

## Research Snapshot

# Pathways through school for children with additional needs



## Background

A fifth of Australian children in their first year of full-time schooling experience additional health and developmental needs (AHDN) (Goldfeld et al, 2012). Without proper support, children with AHDN are at risk for academic failure and school disengagement. However, the pathways through which AHDN impact on school outcomes are not well understood. A clear framework outlining how AHDN can impact on children's school functioning is needed to guide discussion and to understand how best to support children with AHDN.

Children with AHDN are those who have or are at an increased risk for a chronic physical, developmental, behavioural, or emotional condition, and who also require health and related services of a type or amount beyond that required by children generally (Newacheck et al., 1998). Additional health and developmental needs include a wide variety of conditions, ranging from obesity and asthma to profound intellectual impairment, with a parallel broad range of possible presentations, levels of severity, and associated needs.

Further information about the prevalence and types of conditions experienced by children with AHDN is contained in another Australian Early Development Census (AEDC\*) research snapshot Children starting schools with additional health and developmental needs: results from the 2009 Australian Early Development Census.

## Aim

This research snapshot presents a conceptual model developed to assist in understanding the impact of AHDN on early school functioning. The aim of this model is to stimulate and provide a structure for discussion regarding the support of children experiencing additional needs as well as their families.

\*Until July 2014, the AEDC was known as the Australian Early Development Index (AEDI)

## Key Findings

A model for understanding the complex processes that can impact on school functioning for children with AHDN was developed. This model centres on children's ability to function within their daily environments, and the interactions between their functioning and various risk and protective factors. The concept of functioning adopted within the model aligns with the International Classification of Functioning, Disability and Health (ICF) framework for measuring health and disability (Üstün et al, 2003).

Children with additional needs may enter school with fewer of the skills and abilities that assist a successful school transition, such as physical, social, emotional, language, cognitive, and communication skills (Farrar et al, 2007), which puts them at risk of poorer school functioning. Importantly, many of the children who experience difficulty due to AHDN have not received a formal diagnosis (Lollar et al, 2012), either because their condition is not severe enough to reach diagnostic cut-offs, or their difficulties are yet to be formally identified. Irrespective of diagnosis, the needs of children experiencing AHDN and the impact of their condition on school functioning is complex and can change over time. School failure is not inevitable, and many children with AHDN experience positive school outcomes, suggesting that it is possible to intervene to promote better outcomes for these children.

Risk and protective factors that impact on the functioning of children with AHDN have been identified at the levels of:

- the individual (e.g., attitudes to schooling)
- family (e.g., family resiliency), and
- service-system (e.g., assessment procedures).

Further information about risk and protective factors is contained in a companion AEDC snapshot: Factors that help or hinder children with additional needs to succeed at school.

Additional needs are proposed to impact on four aspects of children's functioning:

- body functions and structures
- activities of daily living
- social participation, and
- educational participation.

Both the child's functional status and surrounding risk and protective processes dynamically combine to shape either positive or negative school functioning in children with AHDN (Figure 1).

## Implications

### For Policy and Practice:

The conceptual model presented in this snapshot highlights the complexity associated with AHDN and its impact on school functioning. There is a clear need for flexible and co-ordinated approaches to management and intervention that better meet the needs of children with AHDN. Currently, access to services in the educational system tends to depend predominantly on the child's diagnosis, with sometimes arbitrary boundaries around condition categories (e.g., IQ score cut offs). Interventions are also often rigidly prescribed based on specific diagnoses.

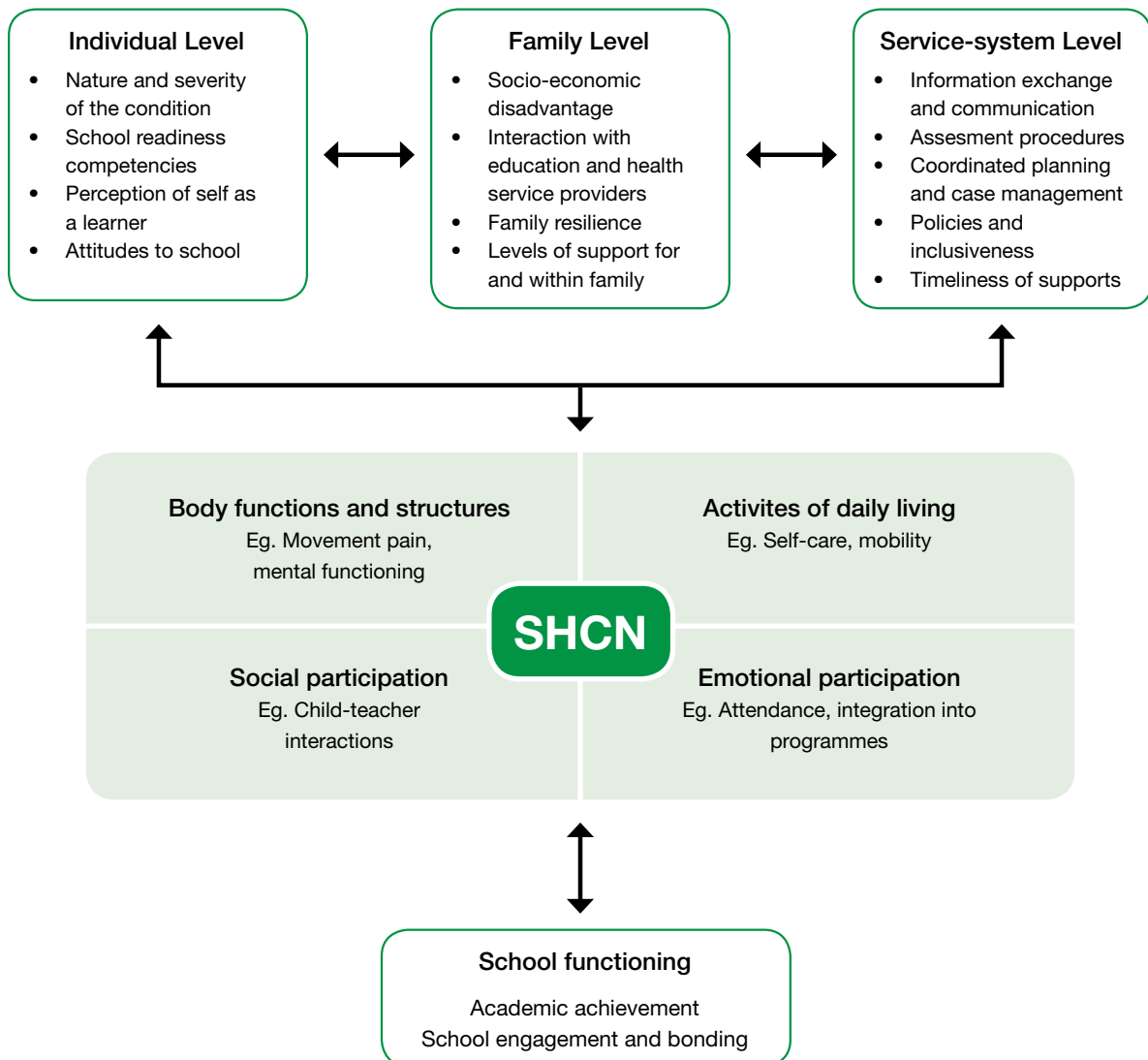
Our findings suggest that children may experience different levels and types of needs that fluctuate over time, and which do not depend on their condition or diagnosis. Rather, children's needs are determined by the impact their condition has on their functioning and their unique risk and protective factors.

### For Research:

Research has tended to focus narrowly on the association between AHDN and levels of school functioning, with limited attention given to the factors that mediate this association, such as the child's broader functional status and contributing risk and protective processes. It is clear that the relationship between AHDN and school outcomes is complex, and that to fully understand this relationship requires consideration of the many interactive processes at play that influence a child's ability to function effectively at school.

The model presented in this snapshot provides researchers with a framework that can help guide their examination of school functioning in children with AHDN. Further research into the pathways and processes by which school outcomes can be impacted for children with AHDN is needed. This research will benefit educators and health professionals, by leading to improved understanding of the needs of children with AHDN, and by highlighting possible targets for intervention. The AEDC data provides an effective means of examining the wide range of factors that contribute to school functioning in Australian children with AHDN at a population level.

**Figure 1. Risk and protective factors for school (functioning)**



## For further details

### Details of the research paper

Published article details: O'Connor, M., Howell-Meurs, S., Kvalsvig, A., & Goldfeld, S. (2014). Understanding the impact of special health care needs on early school functioning: A conceptual model. *Child: Care Health and Development*, 41(1), 15-22. doi: 10.1111/cch.12164.

References A full list of references used in the development of this snapshot is available online with this link.

### About research snapshots

AEDC snapshots provide a brief and accessible overview of research being undertaken in relation to the AEDC. The Australian Government under the AEDC programme funded this project. For access to AEDC data and further details, please visit [www.aedc.gov.au](http://www.aedc.gov.au)

## About the organisation

The Royal Children's Hospital Centre for Community Child Health (CCCH) has been at the forefront of Australian research into early childhood and behaviour for over two decades. The CCCH conducts research into many conditions and common problems faced by children that are either preventable or can be improved if recognised and managed early. By working collaboratively with leaders in policy, research, education and service delivery, the Centre aims to influence early childhood policy and improve the capacity of communities to meet the needs of children and their families.

© 2014 Commonwealth of Australia

Since 2002, the Australian Government has worked in partnership with eminent child health research institutes, Centre for Community Child Health, Royal Children's Hospital, Melbourne, and the Telethon Kids Institute, Perth to deliver the Australian Early Development Index programme to communities nationwide. On 1 July 2014, the Australian Early Development Index (AEDI) programme became known as the Australian Early Development Census (AEDC), and was launched through a new website [www.aedc.gov.au](http://www.aedc.gov.au). The Australian Government continues to work with its partners, and with state and territory governments to implement the AEDC.