as *disruption of habits*. Those include problems with elimination habits, eating disorders, sleep disorders, disordered speech and motor skills, stereotypical actions, and unusual behaviour. These results can be interpreted in two, seemingly related, ways. One possible interpretation could be that nursery school teachers are more equipped to handle children's emotional and social problems because of their expertise in that area. Another explanation could be that teachers do not perceive problems in emotional and/or social development as a serious risk for further development, depriving the child of individual approach and/or additional professional help. However, a possible explanation for these results is the coincidence of children's disruption of habits and the manifestation of social and/or emotional development problems. In an attempt to clarify these results, further analysis was carried out. The results showed that teachers deem that those children who display behaviour described as some kind of disruption of habits do not need additional support. However, these kind of behaviours were more often present in children who spent less time in the preschool institution (0–6 months) than in children who had attended it for over a year.

In relation to the total sample (N=236), the teachers estimated that around 7 % of the children were in need of additional professional support that should be provided by the nursery school counsellor, along with an individual teaching approach. The fact that, according to teacher's opinion, most of these children did not receive

additional professional support of the nursery school counsellor or they received it only partially is alarming. These results indicate serious flaws in our education system which fails to provide adequate support to children and their families. We could implicate that there are around 7% of children in the “grey zone” who are in need of additional professional help in the Rijeka day nurseries.

Furthermore, the teachers estimated inadequate upbringing as a possible cause of behavioural problems for about half of the children, citing parents’ opinion that the child does not need additional professional support as the most likely reason for its absence. These results may indicate parents’ inadequate response to children’s needs and their poor parenting skills. But before drawing any conclusions, one should always bear in mind that some teachers tend to exclusively blame children’s parents and not using the full potential of their role (Bašić, Ferić Šlehan, & Kranželić Tavra, 2007).

The fact that nursery school teachers perceive that additional professional support was not provided due to parents’ organizational problems (e.g. no one can bring the child to the nursery because parents are at work, no one can look after other children, etc.) implicates that the community has not developed a system of support for parents/families. Moreover, according to teacher’s knowledge, professional support outside nursery school was provided to only one child, less than once a month.

It is of particular concern that many nursery school teachers cannot even determine the reasons for the lack of additional professional support. Moreover, they cannot evaluate parents’ willingness to cooperate and nursery schools’ resources i.e., nursery school counsellors’ work. The data proves worrisome, partly due to nursery school teachers’ knowledge of family contexts in which children with the need for additional support and their parents live. It would be in the child’s best interest that nursery school teachers cooperate with precisely those parents, or at least that they have the information on parents’ willingness to cooperate. On the other hand, if nursery school teachers do not know which forms of professional support are available or whether certain child needs additional support, that questions the quality of their work. In other words, nursery school teachers should find an appropriate way to help parents with get additional professional support within their child’s nursery school.

It is important to point out that these results were obtained in a small sample, but the results resemble those of other studies (Bala et al., 2012; Balenović, 2006; Qi, & Kaiser, 2003, Roberts et al., 1998, in Feil et al., 2005)

For a long period of time, research results emphasized the importance of working simultaneously with children and people in their most important environment – home (Bailey et al., 1998; Ljubešić, 2013; Pećnik, & Ferić Šlehan, 2011). The re-

search results show that not enough effort is devoted to cooperation with parents. Good practice shows that enhancing nursery school teachers' competencies for work with primary caregivers results in considerably better support for both children and their parents.

Furthermore, it is important that early intervention occurs in the child's formative environment such as preschool institutions. Data shows that not only the forms of additional professional support are not available or sufficiently recognized by nursery school teachers, but parents often deny its necessity. Rousseau et al. (2013) emphasized the duty of the state to protect children who are most vulnerable, such as those who lack the necessary insurance for required help.

A progressive response in aiding these families would include early recognition of children who are in need of an individualized approach and/or additional professional support regardless of official decisions, in all segments of development. Moreover, it would be necessary to develop different forms of additional professional support that are transparent and available to everyone. It is essential to improve nursery school teachers' competencies for establishing relationships with parents. In addition, further research should be focused on the implementation of early interventions programs. It should be specified what kind of program is needed in the nursery schools, as well as determined which resources are available – financial or technical resources and human resources, i.e., nursery teachers' and counsellors' competencies.

Unfortunately, Croatia still does not have a support system for children and their families that would ensure available, high quality intervention for those in need; neither on the national nor on the regional or local level. Still, examples of good practice show that simultaneous effort made on both the individual level (child and his/her family) and the local level (local community) can produce desired results. From the perspective of a client of an institution (the child and his/her parents) and/or local community, every investment that contributes to the child's positive development is welcome.

Considering these research findings, one should be aware of the few limitations of the study such as a small sample size and an unknown internal consistency reliability in the measure subscales. A larger sample with more reliable measure instruments would ensure more validation within the research results. In future studies, a mixed method of quantitative and qualitative research would be recommended to answer the stated objectives with a higher degree of reliability.

Conclusion

The general objective of the research presented in this paper was to determine children's (12 to 48 months) needs for additional support (either in the form of individualized teachers' approach or additional professional support provided by a nursery school counsellor) in the day nurseries in Rijeka and perceived reasons for the lack of it, according to preschool teachers' assessment.

The results of this research show that there are 8.9 % of children in day nurseries of the Rijeka Nursery School who need individualized approach, despite not having an official decision on classification. Moreover, 6.8 % of these children require additional professional help from nursery school counsellor, along with teachers' individual approach, despite having received it partially, if at all.

Results indicate that there is a strong need for providing more systematic professional help for children at risk of behavioural and social problems. We would like to emphasize the importance of early recognition of children who need additional support in all segments of development regardless of the issue of giving official decisions. Furthermore, people who provide help should be competent professionals. There should be constant investment in the improvement of their competencies in order to establish and maintain good relationships with parents.

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Potreba za dodatnom podrškom djeci u jaslicama i razlozi tomu što nije osigurana: perspektiva odgajatelja

Sažetak

Temeljni cilj istraživanja rada je bio utvrditi, prema procjeni odgajatelja, potrebe za dodatnom podrškom za djecu starosti od 12 do 48 mjeseci (bilo da je podrška u obliku individualiziranog pristupa odgajatelja ili dodatna podrške stručnoga suradnika u vrtiću) u jaslicama u Rijeci te utvrditi percipirane razloge za izostanak podrške stručnoga suradnika. Sudionici istraživanja bili su djeca (N=236) uključena u jaslice Dječjega vrtića Rijeka tijekom pedagoške 2014./2015. godine. Odgajateljice su u jaslicama (N=78) primjenom univarijantnih mjernih instrumenata procijenile kako je 8,9 % djece u potrebi dodatne stručne pomoći koju dobivaju djelomično ili uopće ne dobivaju. Odgajateljice su izrazile najveću zabrinutost radi djetetovoga ponašanja, djetetove interakcije s drugom djecom i razvoja djetetovoga govora. Prema mišljenju odgajateljica, djeci nije osigurana dodatna pomoć stručnih suradnika radi roditeljevoga mišljenja da djetetu nije potrebna dodatna stručna pomoć kao i zbog toga što u vrtiću nedostaje dovoljan broj stručnih suradnika.

Ključne riječi: djeca u potrebi za dodatnom stručnom pomoći, percepcija odgajatelja u jaslicama, izostanak podrške