

Facilitating children's transition to school from families with complex support needs



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Executive Summary

Background

This report reinforces the importance of the transition to school for children from families with complex support needs. For all children and families, but particularly for those with complex support needs, the transition to school is a time of both opportunity and vulnerability.

Families with complex support needs are those experiencing multiple challenges related to children, parents or the whole family. These could encompass poverty, unemployment, ill health, substance abuse, experiences of violence or trauma, poor educational outcomes, truancy, behavioural problems, isolation and/or responding to family members with disabilities or special education needs (Katz, Spooner, & valentine, 2007). The combination of challenges presents a range of stresses for these families.

In some literature, these families are referred to as vulnerable, disadvantaged, or at risk. The term *complex support needs* is used in this report as a means to avoid the stigma often associated with these other terms. The terminology of *complex support needs* acknowledges the challenges faced by families, focuses on the interaction of different problems and highlights ways in which families, with appropriate support, can draw on their own strengths to make positive changes in their lives.

Points of transition provide opportunities to establish patterns of interaction and support. The transition to school is a point where contexts and supports change, and where interactions between families and schools set the scene for ongoing engagement in education. Acknowledging that families with complex support needs often have less involvement with schools than other families, this report identifies the aspirations of participating families for their children and the practices and supports that make positive engagement with education possible.

Study aims

This research explored the experiences of families with complex support needs around the transition to school. Using methodology based on strengths-based principles, the research focused on decision points and the issues surrounding these, as well as the available supports for families and children in the year before and the year after the start of school. From this, the research identified a number of contextual factors, processes, practices and policies that provide support for families and children across the transition.

The research from which this report is drawn was undertaken in diverse areas of NSW during 2006 -2009. The starting point for the research was recognition that children starting school is a point of transition for all involved – children, families and educators. It is one of the key points at which families seek support and where a significant impact on the well-being of children (and potentially their families) can be made. The transition to school has the potential to be a time of relationship building, where families, children, educators and communities make the connections that promote positive engagement with school. Positive relationships and engagement with school are linked to the development of resilience among young people (Smart, Sanson, Baxter, Edwards, & Hayes, 2008).

There is evidence that families with complex support needs are less likely than others to have positive relationships and engagement with schools (Miedel & Reynolds, 1999; Smart et al., 2008). There are many possible reasons for this, including the impacts of issues such as cultural and language differences, poverty, unemployment, dislocation, violence, illness or disability on family functioning and confidence. Yet many families who experience these same issues do forge positive relationships with schools and their children do experience academic and social success.

Four factors make this research significant. Firstly, the strengths-based approach ensured that families were not considered in terms of the sum of their problems. Rather, both their everyday problems as well as the strengths they demonstrated in managing these were considered. Secondly, the transition to school experiences provided a focal point for interactions between researchers and families. This interaction occurred at a time when families often sought additional advice, and welcomed involvement with researchers. Thirdly, the long term interactions between families and researchers led to an in-depth understanding of the experiences of many participants and the implications of a positive transition to school for all involved. Finally, the experiences of families provided evidence of the issues encountered, as well as the policies and practices that facilitated positive and ongoing engagement with their children's education. Policy directions that build on this evidence are noted in the report.

Research questions

The key research question *How can positive transitions to school be facilitated for children from families with complex support needs?* was addressed through a series of sub-questions:

- What are the decision points, issues and concerns for families with complex support needs as their children start school?
- What supports are required, available and accessible for these families and their children during the year before school and their first year of school?
- What facilitates the transition to school for children of families with complex support needs?
- What implications for policy and practice can be drawn from this research?

Research focus and approach

Participants in the study were families with complex support needs, who had already engaged in some way with support programs offered by two of the project partners (Community Services, NSW Department of Human Services and Mission Australia), and who had a child eligible to start school during the period of the research. Participants were drawn from diverse geographical regions across NSW. Over 50% of participating families resided outside metropolitan areas, with many living in regional or rural areas. Participation in this research was offered as an adjunct to involvement in existing programs. Forty-four families were engaged in the project over periods ranging from 1-24 months.

Qualitative methodology was employed to gain insights into the lived experiences of these participants. Researchers met with family members – predominantly mothers – to conduct conversational interviews about the decisions, issues and concerns experienced by families as their children made the transition to school. The starting point for each conversational interview was what had been happening for the child about to start school and the family. In addition, researchers interviewed some early intervention/family support staff and invited teachers of some of the children who had started school to reflect on the transition and to complete a Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997).

The interviews with the families adopted a conversational framework (Burgess-limerick & Burgess-limerick, 2011) and were largely guided by the needs of the interviewees. They

focused on matters related to starting school and interactions about the child, family, prior-to-school setting, school and community. Interviews with teachers and agency staff adopted a more semi-structured approach with key questions used to stimulate discussion.

Results

An effective transition to school for children is marked by a positive approach to school and a sense of belonging and engagement. Appropriate supports and enabling practices, processes and policies contributed to effective transition experiences for children and families.

Decision points, issues and concerns

Key decision points for families included choosing the right school for their child and identifying their child as ready for school. Even when school choices were limited, families were anxious that the school environment should recognise their children's strengths and unique qualities. Families prioritised children's happiness at school, regarding this as a key element in educational success. All families regarded 'a good education' as essential for their children's later life success and many held high aspirations for positive educational outcomes. Children's readiness for school was often considered in terms of the school – that is, families sought a match between the qualities demonstrated by their child and the school they would attend. Particularly when children had special education needs, there was concern that they could be ready for one school (such as a special school), but not ready for a different school (such as the local mainstream school). Anxiety was increased when children were unable to attend the preferred school.

Key issues identified by families were their own (or other family members') experiences of school and the legacy of these, and the shifts in parenting that they reported occurring across the time of transition. Families often confronted their own experiences of school as their children made the transition. Where these experiences had been less than positive, parents feared that the same would be the case for their children. This was particularly so when children were identified as having challenging behaviour. The issues identified had both positive and negative elements. For example, several parents reported reasonably positive experiences of their own schooling as well as positive attitudes towards being involved in their children's education. Similarly, several parents appreciated the changes in

parenting that occurred as children started school, particularly the involvement of other adults in their children's lives. The ways in which educators responded to families and children across the transition was a major factor in determining how these issues influenced interactions.

Key concerns for families related to their children's behaviour at school, family engagement with school, and the financial pressures of having children at school. Families were often unsure of the expectations of school and concerned that their child might be labelled as disruptive or unruly. Overall, parents supported the notion of being engaged with the school, but many were unsure about how this might happen. While a number of parents commented on the easing of financial pressures with not having to pay fees for preschool or child care, several also noted the considerable costs involved in equipping children for school.

Support

All of the families involved in the project had sought support in some way. Many relied on the informal support of family and friends; others were socially isolated and turned more to agency support. For many families, the combination of informal and formal support was critical to their well-being. The availability and accessibility of support varied considerably across communities. In some communities, support was limited or intermittent. This was particularly so in some rural communities, where professionals travelled from major towns. Professional support was valued when it focused on meeting the identified needs within families and on building skills and capacities within those families.

In addition to the transition to school, many families and children experienced a transition across support services. This transition was rarely smooth or continuous. Indeed, there was a great deal of discontinuity in support during the period of transition to school. This caused high levels of anxiety and stress for many families. For example, targeted early childhood programs ceased as children started school. These included family support and parenting programs as well as services for children, including those with special needs. A further factor influencing the availability of support was the shortage of specialised, professional staff and high levels of staff burnout and turnover among those who were available.

Enabling practices

While practices that supported the positive transition to school of children from families with complex support needs varied according to the family and their context, common elements of enabling practices were that they:

- provided access to information about school;
- assisted in making positive connections with schools;
- promoted the development of family skills and abilities;
- acknowledged transition as a time when families seek, and are responsive to, input; and
- recognised challenges that reside outside the family, for example in the neighbourhood or community.

Key practices identified by families and staff throughout this project were:

- professionals acting as mediators for families in interactions with schools and other services;
- providing information for families about schools, processes for enrolment, services and support available within schools; and
- transition to school programs.

Enabling processes

Processes that supported the positive transition to school of children from families with complex support needs were those that emphasised:

- continuity of support across the transition to school;
- alignment of funded programs across the transition, including alignment of funding and access to support;
- cross-sector collaboration;
- support that changes as family needs change;
- service flexibility and responsiveness to each family's changing situations;
- adaptation of services and support to local contexts; and
- professional development opportunities for staff.

Enabling policies

A number of enabling practices and processes contribute to enabling environments. When these are combined with enabling policies, a range of positive outcomes for children, families, educators and other professionals, as well as the community, are identified. In this context enabling policy:

- recognises transition to school as a time of additional stress for families;
- provides access to appropriate transition programs for children and families;
- facilitates the development and implementation of programs that are built on family strengths and responsive to their needs;
- supports programs that promote family-school partnerships;
- retains provisions for support across the transition to school;
- promotes availability of a range of complementary, yet coordinated, supports for families over the transition period;
- facilitates the implementation of flexible and responsive support programs, adapted for family and community contexts;
- recognises the key roles of a professional, multi-disciplinary workforce in supporting families at times of transition; and
- promotes transdisciplinary, multi-agency collaboration in family centred practice.

Conclusion

The transition to school is a time of opportunity – a time of change as children start school and as families seek and are responsive to intervention. It is also a time of vulnerability, where children and families move from known contexts and supports to unknown contexts, often without continuity of support and with the need to access different services, different people and different experiences. Recognising the strengths that children and families bring with them to school, using this as the basis for promoting positive engagement at school and maintaining a network of coordinated support delivered by well-qualified professionals will do much to build on the opportunities and reduce the vulnerabilities encountered.

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Glossary

AEDI	Australian Early Development Index
Brighter Futures	An early intervention program funded by Community Services, NSW Department of Human Services. The program is delivered by both Community Services and a range of non-government organisations across NSW.
Complex support needs	Families with complex support needs are those experiencing multiple challenges involving children, parents or the whole family. These challenges could encompass poverty, unemployment, ill health, substance abuse, experiences of violence or trauma, poor educational outcomes, truancy, behavioural problems, isolation and/or responding to family members with disabilities or special education needs.
DET	New South Wales Department of Education and Training
Disability	The term disability includes children with an intellectual disability, physical disability, vision impairment, hearing impairment, language disorder, mental health conditions or autism.
Community Services	An agency of the New South Wales Department of Human Services. At the time the research commenced, this agency was referred to as the Department of Community Services. In this report, the recent change in name is reflected.
Early Intervention (EI) Services	Services provided for children under the age of 5 years with developmental disabilities, including special education, speech pathology, physiotherapy, occupational therapy and family support.
Educational transition	A time when people change their role and status within or between educational settings.
Educators	As a collective term, includes teachers as well as other staff employed in education services, including prior-to-school settings.
Family	Any group of people connected through kinship or relationship and committed to providing emotional and economic support to each other.
Family engagement in education	The interaction of the family with their children's educational context. This can include helping children with homework, engaging in discussions at home about school, and adopting the language and expectations of school at home. It can also extend to the families adopting active roles in their interactions with schools and teachers.
First day of school	The actual day children start school.
Integrated services	Services that are connected in ways that create a comprehensive and cohesive system of support.

Glossary (continued)

P & C	Parents and Citizens Association.
Prior-to-school	The years before children attend school. Prior-to-school services include preschool, child care, family day care, occasional care and playgroups.
School readiness	A multifaceted concept incorporating children's readiness for school, ready schools as well as the family and community supports required to promote children's optimal development and learning.
SDQ	Strengths and Difficulties Questionnaire
SEIFA	Socio-economic indexes for areas. Developed by the Australian Bureau of Statistics from 2006 Census data.
Social capital	Cultural resources and interpersonal bonds shared by community members.
Special education needs	Educational needs of children with learning difficulties, a behaviour disorder and/or a disability.
Strengths-based approaches	Strengths-based approaches acknowledge challenges, recognise strengths, and respect the experiences and efforts of families as they identify and work towards their own goals for change.
Transition to school	The process of starting school. Transition to school occurs over an extended period of time as children engage in a range of experiences that promote their learning, development and wellbeing. The transition process starts when parents and children begin to think about, and make decisions related to, school. It concludes when children and families feel secure and accepted within the school environment.
Transition to school program	A set of activities or events for children starting school and their families.

Background

Much has been written recently about the importance of a positive transition to school for all children, but particularly those described as living in disadvantaged circumstances, including children of families with complex support needs. A number of consistent messages are identified from the extensive and expanding research base. The key messages related to the transition to school and supporting families with complex support needs are summarised below. The interconnection between these areas provides the rationale for this research project.

Key messages from recent research: Transition to school

1. The transition to school is an important time for children and families. Children's positive engagement with school, their construction of school identities and the relationships they develop all have an impact on their later school success. For families, the transition to school can be a time when assistance is sought and likely to be accepted.
2. Transition to school involves much more than measures of children's readiness for school.
3. Children's perspectives of school and their place within school impact on their educational engagement and outcomes.
4. There is consistent evidence that growing up in disadvantaged circumstances can have a negative impact on children's development and educational outcomes, including their transition to school.
5. Family engagement in education is identified as a key factor in children's school success. Just as important as what families do to support children at school is their rationale for this. Much of the pattern of family engagement is set when children make the transition to school.

Key messages from recent research: Families with complex support needs

1. Any one family may be described in many different, sometimes even contradictory ways, depending on contexts and circumstances. Analysing the risk and protective factors associated with particular families provides one basis for the development and implementation of intervention and prevention programs. Considering the family in a range of contexts and focusing on strengths is an important alternative.

2. Strengths-based approaches require recognition of strengths as well as respect for experience and efforts to help people identify and work towards their own goals for change.
3. Programs that have been successful in engaging families with complex support needs have built upon existing family strengths, avoided judgemental approaches, recognised families as experts on their own experiences and needs, and promoted positive relationships as the core to effective parenting.
4. The nature, type and extent of the support accessed by families with complex support needs influences the transition to school.
5. Workforce issues have the potential to undermine the effectiveness of programs for families with complex support needs.

Transition to school

Transition to school marks a major change for children and their families. With appropriate information and support, many children and families find the start of school a time of excitement (Dockett & Perry, 2005a). However, for some, this can be a challenging time as they change their roles and identity, and seek to understand new people, environments and expectations, within the school culture (Dockett & Perry, 2007; Griebel & Niesel, 2002). There is consistent evidence that making a positive start to school is important for later social and educational outcomes (Alexander & Entwisle, 1998; Duncan et al., 2007; Reynolds & Bezruczko, 1993). Children who experience a positive start to school are well positioned to make the most of the educational opportunities they meet. Conversely, children who experience academic and social difficulties in their start to school are likely to continue having problems throughout their school careers, and often into adulthood (Birch & Ladd, 1997; Blair, 2001).

The transition to school is a process that occurs over an extended period of time as children engage in a range of experiences that promote their learning, development and wellbeing. The transition process starts when parents and children begin to think about, and make decisions related to, school. It extends beyond the first day of school and concludes when children and families feel secure and accepted within the school environment. The process of transition to school is essentially a period of adjustment, as people change their roles and relationships with regard to school. Transition programs – a series of events or activities

for children starting school and their families – can support the transition process by providing opportunities to build and maintain relationships among children and adults (Dockett & Perry, 2007; Pianta & Kraft-Sayre, 2003).

This definition of transition is drawn from ecological theory (Bronfenbrenner & Morris, 1998) which emphasises the ways in which contexts as well as the people within them, impact on experience. Ecological models situate responsibility for an effective transition to school with all involved in the process. This broad view recognises that there are many contributors to transition experiences and that the perspectives and expectations of each of these contributors shape those experiences in some way.

Discussions of transition often refer to children's readiness for school. While children's skills and abilities do contribute to their adjustment to school, recent research also highlights the importance of school factors as well as family and community supports in understanding notions of readiness (Centre for Community Child Health, 2008; Dockett & Perry, 2009). Many factors influence the process of transition to school, including the readiness of children, families, schools and communities. Over-emphasis on any one of these factors has the potential to ignore the interaction between factors and the broader processes of relationship building which are the core of a positive transition to school (Ackerman & Barnett, 2005; Farrar, Goldfeld, & Moore, 2007).

Transition to school involves a wide range of people. A great deal of research has investigated transition to school from the perspectives of teachers and parents. Until recently, there has been less research focus on children's perspectives of this transition. There is now strong evidence that children experience the transition in different ways from adults and that those experiences influence the nature and outcomes of the transition (Broström, 1998; Clarke & Sharpe, 2003; Corsaro & Molinari, 2000; Dockett & Perry, 2005b; Einarsdottir, 2010; Griebel & Niesel, 2003; Perry & Dockett, 2005; Peters, 2003).

The importance of considering children's perspectives of the transition to school is twofold. On one hand, the increasing recognition of children's rights to contribute to discussions and decisions about matters that affect them, derived from the Convention of the Rights of the Child (United Nations, 1989), and recognition of their competence as participants and social actors (Christensen & James, 2008; Greene & Hill, 2005; Prout, 2003) underpins strategies to actively seek, listen and respond to children's perspectives. On the other hand, there is evidence that children's feelings about school

predict engagement and educational outcomes (Hauser-Cram, Durand, & Warfield, 2007).

Children's experiences at home and in their community influence their preparation for, transition to, and engagement in, school. Some experiences, such as attending high quality preschool, have been linked to children making a positive start to school (Magnuson & Shager, 2010). Other experiences have been linked to problematic engagement with schools, including the transition to school. For example, growing up in poverty can restrict children's access to resources and learning opportunities, and the anxieties associated with living in poverty can impact upon the nature and quality of interactions between parents and children (Magnuson & Shager, 2010; Ryan, Fauth, & Brooks-Gunn, 2006; Smart et al., 2008). This, in turn, can impact on how children and parents engage with school. Living in poverty can also mean that children have limited access to high quality prior-to-school services. Poverty remains pervasive in Australian society, with estimates that almost 15% of children live in families experiencing poverty. This figure is much higher for Indigenous communities, where almost half of the families are estimated to be experiencing poverty (Hilferty, Redmond, & Katz, 2009).

High rates of poverty or other problems within communities limit both the supportiveness and the stability of those communities. Where this occurs, communities may find it difficult to promote a sense of belonging and provide resources to support families. Communities with strong levels of social capital (Putnam, 2000) are well placed to provide a buffer as well as support when families experience challenges. In communities where there are few connections among members, and where resources and supports are limited, families often feel isolated and overwhelmed. Links between the collective well-being of communities and children's engagement with school are noted in results from the implementation of the Australian Early Development Index (AEDI) (Centre for Community Child Health and Telethon Institute for Child Health Research, 2009).

While there is a clear connection between family resources and children's educational outcomes, evidence from the Effective Provision of Pre-School Education (EPPE) project in the UK indicates that family experiences and interactions can be more important than the resources of families. Siraj-Blatchford (2010, pp. 466-467) concludes that "families do have the capacity to support their children in different ways when they have the will, the means and an understanding of the need to do so".

Once children start school, one of the major sources of support is family engagement (Barnard, 2004; Henderson & Mapp, 2002). How families engage with school and education can vary considerably, from helping children with homework, discussing school at home, and adopting the language and expectations of school at home, through to adopting active roles in interactions with schools and teachers. The nature and extent of family engagement in schools is influenced by factors such as socio-economic status, cultural and language diversity, community expectations and parent or family characteristics. In some communities, families are hesitant to become involved in schools, particularly if the culture of school is different from that of the home (Huntsinger & Jose, 2009). In other communities, economic stress and neighbourhood tension contribute to low levels of family engagement. Greater family engagement is reported when parents feel confident about their ability to influence what happens at school, and when they have high expectations for their children (Hoover-Dempsey et al., 2005; Lareau & Weininger, 2008; Lee & Bowen, 2006). The responsiveness of schools and teachers themselves and their willingness to recognise many different forms of engagement is an important factor in promoting family engagement (Peters, Seeds, Goldstein, & Coleman, 2007).

Positive home-school relationships are important at all times, but particularly so at points of educational transition, when patterns of interaction are established (Duncan & Brooks-Gunn, 2000; McTaggart & Sanders, 2003). This is particularly the case for families who are positioned as outside the mainstream in some way, including families with complex support needs (Homel et al., 2006; Lahaie, 2008; Shepherd & Walker, 2008; Sims, Guilfoyle, Kulisa, Targowska, & Teather, 2008).

Despite the recognised importance of family engagement in schools, there is evidence that many families do not actively engage with schools, often for a range of structural or psychological reasons (Brooker, 2003; Christenson, 2004). Lack of engagement in school does not necessarily reflect disinterest. Indeed, many families report a willingness to be involved that is thwarted by not knowing how to achieve this, or feelings that their involvement is not valued (Bernard van Leer Foundation, 2007).

The transition to school is an important time for all children and families. How families and children navigate the transition process has implications for their ongoing engagement in education and for children's educational outcomes. For many families – notably those with complex support needs – the transition to school is one of many situations to be managed. The nature of support available at this time can have an impact on the outcomes of the transition to school.

Families with complex support needs

Families with complex support needs have been described as

...experiencing multiple problems, which might be problems for the parents, for the children, or for the whole family. Examples... include problems relating to housing, finances, ill health, childcare, substance abuse, family violence and abuse, poor educational outcomes, truancy. (Katz, et al., 2007, p. 33)

It is often the combination of problems that presents challenges and stresses for these families. In some literature, these families are referred to as vulnerable, disadvantaged, or at risk. However, there is often a level of stigma associated with these labels. The terminology of *complex support needs* acknowledges the challenges faced by families, focuses on the interaction of different problems and highlights ways in which families, with appropriate support, can draw on their own strengths to make positive changes in their lives.

It is possible to identify a number of factors – both biological and environmental – that increase the likelihood that families will experience a range of contexts that pose risks for children's optimal development (Bowes, Grace & Hayes, 2009). Included in most lists of risk factors are child health; maternal age, education and mental health; single-parent household; and family income and environment (Japel, 2008). While recognising and responding to risk is important, an exclusive focus on risk factor analysis has the potential to ignore holistic approaches that recognise social and cultural contexts as influential in determining developmental outcomes. It can also promote a deficit, rather than strength-based view of families.

Strengths-based approaches are based on recognition of strengths, as well as respect for experience and efforts, to help people identify and work towards their own goals for change (Munford & Sanders, 2003). Respect and collaboration are essential elements of strengths-based approaches – respect for individuals and families, and a commitment to building collaborative relationships based on rapport and trust (Berg & Kelly, 2000; MacKinnon, 1999). This approach is summarised by Beilharz (2002, p. 4) as “a way of working with people, based on social justice values, that recognises people's and communities' strengths and facilitates their application to achieve self-determined goals”.

Several programs with a focus on the transition to school have been developed to support families with complex support needs. The rationale for many of these is twofold: supporting parents impacts on children through improved parenting and family functioning (Kane, Wood, & Barlow, 2007); and the complex nature of challenges for these families means that single focus programs are not relevant (Day, 2008; Katz et al., 2007). Programs that have been successful in engaging families with complex support needs have built upon existing family strengths, avoided judgemental approaches, recognised families as experts on their own experiences and needs, and promoted positive relationships as the core to effective parenting (Davis, Day, & Bidmead, 2002; Holzer, Higgins, Bromfield, Richardson, & Higgins, 2006; Katz, 2007).

In addition, successful programs have noted the significance of the following in promoting sustained benefits:

- transition points, such as the transition to school, as times when people seek assistance and when they are responsive to help (Duncan & Brooks-Gunn, 2000);
- focus on both child and family (Homel et al., 2006);
- continuity of support (Brooks-Gunn, 2003);
- collaboration and coordination across multiple sectors, including health, education, parenting and welfare (Guenther & Millar, 2007); and
- integrated programs (Ramey, et al., 2004).

In several instances, the vehicle for successful programs has been a focus on parenting, complemented by the flexibility to explore issues and the interaction of issues relevant to each family (Davis et al., 2002; Homel et al., 2006). For example, one focus has often been on responding to children's challenging behaviour, a factor associated with both families with complex support needs and children's problematic engagement with school (Ghate & Hazel, 2002; Sektnan, McClelland, Acock, & Morrison, 2010).

Other programs have recognised the challenges of the transition to school for children with special education needs, particularly as families and children experience changes in the nature and extent of support as children move from prior-to-school to school settings (Bentley-Williams & Butterfield, 1996; Hoysted, 2010; Rosenkoetter, Hains, & Dogaru, 2007). Reviews of the support provided for children with special

needs and their families conclude that continuous support is a major factor in promoting positive educational engagement (Guralnick, Neville, Hammond, & Connor, 2008; Janus, Cameron, Lefort, & Kopechanski, 2007).

Recent trends in the development and delivery of programs for children and families have highlighted the potential of integrated services – services that are connected in ways that create a comprehensive and cohesive system of support. This approach recognises the diversity of families and family experiences and the importance of families accessing support that is relevant, timely and coordinated (Centre for Community Child Health, 2009). Overseas experience with integrated services indicates a range of positive outcomes for both children and families (Dunst & Bruder, 2002; Young et al., 2006).

One of the major challenges to the development of integrated programs of support for families with complex support needs is the presence of a suitably qualified workforce to deliver them. This is particularly an issue in rural and remote areas, but also can be a problem in areas designated as disadvantaged (Hilferty, et al., 2009). Collaboration across services is difficult when there are few staff, when staff turnover is high, and when workloads prevent all but a focus on the most urgent situations.

Establishing the nature and extent of the workforce engaged with families with complex support needs is not easy. Often, the same families are engaged with many different professionals across different sectors. One of the key elements in promoting collaboration and cooperation is to identify who the workforce is, what overlaps and/or gaps exist, and ways in which professionals in different sectors can work together (Fisher, Thomson & valentine, 2006). Once identified, efforts to develop relationships between services and to promote a team approach to working with families and children are at the core of effective integrated programs. In this process, the background, experience and leadership qualities of the staff involved all impact on the quality of integration achieved (Choi, 2003). A recent report from Children in Scotland (2008, p. 1) notes that "...many of those working with the youngest and the most vulnerable children and families are often the least well-qualified and least well-paid of the workforce". Efforts to promote integrated services and support for families requires at the very least an increased understanding of who is involved, what services are accessible and what others are doing.

Some integrated services support a transdisciplinary approach to working with children and families, where a range of professionals work together, with common goals integrated across settings. This approach requires that collaborating professionals work in harmony with each other and with families, as they establish and work towards common goals (Davies, 2007; Moore, 2006).

The promotion of integrated services and transdisciplinary approaches, where a range of people and resources are involved in working for the benefit of a specific child and family is at the heart of ecological models of service delivery. These models acknowledge that the wellbeing of individuals is dependent on the complex interactions that take place within family, school and community contexts. Each of these contexts is influenced by broader social, cultural and political factors (Bronfenbrenner & Morris, 1998).

Families with complex support needs and the transition to school

It is well established that a range of challenges is experienced by many families. Sometimes, points of transition contribute to these challenges; at other times experiences over the transition signal positive changes. The transition to school offers both opportunities and challenges as families navigate different institutions, personnel and supports.

The transition to school is a time of opportunity – when children, families and educators recognise the changes as children start school and as families seek and are responsive to intervention. It is also a time of additional vulnerability, where children and families move from known contexts and supports to unknown contexts, often without continuity of support and with the need to access different services, different people and different experiences. Children and families forge new identities across the transition to school – as school students and as families of school students. New identities bring new challenges in relation to expectations and experiences. Recognising the strengths that children and families bring with them to school, using this as the basis for promoting positive engagement at school and maintaining a network of coordinated support will do much to build on the opportunities and reduce the vulnerabilities encountered.

There is evidence that families with complex support needs are less likely than others to have positive relationships and engagement with schools (Miedel & Reynolds, 1999; Smart et al., 2008). There are many possible reasons for this, including the impacts of issues such as cultural and language differences, poverty, unemployment, dislocation, violence, illness or disability on family functioning and confidence. Yet many families who experience these same issues do forge positive relationships with schools and their children experience academic and social success.

Research Focus and Approach

This research aimed to explore the experiences of families with complex support needs around the transition to school. Using methodology based on strengths-based principles, the research focused on decision points and the issues surrounding these, as well as the available supports for families and children in the year before and the year after the start of school. From this, the research identified a number of contextual factors, processes, practices and policies that provide support for families and children across the transition.

The key research question: *How can positive transitions to school be facilitated for children from families with complex support needs?* was addressed through a series of sub-questions:

- What are the decision points, issues and concerns for families with complex support needs as their children start school?
- What supports are required, available and accessible for these families and their children during the year before school and their first year of school?
- What facilitates the transition to school for children of families with complex support needs?
- What implications for policy and practice can be drawn from this research?

This research used qualitative methods to gain insights to the experiences of families with complex support needs and their children starting school. Data were generated from a series of regular discussions with project participants over a period of time before and after children started school. Discussions were recorded, transcribed and analysed using existing and emergent themes. In addition, a series of case studies was constructed to ensure that contextual factors were considered in analysis and to provide a narrative account of the experiences of several families. Discussion themes and case studies were used to inform the development of a conceptual model outlining policies, practices and processes to support children and families making a positive start to school.

The interviews with the families adopted a conversational framework (Burgess-limerick & Burgess-limerick, 2011) and were largely guided by the needs of the interviewees. They focused on matters related to starting school and interactions about the child, family, prior-to-school setting, school and community. Interviews with teachers and agency staff adopted a more semi-structured approach with key questions used to stimulate discussion.

Conversational interviews are outlined by Burgess-limerick and Burgess-limerick, (2011, p. 64) as a means of

gaining access to an individual's interpretations of their personal experiences ...In this model of interviewing, the agenda for each interview is established interactively. A recursive process is used in which the researcher's questions build upon responses to previous questions, stories told by the same participant in previous interviews... Each individual and situation produces a unique agenda which allows the researcher to ground the research completely in the experiences of the participants.

Participants

Participants in the project were families who were already engaged in some way with programs offered by project partner organisations – Mission Australia and Community Services, NSW Department of Human Services – and who had a child eligible to start school during the time of the study. Many, but not all, families were involved in the early intervention program *Brighter Futures* (NSW Department of Community Services, 2007).

The families were identified by partner organisations as having a range of complex support needs. (These needs were not disclosed to the researchers by those organisations.) Families were invited to participate – the only connection between existing programs and the research project was the invitation to participate. In this way, participation was offered as an adjunct to involvement in existing programs. The aim of this approach was to collaborate with partner organisations and to build on the strengths of existing relationships. Similar approaches have been used in other projects (Cortis, Katz, & Patulny, 2009; Watson & Tully, 2008; Watson, White, Taplin, & Huntsman, 2005).

Project participants included one adult member of each family. Forty-four families were engaged at various times throughout the study, in six diverse locations across NSW, Australia. Locations encompassed metropolitan, regional and rural areas.

Other project participants included children, teachers and staff from partner organisations. Discussions with these participants were generally one-off events. Most conversations with children occurred in their homes, in the company of parents and/or other family members. Discussions with teachers and organisation staff occurred in their workplaces at times suitable for all involved.

Where possible, researchers engaged in informal conversations with children about their experiences starting school. Sometimes, children were prepared to draw their experiences as they engaged in these conversations. In all instances, researchers relied on advice from parents about the appropriateness of engaging with children. In a number of situations, parents advised against conversations with children. Reasons provided included parental judgements that the child had limited communication skills, often related to special education needs or physical disabilities, or that children did not wish to talk with researchers. As a result, data contributed to the research by children is sparse. In respecting these reasons for excluding children, the project conformed to ethical requirements that young children only be invited to participate in research with parental consent.

Eighteen school teachers participated in researcher interviews about children's adjustment to school and completed Strengths and Difficulties Questionnaire (SDQ)[1](Goodman, 1997) for these children. This number reflected both parental permission for researchers to approach teachers and teacher willingness to be involved in the research.

Six staff from partner organisations involved in supporting these families and children participated in discussions about general service availability and delivery.

In summary, participants were:

- 44 family members;
- 10 children starting school;
- 18 Kindergarten teachers; and
- 6 staff from partner organisations.

Characteristics of participating families

Each of the families participating in the research was unique. Their experiences reflected a wide range of complex support needs within their specific contexts. Researchers relied on families sharing what they thought was relevant to their context and the research. Issues raised by families included:

- supporting children with a disability;
- experiencing chronic poverty/unemployment;
- responding to violence/trauma;
- experiencing isolation (geographic, social, cultural);
- children exhibiting behavioural difficulties;
- experiencing issues related to drug /alcohol use; and
- experiences of and with family members who experienced mental health/ dependency issues.

Even when these descriptors were used, it was noted that each family experienced these issues in different ways. The contexts in which they lived also impacted on their experiences. For example, a number of families included children with special needs. While this is in itself a major factor for the family, it was not necessarily sufficient for the family to be nominated as having complex support needs. However, when the family lived in a rural or isolated context, had limited support, included more than one child with special needs, or experienced other complexities, that family was considered to have complex support needs.

Many families experienced layers of complexity. This is illustrated in brief descriptions of study participants from several families.

One family consisted of a single mother with 3 adult sons, a 6-year-old son, and a daughter who was eligible to start school in 2008. The mother experienced depression and was supported by a case worker, a friend and her children. She had lived in a rural NSW city for the last 25 years and described herself as having had poor experiences at school.

A man and his wife had full-time care of their granddaughter, though they were not legally recognised as her guardians. The man originated from the Philippines but had lived in Australia for some time. The granddaughter had Down syndrome and was enrolled at a special school. The grandfather had recently retired from his job to care for his granddaughter. He had also recently undergone heart surgery. His daughter, who retained parental custody of the granddaughter, experienced a number of mental health issues and was an intermittent presence in their lives.

Another family consisted of a mother and her 10 children. Even though the mother was separated from her partner, domestic violence remained an ongoing issue in her life. She had no family support. The school-aged children attended the same school as the mother had attended as a child. She had negative memories of school and her experiences. Some of her teachers remained at the school and she believed that her children were experiencing the same difficulties she had had. Her children were frequent truants. Her attempts to change schools and provide a fresh start for the children had been unsuccessful. One of her sons indicated that he ran away from school in order to make sure his mother was safe during the day.

A single mother of 7 children aged from 2-25 years moved with her children to a regional area to access emergency housing. She had no family or social support. Her son, aged 5 was diagnosed with Oppositional Defiance Disorder, possibly with ADHD. He had a 'phased' transition to school, attending for 2 hours per day.

A mother and her daughter lived in Western Sydney. A son, aged 9, was removed several years previously and had since been adopted by another family. His mother saw him on supervised visits. The mother had a complex and conflictual family history. Her stepfather remained an ongoing source of support for both mother and daughter. The daughter's biological father was an occasional presence, but the mother regarded herself as having sole responsibility for her daughter. The mother experienced bipolar disorder and was on a methadone program. She had strong connections to the local area, but found it difficult to live there and wanted to move away, partly to make sure her daughter had more positive experiences than she had had.

The major data generation method in the research was ongoing conversational discussion between family members (predominantly mothers, Table 1) and teams of two researchers about the transition experiences for the family and child. All discussions were held in locations chosen by participants. With permission, discussions were digitally recorded and then transcribed for analysis. Where possible, the same team of researchers remained involved in discussions with families over the life of the research.

Table 1. Family members participating in the study

Participants	
Mother	41
Father	1
Aunt	1
Grandfather	1

Initial meetings introduced the research and outlined what was involved. In general, these meetings were considered

introductory and not recorded as data. In some instances, family members attended these meetings accompanied by a representative from the partner organisation with whom they already had a relationship. Family members used these staff as mediators, seeking information from them and channelling their willingness to be involved in the study, or not, through these personnel.

Where family members agreed to participate and provided ongoing consent for this, follow-up discussions were arranged. These were held in locations of the participants' choosing, such as the facilities of the partner organisation, coffee shops and other public spaces, as well as participants' homes. Some discussions were conducted with partner organisation staff in attendance; others were conducted through interpreters. Some families invited partner organisation staff to early discussions, but once relationships had been established, chose to meet with researchers without these staff.

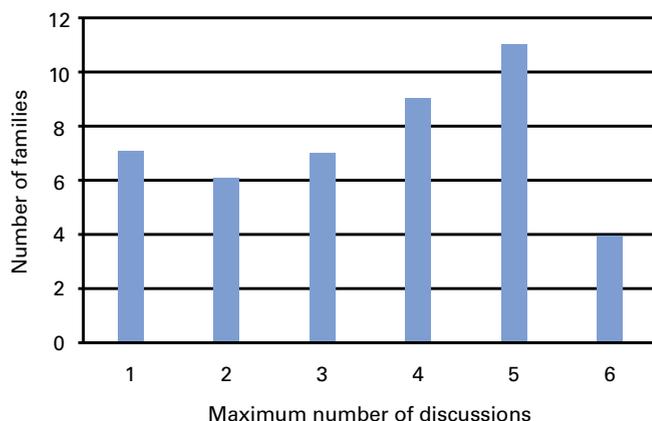
Discussions with family members:

- explored the experiences of families and children across the transition to school;
- focused on family strengths as well as challenges;
- examined the ways in which families used these strengths to support their children as they make the transition to school; and
- discussed ways in which families engaged in their children's school education.

The length of time family members stayed involved with the study varied. Some family members met with researchers only once and then either declined further discussions, or did not arrive at follow-up meetings. Some families made multiple appointments, but did not attend any of these. Some family members missed several early attempts at meeting, but then maintained ongoing involvement with the study. The number of meetings with individual families ranged from 1 to 6, over periods of 1 to 24 months.

Initially, the research design aimed for three discussions with families: before children started school; at the time children started school; and after children had been at school for several months. In practice, the number of discussions was determined jointly by the family and the researchers. Figure 1 reflects family involvement across the number of meetings.

Figure 1. Family participation in discussions



Overall 70% (n = 31) of families participated in at least three discussions. Of these, 24 families (55%) participated in discussions beyond this, including four families who met with researchers on six occasions. Thirty percent of families (n = 13) engaged in less than three discussions, with seven families (16%) participating in one discussion only. Table 2 represents the ongoing participation of families.

Table 2. Ongoing participation in discussions

Discussions	Families participating in discussions over time	
	Number	Percentage
1	44	100
2	37	84
3	31	70
4	24	55
5	15	34
6	4	9
Total number of discussions		155*

* Of this total, 116 discussions were recorded as data, including 5 of the initial discussions

As indicated in Figure 1, the number of ongoing participants declined over the time of the study. While this trend mirrors other studies (Moran, Ghate, & van der Merwe, 2004), the continued involvement of 70% of families in at least 3 discussions indicated a high level of retention and engagement in the project. Continued participation suggested that families found these meetings to be positive experiences. This was confirmed by a number of mothers, with comments such as:

I like it when you come down... it gives me someone to talk to and it's good. It's nice to be able to talk about my child without thinking about all the bad things he does.

Several strategies were used by the research team to promote the continued engagement of family members. These included:

- providing time for families to decide about participation;
- targeting the focus in interviews to issues of relevance to the family involved;
- where appropriate, providing general support and advice. Examples included discussions of transition to school programs, ways to approach schools and experiences to support children making the transition (Dockett et al., 2009);
- working through case workers and other partner agency staff according to the preference of each family;
- recognising family strengths in interviews with families;
- maintaining contact with families – often through agency staff;
- focusing on the what was happening for the whole family; and
- providing a small payment (\$20 voucher) for families at each discussion.

Characteristics of research sites

Participant families resided in several diverse communities across NSW. Forty-one of the 44 families identified their residential area. From this, it was possible to consult Socio-Economic Indexes for Areas (SEIFA) [2] data and to consider the relative measures of disadvantage related to these areas. The SEIFA data are rankings of geographic areas using scores generated from characteristics of people living in that area, as reported on the 2006 Census. In each of the indexes, relative disadvantage is associated with a low number or decile. Table 3 reports the total number of participant families who lived in areas associated with high levels of disadvantage, according to each of the SEIFA Indexes (deciles 1-4). From this, it is concluded that the majority of participating families lived in areas characterised by relative socio-economic disadvantage.

Table 3. Indexes of relative disadvantage for participating families

SEIFA Indexes*	Number and percentage of families (n=41)
Index of Relative Socio-Economic Advantage and Disadvantage. Deciles 1-4	30 (73 %)
Index of Relative Socio-Economic Disadvantage Deciles 1-4	30 (73%)
Index of Education and Occupation Deciles 1-4	35 (85%)
Index of Economic Resources Deciles 1-4	27 (66%)

**based on collection district data*

Australian Early Development Index (AEDI) [3] community profiles report proportions of children considered to be developmentally on track, developmentally at risk, and developmentally vulnerable across five domains. The AEDI classifies children who score in the lowest 10% of the AEDI population for any given domain as developmentally vulnerable; children who fall between the 10th and 25th percentiles of the AEDI population are considered to be developmentally at risk. Children who are ranked above the 25th percentile are considered to be developmentally on track (Community Child Health and Telethon Institute for Child Health Research, 2009).

AEDI community profiles provide information about the proportions of children rated as developmentally vulnerable on two or more domains for the areas in which participating families lived. Across Australia, the average proportion of children classified as developmentally vulnerable on two or more domains is 11.8%; across NSW, this average is 10.3%. Almost half of participant families (49%) lived in communities where the proportion of children considered to be developmentally vulnerable on two or more domains exceeded this average.

When considered alongside information about specific family challenges, this information illustrates some of the additional complexity experienced by participating families related to the communities in which they lived.

Data and analysis

Data for this project consists of:

- 116 transcripts of discussions with families over the year prior to the child starting school and into the first year of school;
- 13 detailed case studies constructed from these discussions;
- conversations with 10 children;
- drawings completed by some children;
- interviews with Kindergarten teachers in relation to the transition experiences of 18 children ;
- SDQs completed by teachers for 18 children;
- discussions with staff (n=6) from partner organisations and service providers in three of the research sites; and
- records of research team meetings and reflexive discussions around the project.

Data analysis was a multi-layered process that involved the following stages.

- Initial reading and re-reading of transcripts.
- Identification of text to be analysed further. In order to preserve the contextual elements of data, segments for analysis were retained as complete statements.
- Categorisation of data. Data segments were labelled and grouped by category, then examined and compared at both the within category and between category levels.

- Aggregation of categories to form themes. Themes were considered as a set of relationships between categories. The themes adopted reflected those identified in previous research and literature, as well as emergent themes.
- Saturation was reached when themes were fully developed and new evidence did not prompt the inclusion of new themes.
- Interconnections between themes were identified and used as the basis for the development of a conceptual model of relationships.

One of the challenges in the categorisation of data is that contextual elements are removed when categorical order replaces chronological order (Maxwell & Miller, 2008). To provide a counter to this, a series of case studies was constructed, with the aim of retaining the unique context of each case and exploring key relationships within the narrative of the case. Where relevant, data contributed by children, Kindergarten teachers and staff from partner organisations were included in case studies.

The diversity of the experiences and backgrounds of the research team (encompassing education, social work, family support, social justice, service provision and participatory research with children) ensured that multiple perspectives and issues were addressed throughout the research, but particularly in data analysis (Dockett et al., 2009).

Ethical considerations

The study reported here was granted ethics approval by the Human Research Ethics Committee of the University of Western Sydney (Protocol Number HREC 06/123). It has been carried out with particular reference to the requirements of this committee and the *National Statement on Ethical Conduct in Research Involving Humans 2007* (NHMRC, 2007).

Decision points, issues and concerns for families with complex support needs as their children start school

This section addresses the research question: *What are the decision points, issues and concerns for families with complex support needs as their children start school?*

All families make decisions as their children start school. The two mentioned most often by families in this project related to the school children would attend and children's school readiness. These decisions were influenced by parent/ family experiences of school and issues about the nature of parenting at the transition to school. Concerns were expressed about the impact of children's behaviour on the transition process and outcomes, the nature of family engagement with school and the financial pressures associated with school enrolment.

Choosing the 'right' school

Families regarded it as their role to make decisions about the 'right' school for their child. This decision was influenced by the location and safety of the school, and by perceptions of the responsiveness of staff they met at the school. The reputation of the school within the community and among family and friends also influenced this decision.

A mother visited all the schools in her local area, finally deciding which school would be best for her son. She explained her choice:

As soon as I walked into that school I liked it. I never even thought about putting them up here at [school A] because it's just yuk. You just look at it and you just go [shudder] no. [School X] was our first choice... It's a bigger school but it's excellent. Then I tried for [school Y], which was second choice and [school Z]. But I went to [school Z], as soon as I walked through I just felt like I was in jail or something. It was just all bars and gates and stuff. This one [school Y] is all open ... they've got the biggest playground in the world... Their classes are small, they don't have many children. Most of the kids there are pretty good...

Some families had little choice about the schools their children attended – for example where there was only one local school, school zones were enforced or where there were limited places within specialist services. In spite of these constraints, the same concerns about the school being 'right' for their child were expressed by these families.

Having chosen the school, several families expressed concern about their child gaining enrolment at that school. This was particularly the case for children with special education needs seeking a placement at a special school. Several of the families who had a child with special needs were not offered enrolment at the school of their choice. Decisions for these families included seeking enrolment at the local mainstream school, applying for enrolment at a different special school, and moving to a different area in order to access another school. Each of these options involved complex planning and negotiation. Parents were very appreciative of the support offered by staff from early childhood services, early intervention programs and schools, but still found this to be a lengthy, complicated and often demoralising process.

A young boy had been attending a preschool program for children with autism. His mother was keen for him to attend a local special school which had an autism class, but the son was not offered a place at this school. His mother had sought advice from the Early Intervention teacher and staff in the relevant school district offices about other possible placements. As a result, she and her family were in the process of moving to a suburb in which another special school was located. While the mother appreciated the support she received, she was frustrated that there were not sufficient local places for students in need of special school enrolment and that she only seemed to be able to access schools if the Early Intervention teacher or district office staff made an appointment for her. She commented the *school won't talk to just parents*.

Transition programs

The presence, or absence, of transition to school programs influenced some parents as they made decisions about which school their children would attend – or even if they would be attending school that year. Transition programs were an important point of contact for families. Through these programs, parents accessed teachers and other professionals in schools, including counsellors. This provided parents with a legitimate reason to visit the school, ask questions and seek information. This was important for a number of parents who felt uncomfortable simply 'calling in' to a school.

Transition programs were particularly important for children with special needs. These often involved activities over an extended period of time and involved a range of people. Where families knew which school their child would attend, transition programs provided opportunities to build relationships and to become familiar with the school. Where families were not certain of the school their child would attend, particularly special schools, the period of transition was more complicated, with children and parents unsure of which transition program to attend, or which schools to approach.

Teachers described transition programs as important opportunities for informal communication with families as well as getting to know the children and their capabilities. For some teachers, transition programs were times for assessing the capabilities of children; for others the role of these programs was primarily familiarisation – as children got to know about school and those at the school got to know children and families. Both teachers and parents described the most effective programs as times to get to know each other and develop the partnership that would best support the children starting school. The least effective programs left children and parents feeling daunted by the prospect of starting school and concerned about the judgements they felt had been made by those running the programs.

Effective transition programs provided an impetus for families and schools to make connections and build relationships, focused on the child starting school. Parents were often seeking information, willing to visit schools and talk with teachers – confirming transition times as particularly appropriate for interventions. When school staff made efforts to reach out to families and engage with them through transition programs, a positive tone was set and ongoing interactions were promoted.

School readiness

Parents' perceptions of children's readiness influenced decisions about when children started school as well as the school they attended. The major factors influencing decisions about readiness were age and social development. Underpinning considerations of readiness was awareness of the importance of a positive start to school and desire for children to feel comfortable at school.

One mother noted that she had made the decision to keep her son at preschool rather than send him to school as soon as he was eligible.

I was thinking that he probably wouldn't be ready. Because socially I thought he would really struggle because other kids, he just didn't think about them at all. Kids can be ready academically but if they struggle socially then everything else kind of suffers. If you're not happy at school because you can't make friends at school or whatever then that can suffer.

Some parents were certain that their children were ready for school. As evidence, they referred to children's confidence, skills and abilities, particularly as demonstrated at preschool. Other parents were unsure about readiness and sought advice from a range of people. Where advice was contradictory, they experienced confusion and sometimes distress about making the best decision about starting school.

In one of the participating families, a daughter was eligible to start school in 2008. Her mother was unsure about the daughter's readiness for school and sought advice from the preschool and first year of school teacher. Their advice was contradictory, with the preschool teacher suggesting that the child had some social problems, and the school teacher indicating that she was ready for school. The mother was not certain about the nature of the social problems identified by the preschool teacher. The mother's case worker recommended that the daughter start school, as a strategy to alleviate some of the mother's ongoing depression. However, the mother was concerned that sending her daughter to school was something she was doing for herself, rather than for her daughter. She was concerned that her daughter would be placed in a difficult position coping with school – something she had experienced with her older children.

Children's expectations of readiness of school referred mainly to age. Several children echoed the sentiment, *I'll be a big kid when I turn 5*, and others expected to attend school as soon as they turned 5. Teacher perceptions of children's readiness highlighted both age and social/emotional maturity, which was itself often associated with age.

Parent/family experiences of school

For some participants, concern about school related to their own or other family members' experiences of school. Parental experiences varied considerably, with some recalling positive experiences, others recalling negative experiences and still others being non-committal in comments such as *school was OK*. These experiences had an impact on how parents felt about children starting school and in how they approached the transition to school.

Families wanted their children to be happy and safe at school. Several parents reported that they – or other family members, including older children – had not been happy and safe at school. Parents reported concerns about bullying, with some concerned that their child would be bullied and others concerned that their child would be a bully. Having older siblings attend the same school sometimes provided a buffer for children as they started school; at other times the reputation of the older child was considered detrimental to the child starting school.

Several parents indicated that their children would attend the same school they had attended as children. For some, this was a positive chance to re-connect with the school and any teachers they knew who were still there. For others, the fear that their children would be judged through their parents was cause for great concern.

One mother had lived in the same rural town all her life. Her son was about to start kindergarten at the same school she had attended as a child. Her own school experiences were not remembered fondly, and she was concerned that some of the teachers who had taught her, and who were still at the school, would be thinking of her as they made judgements about her son. In their conversations, some teachers at the school noted that they based their interactions with children starting school on knowledge of the families, including having taught some of the parents.

Changes for parents

Just as children experience a change in identity as they become a school student, so too do parents experience a shift in identity as they become parents of a school student. All parents wanted the best for their children, yet several described feelings of guilt as they noted that they were not

able to provide the support and resources they believed would help their child at school. Homework was raised as an issue by several parents, accompanied by comments that while they may be able to help children in Kindergarten, they did not expect to be able to offer help much beyond this. Homework also caused tension in several families, where parents felt pressure to make sure children completed homework.

Commenting on the homework of her son, who was in Kindergarten, one mother noted
I don't function well with homework...I think he's got enough homework, and then the next thing I know, he's got a project as well...I hate homework...it's not homework for them...it's a project for Mum...I've had enough homework! You've got to read the words every day and the homework...I've got to sit next to him while he does his homework, I can't go wandering around because I'm always wanted...I get upset if he doesn't take pride in his work, because he doesn't take pride in his work, he's in a hurry. And then he's got his reader. He didn't need the project!

Several parents also indicated that their own wellbeing impacted on their children and their starting school experiences. Parents who reported feeling tired, exhausted, confused or unwell indicated that it was hard to put a lot of energy into supporting their children.

One mother's depression seemed to make it difficult to both seek a range of information about whether or not her daughter should start school and then to make the decision. As she struggled with this, she resisted telling her friend or her case worker because she did not think they would approve of her even considering not sending the daughter to school: *[I'll] try not to get stressed out. That's why I won't tell my friend what I'm planning to do.*

Relationships between children and parents changed across the transition to school. Some parents reported difficulties 'letting go' as children started school and spent large amounts of time with other adults outside the home; others reported that their relationships with children had become more positive because there were other adults playing important roles in the lives of children.

Associated with this was an implicit assumption about what 'good' parents of school students did and the support they provided. Throughout discussions, parents referred to what the school expected of them – for example in getting children to school, ensuring that they completed homework and wearing the school uniform. Some parents expected that they would not be able to meet the expectations of the school and would soon be labelled as 'non-cooperative parents'. For example, one mother's experiences with her older children convinced her that her younger son would be a truant, and that she would be unable to change this. In her mind, she had already been labelled a 'bad parent' and saw no way for this to change.

Parental knowledge

Some parents indicated that their knowledge of their children was sometimes recognised and valued by schools, while others felt that their knowledge was discounted. Where children had special education needs, the knowledge base of the parents about the child and the nature of the disability often exceeded that of teachers. A specific concern for families of a child with special education needs was how their knowledge could be used to access the best support for their child.

There was considerable anxiety for parents about assessments undertaken to determine children's access to additional support and resources. This was the case for many parents, but particularly those whose children had special education needs. While working to build up children's capabilities, parents were aware that support was most likely to be directed to those children who performed poorly on such assessments.

A young boy had been diagnosed with Down syndrome. He was to attend the local mainstream school, hopefully with support from a teacher aide. To be eligible for this support, he needed to be assessed as having at least a moderate intellectual disability. As a result of assessment, he was judged to have a severe intellectual disability. While his mother was pleased that this made him eligible for additional support, she was upset about the process and the label:

...for his whole life we've been trying to build him up and working on his strengths and everything and then all of a sudden it's the exact opposite, you want him to perform badly and you don't want him to do this and you have to tell them about all of his weaknesses and so it's the exact opposite to what we've been doing for the last five years with him.

Concerns about children's behaviour

Some parents were particularly concerned about the impact their children's behaviour would have on their transition to school.

After a marriage break-up, a mother and her children had moved to a large regional city to access emergency housing. Her sixth and second youngest child was diagnosed with Oppositional Defiance Disorder a few months before starting school. The mother was actively seeking community support, but was unable to find any existing support group. She talked of starting one herself. The son's challenging behaviour meant that she, and the other children, engaged in limited activities outside the home. The son started school on a 'partial enrolment', attending for a few hours only each day. A condition of the enrolment was that the mother was to be available, on-call, at any time the school rang to collect her son if an incident occurred. There was no additional support for the boy, or the Kindergarten teacher, at the school. The mother commented, *I'm happy to do it [collect him after 2 hours]. I want to have it that way because it's really important that he gets off to a good start, or as best we can.* She was disappointed that support had not been forthcoming from the school, but was reluctant to demonstrate her own need for support because of her fear: *there's always this thing in the back of your mind that if you're a parent melting down, is someone going to come along and take your children away? Like I don't want to say anything because they'll think I'm a terrible mother and take them away from me...*

This was not the only child for whom behaviour was a major concern. Some parents described children's challenging behaviour in terms of a specific disability; for others, such behaviour existed outside a specific disability or diagnosis. Parents of children with challenging behaviour felt that they were being judged as inadequate parents by professionals. Some parents of children with disabilities felt that their children would access more assistance if their child also displayed challenging behaviour.

School adjustment data, as rated by teachers using the SDQ (Goodman, 1997), was available for 18 children (17 boys, 1 girl). These indicate that 40% of the children were categorised within the borderline or clinical range on incidence of hyperactivity (for example, children not being able to sit still, not concentrating, easily distracted) and

conduct problems (for example, expressions of anger, destruction of property, non-compliance) for the boys in this group. This is higher than expected with Australian norms suggesting 10% of children score within each of the borderline and clinical ranges (Hayes, 2007).

These data need to be interpreted with caution, because of the small sample, teachers' background knowledge (they were informed of the purpose of the study and knew they were commenting on children from families with complex support needs) and the gender imbalance. Even with these cautions, it seems clear that parental concern about children's behaviour impacting on their transition to school was confirmed by teachers.

Children, too, commented on behaviour. Several of the boys identified as having challenging behaviour were aware of this and the implications of this. For example, one boy indicated that he had spent an extra year at preschool *because I was mucking up*.

Engagement with school

The nature and frequency of family engagement with school depended on several factors, including the location of the school; how comfortable parents felt at school; their own (and other family) experiences of school; the purpose of engagement; and expectations about their role at school. Some parents became active participants – for example by joining the parent association or helping in the classroom; others dropped off and collected children, but rarely moved beyond the school gate. Several parents were unsure of how to approach teachers, and waited for teachers to approach them. Some parents were advised that their presence at school would be disruptive for the children, or that there was no provision for younger siblings to accompany parents on visits to school.

In other cases, parents found visits to the school unsettling. When one mother visited the school, she was struck by the ways in which teachers talked to some of the children, and became convinced that her daughter *would be always in trouble*. Her advice was *you must never enter the Kindergarten kid's class if you've got one that might be going the year after* because it was upsetting to imagine children being the target of the teacher's negative attention. Other parents were more positive in their discussions about engaging with teachers and schools, noting that teachers often provided high levels of help and support for children and sometimes, for parents.

One young lad attended a special class within a mainstream school. When his mother's now adult children had been at school, she had been involved in the P&C and school council. She undertook the same roles with her son's school, explaining *...I always enjoy it. Others say 'Oh why do you do so much at the school for?' and I said 'Because I get something out of it as well'. I've met so many really nice people by doing it and also you've got an insight into how things run in the school, which I found interesting...*

Financial pressures

Some families were pleased that the cost of preschool had been removed when their children started school. However, few considered education to be free, and several reported seeking additional financial assistance to cover the costs of school uniforms and equipment. Part of the impetus for ensuring that children started school with the 'correct' uniform and equipment came from the parents' desire for children to fit into the school context and not to stand out or appear different.

When her son started school, the mother had to cover the costs of having two children at school. With the help of a local NGO, she and her husband had accessed the services of a financial planner. Having identified a disposable income of \$7/fortnight, the mother was anxious about meeting the costs of school shirts (\$17 each) and jumpers (\$40) as well as shoes, schoolbags, lunch and the extra costs involved in excursions. She started saving in July for the costs of uniforms in January. When the school changed the uniform, she was upset that costs were increasing. Directing money to school expenses also meant that as a family, there was limited access to other activities. For example, the boys were unable to play soccer or other sports, because of the cost involved. To increase their income, the partner worked longer hours, and as a consequence, spent less time at home. The mother believed that this contributed to her son's challenging behaviour.

Across several families, the costs associated with school and of accessing specialist services to promote a positive start to school (such as parenting programs, private therapy when no publicly funded service was available and even preschool), added considerable stress to families.

Overview of the decision points, issues and concerns for families with complex support needs as their children start school

All families make decisions and encounter issues and concerns as their children start school. What often differs for families with complex support needs is the nature of the choices available for them, the information or resources they access to inform their decisions and the confidence with which they approach decisions. These differences are also related to the nature of the complex support needs experienced by families and the communities in which they live.

Decisions about which school children would attend and when they started school were influenced by perceptions of readiness and the school experiences of family members. Some parents described how their own well-being impacted on children's experiences as well as their changing roles as parents. Concerns about the impact of children's behaviour on the transition process and outcomes, the nature of family engagement with school and the financial pressures associated with school enrolment were evident.

There was considerable variation in how families approached the decisions related to children starting school. Regardless of the process of selecting a school, all families wanted their children to have the best education possible. Many families sought advice about their children starting school – often focused on children's perceived readiness. In most cases, this advice was useful and important; in other cases it was contradictory and confusing. Some of the contradictory advice seemed to be symptomatic of the lack of communication across the prior-to-school and school sectors, where professionals in different areas were working on different expectations and perceptions. The openness to advice at this time affirms times of transition as an appropriate time for intervention.

Families with a child with special needs were surprised to find that placement in a special school was not automatic and that additional funded support for the child in school was also not guaranteed. Navigating different systems and requirements, such as visiting schools and having children assessed, resulted in considerable stress for some families.

The experiences of parents and other family members influenced children's transition to school – both how they were introduced to the school and how families managed the experience. Parents drew on previous parenting experiences with older children at this time of transition. The issue of reputation was consistent for a number of families. There was concern that the child starting school would be labelled by teachers, often through reputation or first impressions. This was particularly the case when children demonstrated challenging behaviours, or where family history at a particular school was not positive.

Families were aware of changing roles and responsibilities as children started school. Several parents were eager to be involved in schools, but unsure how to promote this. As a result, they waited to be asked and when invitations were not forthcoming, assumed that their involvement was not needed. There was awareness of changes in the parent-child relationship as children started school.

For many families, the transition to school was a time of additional stress: financial, social and emotional. Despite this, overwhelmingly, parents wanted their children to have positive experiences of school – often more positive than their own experiences had been.

Supports for families and children before school and in the first year of school

This section addresses the research question: *What supports are required, available and accessible for families with complex support needs and their children during the year before school and the first year of school?*

All of the families involved in the study had sought support in some way. There was a combination of support from formal and informal networks; each was important for families. Transition was a time when formal support was sought and when existing support was reassessed, changed and sometimes withdrawn.

Informal support

A number of families drew upon informal support from relatives and friends.

At the time that the young boy was to undergo tests related to Down syndrome, his father was away. The mother's parents offered to accompany her and the boy. The mother was very appreciative of their support, commenting *I was a mess that day, I was in tears all day and I was in tears afterwards and when I got the results I was in tears. It was really awful, I was quite shocked, because I sort of feel that I'm a strong person... for someone who doesn't have any support or something like that it must be awful to have to go through it by yourself...*

Mostly, informal support was regarded as helpful, though some was perceived as judgemental and negative. In some cases local, informal support was linked to reputation; how family, friends and community regarded parents or children impacted on the informal support available. In other situations, those seeking support also provided support for other relatives and friends who had complex support needs.

Several families resided in locations that were removed from their informal networks. Families who had recently moved to an area often described a lack of social support and the challenges that imposed. For example, one mother became involved in the study after she approached a local agency seeking help. She described herself as *trying to get some support networks, because I'm here on my own, no family, friends; just me and my lot of children*. For some families, the combination of social isolation and complex support needs was overwhelming.

For families with a child or children with special needs, informal support was valued at critical times, such as the point of diagnosis or assessment, and during periods of

transition, including the transition to school. Some of the most valued support was derived from people who had already experienced those critical times.

One young boy was diagnosed with a developmental delay before he started school. His mother was adamant that the best support came from other parents who had experienced the challenges of seeking support for their children. She commented *professionals are not going to necessarily come out and tell you all the information you want unless you push to find that out or you speak to other Mums who are in the same spot ... it's only after you've been through it that you start getting a bit more clued up.*

Formal support

Families involved in this study were recruited through the partner agencies – Mission Australia and Community Services, NSW Department of Human Services. In some instances, families accessed additional formal support outside these agencies, depending on the nature of the complex support needs within the family. Across all families, formal support was highly valued. As well as access to specific support programs (such as *Brighter Futures*) and services (such as speech therapy, occupational therapy, behavioural support and parenting support), families valued the relationships they developed with staff and the support they received through them.

The forms of support provided by agencies varied. In some instances immediate, practical support was provided to families. Examples include purchasing school uniforms or paying for rubbish removal to improve the living environment of families. At other times, support enabled families to access services that had long waiting lists, such as speech, occupational or physiotherapy. The agencies in some locations operated supported playgroups or early childhood services that were well patronised by families. Agencies also provided access to programs focused on parenting, financial planning and behavioural support.

Families valued professional support that addressed immediate needs as well as helping parents develop skills for the future. They particularly valued the support of professionals in the role of mediators. Many families either did not know of ways to manage their interactions with institutions or organisations, or did not feel in a position to influence these interactions.

There were many instances of families being asked to complete forms that they did not understand, attend meetings where they were not aware of the agenda or their role, or make decisions with what they felt was limited information or limited awareness of the consequences of these decisions. Where professionals were able to interpret the forms, explain processes and decision points or accompany them to meetings, parents were more comfortable and confident. Very effective services worked to develop these skills among parents and some then sought to engage experienced parents to assist in these roles, in both formal and informal capacities. A mother commented about one service:

If I hadn't have been going there then I wouldn't have found out so much about what was going on. And then talking to other parents that also have accessed that same school. The way [service] works at the end of the year... they get past parents back to talk about how their kids went. And so then you can talk to those parents and say 'Well, that sounds really interesting, tell me more information'. Maybe to chase up that sort of avenue if you think that might suit your child.

Effective support – as defined by both parents and by staff – focused both on meeting the identified challenges within families and on building skills and capacity within those families. This necessitated recognition not only of the needs of families, but also of their strengths. Families talked of the importance of having *someone to talk to about the good things*, as well as responding to the challenges in their lives. Professional staff often highlighted the extent of the challenges faced by families, as well as the resolve and resilience they displayed in responding to these. One teacher recognised the strengths of a mother who herself experienced mental health issues, yet who managed every day to bring her disabled son to school and support him in many ways. The teacher commented *How hard would it be to put yourself second every day?*

Accessing support

While families noted the availability of a range of support, they also noted some challenges in accessing this support.

Often seeking support was a challenge. Sometimes, there was a sense that accessing support meant increased

surveillance and judgement from those outside the family about family and parenting issues. A mother's comment that *there's always this thing in the back of your mind that if you're a parent melting down, is someone going to come along and take your children away...* reflected the perceptions of several other parents.

In other cases, limited forms of support were available. One consequence seemed to be that families were directed to that support, whether or not it was relevant to their support needs and context.

One family had recently moved to a suburban area in order to access affordable housing. The mother had experienced post-natal depression after the birth of her son, and this was exacerbated when her second child was born. She appeared to be an anxious parent, worried that her son would have difficulty starting school, even though there was little evidence to indicate that this would be the case. Despite her anxiety, she was very passive in seeking information about the transition to school. She had a positive relationship with her case worker. Over the course of the study, the mother attended several parenting courses. She became convinced that her son had challenging behaviour and/or physical problems and that she was not competent to manage these. There was no opportunity for her to access programs that helped her manage post-natal depression.

A range of information about school and transition to school existed in communities. In some, there was a great deal of general information, available from multiple sources. In others, very little information was available unless parents visited the local school. In most communities, information about specific schools (such as uniforms, starting and finishing times, transition programs) was available from schools only. Some parents accessed information from school websites, or more general websites. Even when written information was available, the majority of parents expressed a preference for talking with someone about transition to school, rather than reading about it. Reasons given included being able to ask about issues specific to their child and feeling more confident when talking to a person, rather than reading a sheet.

In all contexts, a shortage of allied health professionals and programs was noted and, even where they were available, there was often a long waiting list for services. Sometimes, programs were directed at specific family members, such as young children, yet the needs of other family members were not addressed. Many programs had a limited availability, so that families could access these for a specific period, after which they were no longer eligible for support. The withdrawal of support at transition points was a common experience for the families involved in this study. As well as generating considerable stress for families, the discontinuity in support had the potential to jeopardise any gains that had been made through the provision of support.

Staff from one agency location described a program that provided a limited amount of brokerage funding for families over a financial year. They had accessed this funding for a family living in a rural area. Of the five children in this family, one had been diagnosed with autism and various difficulties had been identified for several other children. Family income was low and the cost of private support services made access to these prohibitive. Using the brokerage funding, the agency had accessed a local program involving individual support for the child with autism. He had made significant progress with this program. However, as the brokerage was limited, the program ceased as soon as the funding limit had been met. Additionally, the funding was provided for the whole family, meaning that if any of the other children needed support, it was to be drawn from the same limit. The agency staff were expecting the funding limit to be reached well within the year, with the consequence that support would be withdrawn: *[They can't] just jump in their car and drive and pay for it ... that's just out of their reach, then it's the child that suffers. And ultimately, the community.*

Discontinuity in support was experienced most often at the time of transition to school. This was the time that targeted prior-to-school programs ceased and when families had to navigate the unfamiliar landscape of school education and school education support. Many families were confused that the nature of support varied so considerably between prior-to-school and school settings, and that different assessment criteria were used in the allocation of support.

A boy was about to start school. He had cerebral palsy which had left him with one leg shorter than the other. He had experienced a range of medical issues that resulted in poor motor control. His regular and often painful hospitalisation was thought to have contributed to emotional difficulties. Prior to school, he attended an Early Intervention service, preschool, physio, speech and occupational therapy. The assessment he completed prior to starting school indicated that his disabilities were not sufficient to qualify for additional classroom support, despite strong recommendations from his paediatrician and allied health providers. His mother commented *I think they need a program where they do Early Intervention and then for the first twelve months of schooling they need to continue that... [otherwise] you're trying to start your child at school, you're trying to start a new service, if you can get into the new services because there is no services... and like for us, everything just stops.*

Discontinuity in services was also noted when children did not have special education needs. Parents particularly commented on the different philosophies and approaches across services as children made the transition to school. In some cases, the differing approaches were explained in terms of the number of staff and the focus of the setting – for example, the greater number of children in a school class and the presence of one teacher were compared to the group size and staffing ratio in prior-to-school settings, with parents noting the challenges this imposed on teachers. At other times, the underlying philosophy of the settings differed. For example, parents noted that one particular Early Intervention service focused a great deal on supporting them and developing their skills; the same parents commented that the school focus on the child only meant that they did not get ongoing formal support from the school.

Regardless of the nature of the complex support needs for families, and regardless of the location, families noted substantial change when services ceased as children moved from prior-to-school into school settings. Some support ceased entirely; in other cases, families described being *shifted* to a new agency and then often to a waiting list depending on what support was available and how it was delivered within particular communities. Many parents lamented the loss of relationships of trust they had built up with agency or service staff. These same staff commented in similar terms about having to *let go* of their connections with families.

Workforce

Workforce issues are linked to access and availability of support. Families and agency staff all identified a lack of qualified personnel as a factor that prevented ongoing access to support. As well as a shortage of allied health, social welfare and parenting professionals in all areas, but particularly in rural areas, it was noted that the often high and challenging case loads of those who did fulfil these roles led to staff burnout and high turnover. Where staff had been in place within communities for some time, they not only built relationships with families but also with professional networks. These networks provided some of the professional and collegial support needed to nurture staff, as well as facilitating cross-sector and cross-service collaboration. High staff turnover often precluded staff engagement in these networks and impeded the development of ongoing support for staff. In many, but not all, locations, there was a noticeable lack of participation in community networks by teachers, particularly those based in schools.

Family support workers from one rural service commented... *there's a lot of work goes into case management and sourcing out what services are required and what availability there is with those services and how much or how far your funding will go to achieve that for the client. It's an individual plan for every single client family that you're working with... going out and trying to sort those services that families don't ordinarily get or wouldn't have ordinarily gotten, and trying to pull services in to help bundle together for the family to make the whole process a lot easier, it's a hard thing to do and you can only do your best with what you've got to work with... if you could just have a stable service in the community, that people could access every time, that person might even get to know the community... mobile services are just so inadequate... that's where you are on overload all the time. You're providing a lot of service... A little bit of service to a lot of people where it should be a lot of service to a few people... we'd like to work at a better pace. We'd like to feel that we're doing a really top job but you don't because you just get overworked.*

Overview of supports for families and their children during the year before school and the first year of school

Families were successful when they had strong and complementary supports. Families valued and drew upon a range of supports, both formal and informal. Many families demonstrated a range of strengths and capabilities as they accessed these supports, or tried to identify appropriate supports for them and their children. There were strong indications that good supports facilitated family strengths and conversely, no or conditional support made life harder for families. In several instances, the support provided through agencies was critical to family functioning.

Many forms of support were available for some, but not all, families. Accessing this support often depended on location and financial resources. In some communities access to professional support was limited and the cost of private support was prohibitive. At times parents were uncomfortable accessing support, noting the increased surveillance that accompanied this.

Appropriate support varied according to families, children and context. No single form of support was identified as appropriate for all families in all contexts. Indeed the opposite was the case, with the individual circumstances of families and children determining the most appropriate support. To remain effective, the nature of that support often needed to change over time, as families and children changed. There was limited evidence of families accessing coordinated support, unless parents themselves, Early Intervention teachers or agency staff had actively set out to coordinate services.

Coordination of support was often difficult because of the different philosophies and approaches in different services. For example, some services focused on the individual child and supporting their specific needs; other services focused on the family as a whole and sought to address multiple, interacting issues. In other instances, families experienced multiple challenges and required diverse support. Where support was contradictory or uncoordinated, parents reported feelings of confusion and disempowerment.

For several families, the sources of complexity in their lives did not start with the children. Yet it often seemed that the services they were able to access were directed at the child, rather than the family. While there did not seem to be one 'right' focus, the differing foci made continuity and consistency difficult.

Of particular importance for families involved in this study was that at the same time as children were making the transition to school, families and children were making a transition to different support services – including their different personnel, approaches and philosophies – or the transition to no support services.

The transition across support services was rarely smooth or continuous. Two examples of this discontinuity were highlighted in this study. The first occurred when support programs which were limited in terms of time or financial support, came to an end. Families who had made progress on the basis of this support often felt that they had been abandoned. The second occurred when children started school and much of the support that had been available in the prior-to-school years either ceased or changed dramatically. This was particularly the case for children with special education needs. Both families and support staff indicated that some families needed ongoing support and that programs of sustained support were more likely than short-term programs to effect long-term change and positive outcomes. When children and families lost support, negative consequences were seen in terms of children's engagement at school, progression, confidence and achievement.

Enabling practices and processes that facilitate the transition to school for children of families with complex support needs

This section addresses the research question: *What facilitates the transition to school for children of families with complex support needs?*

Several factors are pivotal to facilitating the transition to school for children of families with complex support needs. A well-qualified workforce that can deliver professional support and resources is critical to facilitating the transition to school of children from families with complex support needs. Most will be achieved when this workforce is diverse (cross-disciplinary), yet coordinated. When this workforce is appropriately funded, resourced and supported, there is the potential to create enabling environments that support a positive transition to school for all involved. A number of enabling practices and processes contribute to enabling environments. When these are combined with enabling policies, a range of positive outcomes for children, families, educators and other professionals, as well as the community, are identified.

Enabling practices

Practices that support the positive transition to school of children from families with complex support needs varied according to the family and their context. However, some common elements were identified throughout this study. These emphasised:

- providing access to information about school;
- assisting families to make positive connections with schools;
- promoting the development of family skills and abilities;
- acknowledging transition as a time when families seek, and are responsive to, input; and
- recognising challenges that reside outside the family, for example in the neighbourhood or community.

Key practices identified by families and staff throughout this project were:

- professionals acting as mediators for families in interactions with schools and other services;
- providing information for families about schools, processes for enrolment, services and support available within schools; and
- transition to school programs.

The role of mediator, someone to act as a go-between for introductions to new or different services, to explain forms and processes, has already been identified as a key support. In several services this role was undertaken in

ways that both supported families and helped them develop the skills and confidence to take on the role themselves in future interactions.

If I have any concerns with my daughter I always go to [case worker] and she will ring up ... and she has a talk to them, because I said to her 'They're not listening to me' ... So she gets up on their back and then they'll tell her something and I said 'Well they didn't say nothing to me.'

Providing information about schools, school expectations, services and options, as well as helping families make judgements about how schools responded to them and their complex support needs, remained an important practice across many services. The ways in which information was provided varied, but typically included both written and verbal information. Transition programs, in their many guises, tended to be operated by prior-to-school settings and schools; these were most effective when services worked collaboratively. Effective transition programs developed approaches to respond to their communities and to include families as well as other stakeholders.

In one school, the transition program consisted of a series of small group visits to the school by children and parents. Groups of about six parents and children visited the kindergarten classroom. A support teacher joined the group and children and parents got a sense of what happened at school. To round off the visit, the Kindergarten teacher had morning tea with the group of parents. The approach was promoted as an informal chat, a chance to meet and talk about things over a cup of coffee. The teacher noted *I think it helps make it a bit easier for the parents to approach you when they come to school.*

Enabling processes

Processes that support the positive transition to school of children from families with complex support needs promote:

- continuity of support across the transition to school;
- alignment of funded programs across the transition, including alignment of funding and access to support;
- cross-sector collaboration;
- support that changes as family needs change;
- service flexibility and responsiveness to each family's changing situations;
- adaptation of services and support to local contexts; and
- professional development opportunities for staff.

Several instances of multidisciplinary collaboration were noted throughout this study. In many contexts, staff with different professional backgrounds worked closely with each other and with families to provide access to a range of services and supports. There were also some instances of transdisciplinary teams, where professionals from different disciplines not only worked together, but also shared roles and work across disciplinary boundaries to maximise cooperation among the team members and integrated support for the family. Such teams tended to be located within Early Intervention Services. However, there were also many instances where families either struggled to access support or if they could access support, found that it was offered as a discrete service that was not integrated with any other support.

There were also several instances where cross-sectoral collaboration was limited. For example, education professionals were often not aware of the support children or families were receiving from health professionals, or family support staff. Sometimes this was because families were unwilling to share information that would make this possible; in other cases it was due to lack of time or commitment to such collaboration.

For the families involved in this study, support programs ceased at around the same time that children started school. While some programs were not necessarily designed to operate this way, the implementation had this effect. For example, the *Brighter Futures* program offered support for families for a period of two years. The families in this project who had been involved with *Brighter Futures* started this involvement when their children were about age three. As a consequence, the two year limit was reached when children were about age 5 – around the same time as they started school.

For other families, specialist support accessed through early childhood services was funded by Community Services, NSW Department of Human Services. This support ceased when children started school, and any new specialist support was accessed through the Department of Education and Training. Different models of funding, different criteria for funded support and the different nature of available support often meant that families experienced a major gap in support across the transition to school. For some families, this gap widened over time, as support was unavailable in the changed context of school.

Commenting on the change in support, one service provider noted:

When they lose support, families feel lost and alone. They've had this support and now because a child has reached a certain age or funding has run out or... They just think "Where do we go from here? What do we do?" It just becomes overwhelming to them and they just really don't know what to do.

And it's frustrating for us, as service providers who have been able to get them that far, and then we have to watch all that good work go down the drain again and it's really a double whammy because it's a smack for the families and it's a smack for our services too. I don't know how else you'd explain that really, but we have to watch it. Build up then fall down.

Providing appropriate support for families with complex support needs presents many challenges, not the least because each family and their context is unique. This means that there is no generic, one-size-fits-all form of support that can be delivered across all contexts and for all families. In addition, as families change, appropriate support needs to be responsive to these changes. For example, appropriate support for families with children as they start school may well be quite different from support for families with infants or toddlers. Effective support recognises the changing needs of families and is responsive to changing family situations. Further, effective support must take account of the contexts in which it occurs. Failure to account for and respond to local contexts can mean that support is not accessed or not effective.

Supporting and maintaining a well-qualified workforce involves recognition of the value of staff through appropriate salaries and conditions, and opportunities for professional development and cross-sector collaboration. One step in this process is to identify the nature of the workforce, recognising the diversity of professional staff and roles that support families and children across the transition to school. A further step is to promote collaboration among family support staff, social workers, counsellors, allied health professions and educators from the prior-to-school and school sectors, as well as any other professionals working with families and communities. Strategies to achieve this could include common professional development opportunities, integrated courses at tertiary level, and/or opportunities for cross-disciplinary professional experience. Collaboration has the potential to promote the consistency in services and support that families seek and to create the working conditions that support professionals in the continuation of their roles.

Policy directions for promoting the transition to school for children of families with complex support needs

This section addresses the research question: *What implications for policy and practice can be drawn from this research?*

A number of enabling practices and processes contribute to enabling environments. When these are combined with enabling policies, a range of positive outcomes for children, families, educators and other professionals, as well as the community, are identified. In this context enabling policy:

- recognises transition to school as a time of additional stress for families;
- provides access to appropriate transition programs for children and families;
- facilitates the development and implementation of programs that are built on family strengths and responsive to their needs;
- supports programs that promote family-school partnerships;
- retains provisions for support across the transition to school;
- promotes availability of a range of complementary, yet coordinated, supports for families over the transition period;
- facilitates the implementation of flexible and responsive support programs, adapted for family and community contexts;
- recognises the key roles of a professional, multi-disciplinary workforce in supporting families at times of transition; and
- promotes transdisciplinary, multi-agency collaboration in family centred practice.

Conditions necessary to generate contexts supportive of a positive transition to school for children from families with complex support needs are outlined in Figure 2. The inputs – a well-qualified workforce, professional supports and resources, and program funding – when combined with enabling practices, processes and policies have the potential to produce a range of positive outcomes for children, families, educators and other professionals, and communities, as children make the transition to school.

Input

Workforce that is:

- appropriately funded and resourced
- well qualified
- consistent
- coordinated
- valued
- supported

Professional support/resources that are:

- available
- accessible
- affordable
- relevant
- flexible
- drawn from a strong evidence base
- coordinated across services
- continuous over the transition
- built upon family strengths
- aimed at building family capacity
- family centred

Program funding that is:

- sufficient
- consistent across sectors
- flexible

Enabling Environments

Enabling practices:

- provide access to information about school
- assist in making positive connections with schools
- promote the development of family skills and abilities
- recognise transition as a time when families seek, and are responsive to, input
- recognise challenges that reside outside the family, for example in the neighbourhood or community

Enabling processes promote:

- continuity of support across the transition to school
- alignment of funded programs across the transition, including alignment of funding and access to support
- support that changes as family needs changes.
- service flexibility and responsiveness to each family's changing situations
- adaptation of services and support to local contexts
- professional development opportunities for staff
- cross-sector collaboration

Enabling policy:

- recognises transition to school as a time of additional stress for families
- facilitates the development and implementation of programs that are built on family strengths and responsive to their needs
- retains provisions for support across the transition to school
- promotes availability of range of complementary, yet coordinated, supports for families over the transition period
- facilitates the implementation of flexible and responsive support programs, adapted for family and community contexts
- recognises the key roles of a professional, multi-disciplinary workforce in supporting families at times of transition
- promotes transdisciplinary, multi-agency collaboration in child-centred and family focused practice

Outcomes

Children

- Improved transition to school
- Positive feelings about school
- Access targeted support/programs at school that enhance learning and development
- Improved relationships with educators

Families

- Regard school as a positive environment for their children
- Feel respected and valued by the school
- Recognise their role in promoting positive educational outcomes
- Feel supported
- Willing to engage with school
- Better understanding of what happens at school
- Improved relationships with school staff

Educators and other professionals

- Improved collaboration across sectors and disciplines
- Respect for families
- Awareness of family strengths
- Better understanding of family contexts and appropriate support
- Professionals supported in their roles

Community

- Continuity of support for families
- School is a valued environment
- Collaborative support for the transition to school

Conclusions

An effective transition to school for children is marked by a positive approach to school and a sense of belonging and engagement. Transition programs that focus on building relationships between and among children, families, educators and other professionals go a long way to promote an effective transition. Through an effective transition program, children become familiar with the school, their peers and the adults they will meet at school. Schools and teachers become familiar with children and families and are well placed to implement programs and approaches that are responsive to the individual children starting school.

When families feel valued and respected partners in their children's education and when schools reach out to engage with families in positive ways, families tend to recognise their role in promoting positive educational outcomes for their children. As they engage with the school more, develop strong relationships with school staff and develop a better understanding of what happens at school, they are well placed to regard school as a positive environment for their children. When children see positive relationships between their family and the school, their perception of school as an important place is enhanced.

Recognising the importance of continuing, complementary supports for families across the transition provides a great impetus for professionals to work together. Shared awareness and responsiveness to family strengths, as well as needs, promotes a better understanding of the family context as a whole and facilitates approaches that are family-centred. In addition, such collaboration provides support for professionals in their various roles.

Communities benefit when children and families view school as a positive place to be and when education is regarded as valuable, relevant and attainable. Children and families who

successfully engage with education help to build community resources and networks – the essentials of social capital. As families are supported to make decisions and adopt strategies and approaches that promote the educational engagement of their children, they also develop their own skills and confidence – the capacity – to effect change.

The transition to school is a time of opportunity – a time of change as children start school and as families seek and are responsive to intervention. It is also a time of vulnerability, where children and families move from known contexts and supports to unknown contexts, often without continuity of support and with the need to access different services, different people and different experiences. Recognising the strengths that children and families bring with them to school, using this as the basis for promoting positive engagement at school and maintaining a network of coordinated support delivered by well-qualified professionals will do much to build on the opportunities and reduce the vulnerabilities encountered.

[1] *Strengths and Difficulties Questionnaire (SDQ)*

The Strengths and Difficulties Questionnaire (SDQ) is a brief questionnaire of behaviour, social and emotional development. It can be completed by parents and teachers of 4- to 16-year-olds (Goodman, 1997). The SDQ is based on 5 constructs:

- Emotional problems
- Conduct problems
- Hyperactivity/inattention
- Peer relationships problems
- Prosocial behaviour

Australian data has established the reliability of this measure for Australian children in the early years of primary school (Hayes, 2007).

[2] *Socio-Economic Indexes for Areas (SEIFA)*

Socio-Economic Indexes for Areas (SEIFA) were developed by the Australian Bureau of Statistics (2008) from 2006 Census data. The four indexes that have been developed explore different aspects of socio-economic conditions by geographic areas. Using the indexes, geographical areas are allocated a SEIFA number which reflects the level of disadvantage for that area, compared with other areas in Australia. The SEIFA indexes are rankings of geographic areas using scores generated from characteristics of people living in that area, as reported on the Census. In each of the indexes, relative disadvantage is associated with a low number.

It is important to note that SEIFA is a measure of the general level of socio-economic disadvantage of all the people living in a specified area – it is not a measure of individuals or individual situations. All four indexes have been used in this study to provide an overview of the communities in which participant families reside.

The Index of Relative Socio-Economic Disadvantage (IRSD) summarises information about the economic and social resources of people and households within the area. Measures such as low income, low educational attainment, unemployment and unskilled occupations are included. A low score (or decile) on this index reflects relative disadvantage.

The Index of Relative Socio-economic Advantage and Disadvantage (IRSAD) uses data such as household income and educational qualifications to construct a continuum of relative advantage and disadvantage. A low score on this index reflects relative disadvantage.

The Index of Economic Resources (IER) focuses on the general level of access to economic resources of people and households within an area. A low score on this index reflects relative lack of access to economic resources.

The Index of Education and Occupation (IEO) reflects the general level of education and occupation-related skills of people within an area. It includes measures of qualifications achieved, as well as a rating of the skill levels of specific occupations and unemployment. A low score on this index indicates relatively lower education attainment and occupational status within an area.

[3] *Australian Early Development Index (AEDI)*

The Australian Early Development Index (Community Child Health and Telethon Institute for Child Health Research, 2009) is a population measure of young children's development constructed from a checklist completed by teachers in the first year of school. The checklist measures five developmental domains: physical health and wellbeing; social competence; emotional maturity; language and cognitive skills (school-based); communications and general knowledge. AEDI data is collated at the local area level. Data are then reported as Community Profiles and AEDI maps. The AEDI is a population measure, not a measure of individual children in a given area.

AEDI results are reported as:

- a score for each developmental domain, ranging from 1 (lowest) to 10 (highest); and
- as proportions of children considered to be 'on track', 'developmentally at risk' and 'developmentally vulnerable'.

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