

## **Research Grants Final Report Form**

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Project title: Froebelian Pedagogy in light of the Children and Families Act 2014

• Project start date: 11/01/2017

Project end date: 11/09/2018 extended to 26<sup>th</sup> September 2018

Grant reference number: RCH-17-2016

1) **Overview.** Please provide a brief overview of your research project, including the original research objectives

This project aimed to examine the extent to which holistic and ecological perspectives of child development are being adopted in special education provision, in accordance with the new Special Education Needs and Disability (SEND) policy – the Children and Families Act 2014 - and with the principles of Froebelian pedagogy. To achieve this goal, two specific aims were formulated: 1) to gather the views of parents and professionals about the new SEND policy and the changes it has introduced to provision; 2) to analyse the Education Health and Care (EHC) plans of children up to the age of 8 years old, coming from deprived areas of Greater London. To meet the first aim, two online surveys were developed to be completed, respectively, by professionals and parents. Additionally, a sub-sample of professionals and parents were interviewed in order to gather more detail about their views on the new SEND policy. To meet the second aim, we proposed to analyse the EHC plans of 40 children, which were released to us upon parental informed consent, as agreed in the ethics application. We have over-recruited on this part of the project for reasons that will be explained below.

Overall, this research has enabled the emergence of independent data concerning the *status-quo* of the introduction of the Children and Families Act 2014 as well as pioneering evidence on the quality of the actual content of the EHC plans developed for young children in deprived areas. This novel data has been analysed in light of some of the Froebelian principles, which, we argue, are aligned with the new SEND policy. We also argue that the inclusion of Froebelian principles in the training of professionals involved in the development of EHC plans for young children might improve the quality of these plans.

2) **The Grant**. Please provide a summary outlining what you have achieved during the grant period, and assessing the progress of your research in comparison to your original proposal, detailing any changes in objectives, procedures or locations.

We have gathered data and obtained results that enabled us to address our aims in a very adequate manner. We gathered the views of 349 professionals through an online survey and 3 additional interviews; we have also gathered the views of 17 parents and conducted 3 parent interviews. We analysed 69 education health and care plans, more than what we had initially proposed, allowing for comparisons to be made between plans coming from deprived areas and plans from more affluent areas, with reliable probability estimates.

It should be noted that some changes had to be made, namely in relation to the target sample of parents who responded to the survey: Our participant parents are mainly from middle-class affluent areas and we were not able to reach parents from the most deprived local authorities where we collected EHC plans, because most of these parents are not English speakers, do not understand English and/ or are not able to complete an online survey. We provide further detail about this challenging aspect of our research in the section below. However, it is important to highlight that the views of the parents who replied to the survey matched the views of the majority of the professional respondents and also matched our objective analysis of the EHC plans.

We have also achieved, through this grant, very strong and productive links with other trusts and organisations, namely Action-Attainment and Sieff Foundation, who have been very supportive of our research programme and promoting the project within their own networks. This indicates high-levels of impact deriving from our project's initiatives.

3) **Research activity**. Please detail the specifics of the research undertaken, including sources and/or methods used, and problems encountered.

In relation to the first aim, we gathered the views of 349 professionals and 17 parents through online surveys, using the online platform 'surveymonkey'. We over-recruited professionals and we under-recruited parents. The reasons for this were two-fold: one the one hand, professionals and schools became more and more interested in our research, for the impact that it may have on the development of EHC plans, which has been subject of controversy amongst professionals; we regarded this a great opportunity to expand the original sample. On the other hand, and opposite to our experience with professionals, it was very difficult to recruit parents to participate in the online survey, particularly those from the deprived backgrounds that we were examining; some of those parents do not communicate in English or do not have access to a computer, or do not find it easy to respond to an online survey. The latter was the major obstacle faced in this project that we were not able to overcome considering the budget and timeline agreed with the Trust. We believe that with an increased budget we could have reached these parents in person, provided a translator and responded to the survey *in-situ*.

Despite the changes to the original plan mentioned above, we were able to obtain very interesting results from the surveys and interviews conducted with professionals and parents. Results from the survey with professionals have been published with acknowledgement to the support from the Froebel Trust and can be summarised as follows: there is a clear gap between the ideology of the new SEND policy (which the professionals, in general, agree with), and its practical implementation (which the professionals find challenging at various levels). For example, 92% of the professionals agree with the intention to perform assessment across education, health and social care needs and 67% agree with the replacement of statements of special educational needs with education health and care plans, but their qualitative comments denote disappointment with the process and quality of the new plans (Palikara, castro, Gaona & Eirinaki, 2018). In the 3 additional interviews conducted, 3 major themes emerged: 1) 'A well-meaning policy but...' – e.g. 'I do think EHC plans are an improvement in relation to statements (...) but the working practices have not worked at all'; 2) Written only with middle-class British families in mind – e.g. 'some of the articulate middle-class families get their EHC plans much quicker', and 3) not always focusing on the child's and family's best interest – e.g. 'what if the family doesn't want to work with you?'.

Seventeen parents responded to the online survey. Some of these were still waiting for an EHC plan to be concluded for their child. Amongst those who had EHC plans at the time of responding to the survey, only 25% were satisfied with the process; the remaining 75% were dissatisfied or very

dissatisfied. When queried about the length of time they had to wait for their EHC plan, only one parent mentioned a timeframe within the 20-week maximum proposed by the government in the Children and Families Act 2014; the maximum waiting time was 3 years. When queried about how satisfied they were about the family's involvement in decision-making about the EHC plans, the majority of these parents were satisfied. Here, we highlight that the parents who responded to this survey are well-educated middle-class parents who, according to themselves, would always insist to be involved in the process. Interviews with parents resulted in three main themes: 1) 'A herculean task' – e.g. 'to get an ehc plan was a huge task and my son was the first to have one in [local authority]'; 2) a political non-egalitarian process – e.g. 'it seems to be about how well you play the game'; 3) Not holistic in practice – e.g. 'the NHS has no idea what an EHC plan is'.

In relation to objective 2, as described above, we have over-recruited, as our outreach activity in schools led to more and more professionals becoming interested in participating in the project. We regarded this fact as an opportunity of gathering a sample with stronger probabilistic power and have, therefore, gathered 69 plans – 39 of which from deprived local authorities in Greater London and 30 from affluent local authorities. We used the Income Deprivation Affecting Children Index (IDACI) to identify areas within the top 10% deprived IDACI and the low 40% IDACI, all in Greater London. There was a homogenous distribution of plans across age groups – 6, 7 and 8 year olds.

EHC Plans were analysed through thematic and content analysis, section by section. Overall, less than 10% of the plans include more than just education needs; when health needs are reported, they usually refer to the diagnosis of the child, which is illustrates an inaccurate interpretation of the focus on participation described in the policy; none of the 69 plans describes education, health and social care needs as a hole. In section A of the EHC plans (the voice of the child and family) results are similar when comparing deprived and affluent areas: 63.6% of the plans are written using the first person, however 83.2% of these do not mention how the voice of the child was accessed; 91.3% focus on both abilities and disabilities. In sections B, C and D of the EHC plans (respectively education, health and social care needs), less than 10% of the plans mention 'play' as a particular need of the child; we find these results surprising given the emphasis of the new policy on improving child participation in their daily lives; young children's daily lives are characterised by forms of play most of the time. This area of the EHC plans is still being used to describe the diagnosis of the child. Section E of the EHC plans (the outcomes for the children) was also extensively analysed. We gathered 870 outcomes, equally distributed between affluent and deprived areas. 57% of the outcomes did not specify whether they were long-term or short-term outcomes and only 19,5% specified a short-time period for achievement. The SEND Code of Practice 2014 states that the outcomes designed for children in this section should be SMART (Specific, Measurable, Attainable, Relevant and Time-framed); we have analysed all outcomes for these children according to the MSART criteria and verified that: 98% did not mention an acquisition criterion or a generalisation criterion for measurement; 96.8% were not rated as attainable, as they do not specify skills that are useful for participation; 98.4% of the outcomes do not focus on participation in a natural routine, so they cannot be considered relevant; and 95.6% did not mention a time-frame for review. There are some significant differences between local authorities: the most deprived areas have fewer outcomes specified as short-term and lower ratings on SMART criteria, when compared to the most affluent.

4) **Conclusions and achievements**. Please describe the extent to which objectives were met, the conclusions reached, the degree to which an original contribution to theoretical and/or practical knowledge has been achieved, and an assessment of the significance for other research in the field.

The objectives of our research have been met and our main aims have been addressed. The main conclusion of this research is that the implementation of the SEND policy presents various challenges and does not seem to support holistic, participation-focused and specialized provision, revealing lack of training amongst professionals involved, which results in poor quality practices; of these, the low quality EHC plans is one example. Quality issues with the EHC plans were observed across regions studied, but were significantly more frequent in the most deprived areas, suggesting that inequality of provision is still a reality. Based on these conclusions we argue that specialised training is necessary in a standardized way across local authorities and focusing on how to implement the policy's principles on the development of EHC plans. We also argue that the inclusion of Froebelian pedagogy in this training could be key to support professionals in understanding and implement holistic practices of provision.

5) **Learning**. Please provide your personal evaluation of the research project, including any lessons learned, which elements have more successful and which have been less successful.

Our team considers this project was very successful. We have addressed our aims clearly and very adequately. We have provided reliable research evidence on socio-political issues affecting the lives of young children and we have derived insights from that evidence, which can be useful for future training, provision and research. The impact of this project was quite substantial, with various stakeholders and external organisations becoming interested in partnering with our team. This is particularly true for parent-run organisations, such as *Action-Attainment* and *Me Too & Co*, who played a key-role in disseminating our project amongst parents and schools. We have also partnered with Michael Sieff Foundation, who included some of our results on their own website. There were less successful aspects, such as the lack of participants in the parent survey, however, we believe that this did not constitute a significant obstacle in the process of addressing our objectives.

6) **Ethical issues**. Did you encounter any ethical issues during the grant period, and if so, how did you overcome these?

We did not encounter any particular ethical issues. We have strictly followed the procedure stipulated in our ethics agreement with the University of Roehampton and managed to keep anonymization, confidentiality and data protection at all times. All participants were aware of our project and procedures.

7) **Implications.** What are the implications for this work? Please include details of any anticipated changes to policy and/or practice as a result of this research.

As described above, there has been growing interest on our research from external charities / organisations, such as Action-Attainment and the Michael Sieff Foundation. As a result of this, we submitted evidence (including results from this study) to the recently launched SEND inquiry by the Education Select Committee. Currently, a response from the Committee is expected. It is hoped that the evidence we have submitted to this parliamentary inquiry will lead to changes in the current

SEND policy. However, we have anecdotal feedback from professionals showing that changes are already happening at local level, with some staff actively trying to change practices, in particular regrading EHC plan development.

8) **Other funding**. Have any other funding bodies supported this research project? If yes, please provide details.

This study was not supported by any other funding bodies.

9) **Publications and other outputs.** Please provide a list of any publications which have already appeared, been accepted for publication or are to be submitted for publication and give details of any other sort of dissemination of the results of the research, which has taken place or is planned (i.e. lectures, seminars, conferences, exhibitions). Copies of publications should include acknowledgement of Froebel Trust support and should be sent as attachments with this report.

One output has been published in a scientific peer-reviewed journal:

1. Palikara, O., **Castro, S.**, Gaona, C. & Eirinaki, V. (2018). Professionals' views on the new policy for Special Educational Needs in England: ideology versus implementation. European Journal of Special Needs Education. doi: 10.1080/08856257.2018.1451310

Two outcomes are in preparation and will be submitted to scientific peer-reviewed journals this year:

- 1. Castro, S. & Palikara, O. (in preparation). The economics of special needs in young children: inequalities in current statutory provision 40 years on from Warnock [provisional title].
- 2. Castro, S, Grande, C. & Palikara, O. (in preparation). Patterns of needs in English young children with disabilities from deprived backgrounds [provisional title].

One presentation has been held at a seminar held by the Michael Sieff Foundation and can be found on their website: <a href="http://www.michaelsieff-foundation.org.uk/special-educational-needs-in-the-uk-action-plan/#seminar1">http://www.michaelsieff-foundation.org.uk/special-educational-needs-in-the-uk-action-plan/#seminar1</a>

10) **Future plans**. Please describe any future research plans in this field for those involved in the project.

Our team is very keen to expand our research to other unexplored areas, namely: the quality of provision for children who are not in receipt of an EHC plan but are on the SEND support pathway, and identification of early functioning correlates of development and disability. We also aim to invest in intervention studies, including those provide training to professionals involved in SEND provision. We would be willing to design a new research project within these broad areas, provided funding is made available.