ADDIS ABABA UNIVERSITY

COLLEGE OF EDUCATION AND BEHAVIRAL STUDIES

DEPARTMENT OF SPECIAL NEED EDUCATION

BY

MERAF MULUGETA

THE PRACTICES AND CHALLENGES OF EARLY CHILDHOOD INTERVENTION FOR CHILDREN WITH SPECIAL NEED : THE CASE OF ABEBECH GOBENA CHILDREN'S CARE AND DEVELOPMENT ORGANIZATION

May, 2025

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THIS THESIS IS SUBMITTED TO DEPARTMENT OF SPECIAL NEEDS EDUCATION IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR MA DEGREE

May, 2025

Addis Ababa, Ethiopia

DECLARATION

I, the undersigned declare that this thesis is my original work, has not been presented for the degree in any other university and that all sources of material used for the thesis have been duly acknowledged.

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APPROVAL OF THE BOARD OF EXAMINERS

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ACRONYMS

AGCCDO	AbebechGobena Children's Care and Development Organization
CBR	Community Based Rehabilitation
CEC	Council for Exceptional Children
DEC	Division for Early Childhood
ECCE	Early Childhood Care and Education
ECI	Early Childhood Intervention
IFSP	Individualized Family Service plan
IHPs	Individualized Education Plans
MDPH	Massachusetts Department of Public Health
NCCIP	National Center for Clinical Infant Programs
NGO	Non-Governmental Organization

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ABSTRACT

The objective of the study was to evaluate the processes and challenges related to early childhood intervention for children with special needs at Abebech Gobena Children's Care and Development Organization.

Early childhood intervention, or ECI, supports infants and young children with developmental delays or impairments in order to foster growth and support families. Using a mixed-methods approach, the study integrated qualitative case studies with quantitative questionnaires. Data was collected from 10 staff members (purposeful sample) and 60 parents (simple random selection) using structured questionnaires. According to the research, social, emotional, mental, and physical development are all markedly enhanced by early intervention, which also enhances long-term results and academic performance. The report highlights several important issues, including a lack of cooperation amongst stakeholders, a shortage of qualified staff, and a lack of knowledge about ECI. With an emphasis on social, emotional, and intellectual development, the study comes to the conclusion that cooperation between all stakeholders is essential for successful ECI, from conception to execution.The researcher concluded by recommending that stakeholders' organizations collaborate on raising awareness, implement Early Childhood Intervention from the very beginning, and focus on the physical and mental health of children. They should also work on preparing children emotionally and socially, improve English language and math skills in schools, and provide incentives and capacity building training to the staff of Abebech Gobenna Children Scare and Development Organization regarding ECI.

Keywords: Early Childhood Intervention; Children's Care and Development Organization

CHAPTER ONE

1. INTRODUCTION

1.1. Background of the Study

The importance of family systems and family-centered approaches in early childhood intervention is emphasized in Early Childhood Intervention: Working with Families of Young Children with Special Needs. It shows how these methods can have a big impact on the lives of young children who have developmental delays or special needs because of biological or environmental reasons, as well as their families. Early childhood intervention is viewed as a mix of chances and experiences at the system level intended to address the developmental obstacles brought on by risk factors and disabilities. In order to empower families and increase their ability, family-centered approaches entail involving them in ways that improve their abilities (Espe-Sherwindt, 2008).

In addition to helping families improve their parenting abilities, early detection of problems and provision of assistance can be crucial for enhancing a child's growth, health, and well-being (Shonkoff et al., 2012).

In general, early intervention refers to initiatives that use therapeutic or educational methods to address or prevent developmental problems in children younger than 36 months. The phrase is used by some experts to refer to enrichment programs that provide developmentally appropriate activities for young children who are at risk of or already dealing with a variety of difficulties (Bricker, 1984).

From a social-system standpoint, early intervention involves helping families with young children through official and informal social networks, which have an impact on how parents, families, and kids operate both directly and indirectly (Dunst 1991).

A wide range of support services offered to families, individuals, and groups are included in early intervention. These services include social support, which is unofficial assistance from friends, family, neighbors, and community organizations, as well as formal interventions, which are provided by experts and are known as early

intervention programs. Early intervention incorporates a variety of contextual effects that determine behavior and development, as acknowledged by the social systems definition (Ababu T. Ayalew, 2014).

Although most of the research on family-oriented early intervention focuses on children ages one to three, studies indicate that early intervention methods are generally aimed at children from birth to age six (Dunst, 1991). The significance of early intervention for the development of newborns, toddlers, and young children has drawn increasing attention from throughout the world (Blackman, 2003). However, in Ethiopia, the holistic development of children with special needs is severely hampered by the lack of early interventions and the restricted amount of preschool experience (Alemayehu, 2000).

Examining the procedures and difficulties of early childhood intervention for children with special needs at the AbebechGobena Children Care and Development Organization is the goal of this study in light of these considerations.

1.2 Statement of the Problem

Since families are the primary caregivers and are responsible for raising children with special needs, childhood intervention programs are implemented in collaboration with them. Furthermore, it is emphasized that all children, including those with disabilities, are entitled to fundamental human rights by the UN Convention on the Rights of the Child (CRC), which was approved in 1989 and put into effect in 1990. These rights include the right to life, the right to develop to the best extent possible, the right to be free from exploitation, abuse, and harm, and the right to fully engage in social, cultural, and familial life. Additionally, the CRC emphasizes the value of parental support and aid (Convention on the Rights of the Child, 1989).

All children with disabilities and their caregivers are entitled to special support according to their condition and the circumstances of their family. These services should be provided free of charge to ensure that children have access to the necessary therapies, including rehabilitation. Early childhood intervention (ECI) is one such program designed to help families and kids with disabilities support their development in areas like cognitive, emotional, social, physical, and adaptive skills (MDPH, 2013).

Children who receive early intervention services may start special education preschool programs earlier, which can result in thorough evaluations that assist identify whether a child has significant delays or disabilities that need for specialized care (Sanderson, 2010).

Compared to children who did not receive such education, children who have access to early childhood services and preschool education are more likely to start school on time, are less likely to drop out, and typically achieve superior academic performance (Save the Children, 2013).

The shortage of qualified specialists to assist those with disabilities in communities is one problem. This service gap emphasizes the need for improved community-based support for individuals with disabilities (Ahon Adaka, 2014). Health, education, and social welfare policies all focus on supporting children's holistic development, shielding them from illnesses, abuse, and other harms, and creating an environment that promotes their development. These regulations also recognize the critical role that families play in fostering a child's growth and the significance of giving them the tools they need to do so.

Although it can be difficult to enforce these policies, there is a strong basis for starting early intervention programs. Legislation that specifically supports early intervention services for all eligible children must yet be passed, though. With the help of their caregivers and service providers, early childhood intervention entails giving babies and toddlers the chance to grow in social skills and behavioral competency. The long-term significance of early intervention is demonstrated by research on brain development, which emphasizes how early experiences influence the formation of neural networks. Early intervention is an essential investment for improved outcomes in later life since interventions that start later in life are less effective and more expensive (Heckman, 2006).

The development of early childhood intervention services is closely tied to broader societal changes, such as the evolving role of women, maternal employment, and other social factors, as well as economic considerations. High-quality early childhood services are increasingly seen as essential for a country's economic development,

as they contribute to the creation of skilled human capital. These considerations emphasize the connection between the growth of early intervention services and overall economic development (TGE, 1994).

Cultural values and social structures influence how governments address the needs of families with young children, shaping the policies and services available for early childhood care. These policies, based on a country's cultural ideology, directly impact the quality and nature of early childhood intervention services, affecting children's developmental experiences. Research into early childhood intervention experiences across different countries has shown the profound impact these services have on young children's development (TGE, 1994).

While society and professionals share a general understanding of the value of early intervention, the challenge often lies in implementing effective strategies. Despite widespread belief in its importance, there are instances where minor impairments, like visual or auditory issues, worsen into severe disabilities due to the lack of early intervention, often because of insufficient knowledge or inaccessibility to healthcare services. As a result, parents may turn to traditional treatments. However, raising awareness about early intervention can be a critical step in educating the public on the causes of disabilities (Tirussew, 2005).

The primary purpose of early childhood intervention programs is to support children during their critical developmental years, when they experience significant growth. Although each child grows and learns at their own pace, some require additional help. This additional assistance is referred to as Early Childhood Intervention (Ulf & Natalia, 2009).

For people with disabilities, Ethiopia offers medical, educational, and vocational rehabilitation assistance; however, because of the severity of the issue, only a small number of people are served by these programs (Tirussew, 2005). Through a number of sector development initiatives, including the Education Sector Development Program III (2005–2010), which prioritizes early childhood education, the nation is attempting to increase access to Early Childhood Care and Education (ECCE). The Education and Training Policy (TGE, 1994) promotes inclusive methods that address the needs of children with disabilities and acknowledges the significance of early childhood education.

Unfortunately, many parents and caregivers are unaware of the importance of early childhood intervention, especially for children with disabilities. (Slentz, 2010) emphasized that recognizing developmental delays and disabilities early is crucial, as early intervention significantly reduces complications. A lack of early intervention can hinder the child's transition from one educational level to another and negatively impact their academic performance in inclusive schools. This is why the researcher choose to explore early intervention for children with disabilities as part of enhancing inclusive education in Abebech Gobena Children's Care and Development Organization.

Preliminary research, including interviews with representatives from the Abebech Gobena Children's Care and Development Organization, suggests the need to assess the practices and challenges of early childhood intervention in Ethiopia. Therefore, this study aims to evaluate the practices and challenges faced by the organization in delivering early childhood intervention services.

1.3 Objectives

1.3.1 General objectives

The study's primary goal is to investigate the variables affecting early childhood intervention practices and difficulties inside the chosen nongovernmental organization, in this case the Abebech Gobena Children's Care and Development Organization.

1.3.2. Specific objectives

The specific objectives of the study are as follows:

• To assess the difficulties encountered in early childhood intervention at the Abebech Gobena Children's Care and Development Organization;

• To outline the elements impacting early childhood intervention and offer recommendations for further study;

• To investigate the difficulties and procedures of early childhood intervention (ECI) within the Abebech Gobena Children's Care and Development Organization.

1.4. Research Questions

This study seeks to address the following research questions.

1. What are the current practices of early childhood intervention in Abebech Gobena children's care and development organization.
2. What are challenges faced in early childhood intervention in Abebech Gobena children's care and development organization.

1.5. Significance of the Study

This study aims to provide an overview and insights into the practices and challenges faced by non-governmental organizations in implementing ECI, particularly in the education sector. It highlights issues such as the availability of adequately educated staff with the necessary skills for early childhood intervention, resource constraints, and the approaches being used, such as the Holistic Development Approach and relevant policies. The Education & Training Policy (TGE, 2014) emphasizes the importance of early childhood education, advocates for a focus on the overall development of children in preparation for formal schooling, and gives special attention to students with disabilities and gifted children.

The researcher aims for the findings of this study to provide valuable information to families, schools, and other relevant organizations regarding the practices and challenges of early childhood intervention in non-governmental organizations in Addis Ababa. This study serves as a foundational resource for future research on the subject, as there is currently a lack of studies addressing this issue.

1.6 Limitation and Scope of the Study

Due to limitations in time and resources, this research focuses on identifying the practices and challenges of early childhood intervention in local non-governmental organizations in Addis Ababa, specifically the Abebech-Gobena Children's Care and Development Organization. Additionally, the study is confined to exploring early childhood intervention within the education sector, considering it one of the key areas of focus. The research is restricted to the implementation of ECI programs and the design in recent years at the AbebechGobena organi-

zation. Data was collected from one of the schools located in Addis Ababa, with 60 parents of children with special needs and 10 experts selected as participants. In total, 70 individuals were involved in the study.

1.7 Operational Definition of Terms

Early childhood intervention : A system that supports family interaction patterns that best assist a child's development is known as an early childhood intervention (Guralnick 2001).

Early intervention : refers to a broad range of therapeutic treatments, training methods, and experiences that are experimental, instructive, and supportive (Bricker, 1984).

Child: a child meansevery human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier (United Nations, 1989).

Children with disability : is an individual under 18 who has various impairments, which, when combined with different barriers, may prevent them from fully and equally participating in society alongside others (UNICEF definition of children, 2015).

Early childhood : refers to children from birth through infancy, as well as those in the preschool years and during the transition to school. In simpler terms, it includes children from prenatal stages up until the age of 8 (Alemu & Birmeta,2012).

Children with special need : refer to those who have developmental disabilities, intellectual disabilities, emotional challenges, sensory or motor impairments, or serious chronic health conditions, and who need specialized health monitoring, tailored programs, interventions, technologies, or facilities (UNICEF definition of children, 2015).

Disability : People who suffer from chronic physical, mental, intellectual, or sensory impairments are considered disabled. These impairments may restrict their capacity to fully and equitably participate in society when they encounter with other obstacles (United Nations Convention on the Rights of Persons with Disabilities, 2006).

Special need children: Individuals who have identified disabilities, physical problems, or mental health concerns that call for early intervention, specialized education programs, and support, according to the United Nations Children's Fund. According to the World Health Organization Meeting Report on the Development of Guidelines for Community-Based Rehabilitation Programs.This also includes kids who might not have any obvious medical issues but nevertheless need specialized care, support, or observation (World Health Organization Meeting Report on the Development of Guidelines for Community-Based Rehabilitation Programs, November 2004).

1.8 Organization of the Study

The study is organized into five chapters: Chapter 1 an introduction which covers the study's background, problem description, goals, importance, and scope. Chapter 2 a brief review of related literature. Chapter 3 the research design, study site description, data sources, sampling strategies, data collection tools, data analysis procedures, and ethical issues and overview of the research methodologies are covered. Chapter 4 the results, analysis, and interpretation of the findings are presented. Chpter 5 concludes the study and offers recommendations.

CHAPTER TWO

1. REVIEW OF RELATED LITERATURE

This literature review explores into various issues related to the practices and challenges of early childhood intervention . It examines the definitions of key terms, explores recent studies on the components and principles of early childhood intervention, and discusses theoretical frameworks that guide educational interventions provided by non-governmental organizations to support child development. The review also highlights empirical evidence on the benefits of early childhood intervention in Ethiopia, evaluating its quality both globally and within the Ethiopian context. Key topics covered include the theoretical foundation of early childhood intervention, historical trends, and the perspectives of early childhood intervention on child education globally and within Ethiopia. Finally, the review identifies gaps in existing literature.

Early childhood intervention defined as a strategy that facilitates family interactions that best support the development of children. Family-driven experiences, parent-child connections, and helping parents maximize their child's safety and health are the main points of emphasis (Guralnick, 2001).

A variety of services offered to very young children and their families during a crucial period in their development are collectively referred to as early childhood intervention. Children who have developmental delays, impairments, or are at risk of delays because of biological or environmental causes can access resources and opportunities (Health Review of South Africa, 2020).

According to (Dunst, 1991), Early childhood intervention is the process by which members of institutional and informal social support networks offer resources and support to families with young children and also early interventions entails supporting young children's families through formal and informal social networks, which have an impact on the child, parent, and family's overall functioning both directly and indirectly. Family dynamics can be impacted by support from these networks in two ways: directly by providing helpful assistance

and indirectly by increasing parental confidence.For example, early family and community support and inclusion are crucial for children's participation in society, education, and the workforce, as well as for them to be able to exercise all of their human rights. The goal of early childhood intervention programs is to enable families and primary caregivers to provide an environment that supports the development of their children's skills and growth in the early years. With the correct assistance, parents and other caregivers may provide long-term, reasonably priced care, enabling kids to flourish and develop in a familiar environment.

Early childhood intervention is defined as multidisciplinary services for children from birth to age five that are intended to promote health and well-being, improve developing competencies, minimize delays, address disabilities that are present or developing, prevent functional decline, and promote adaptive parenting and family functioning (Shonkoff & Meisels, 2000).

Preventing or reducing the physical, cognitive, emotional, and resource limits of young children with biological or environmental risk factors is the aim of early childhood intervention. This author highlights how important families are to the intervention's effectiveness. (Blackman, 2003).

The concept of early childhood intervention as a resource-based strategy is put out by (Trivette, Dunst, and Deal 1997), who stress that in order to satisfy the needs of children and families, early childhood intervention programs should not only concentrate on formal services but also on enlisting community-based resources. By taking into account both community and professional resources, this method broadens the reach of assistance. Inter-agency coordination is necessary because early childhood intervention programs typically characterize their relationships with children and their families in terms of specific services that the program gives and occasionally that other human programs provide. Because it does not specifically take into account the value of support sources other than official professional services, this conceptualization of early childhood intervention techniques is both constrained and restrictive. On the other hand, because it emphasizes the mobilization of various community resources, a resource-based approach to addressing the needs of children and families is both broad and growing.

Multidisciplinary services are offered to children from birth to age five as part of early childhood intervention. Promoting child health and well-being, improving emerging competencies, minimizing developmental delays, rehabilitating current or emerging disabilities, preventing functional degradation, encouraging adaptive parenting, and enhancing overall family functioning are the primary goals (Shonkoff & Meisels, 2000).

A variety of services are provided to young children and their families as part of early childhood intervention with the goals of ensuring the child's personal development, enhancing the family's capacity, and encouraging social inclusion for the child and family. The services are designed to provide extra assistance in order to: support the child's social inclusion, enhance the family's capacity, and ensure the child's personal development.

The successful design of Early Childhood Intervention programs must take into account the fact that all learning takes place within the framework of positive interactions between infants, children, and their friends and family. It is essential to make sure that children's services have the money and support to create family-centered procedures and that their employees are educated in the early childhood intervention paradigm.

Children will only be able to engage in society, attend school, access the open labor market, and enjoy the full spectrum of their human rights if they are involved and supported from an early age in their family life and community. The goal of early childhood intervention services is to enable primary caregivers and families to provide an atmosphere that fosters their children's growth and acquisition of skills during the formative years of life. Children can flourish and develop in a familiar environment if parents and other caregivers are able to give them the greatest, most economical, and sustainable support possible (https://easpd.eu/key-areas-of-work/intervention in early childhood).

For ECI to be implemented effectively, a few essential components are required. These consist of:

Availability: Making certain that every kid and family in need of assistance is contacted as soon as possible.

Proximity: Services must be available to the target demographic and offered in close proximity to families, with an emphasis on comprehending and honoring the requirements of the family.

Affordability: Services have to be provided for free or at a minimal cost, using public funds from non-profit organizations or health, social, or educational agencies.

Interdisciplinary working: Experts from several disciplines work together to assist young children and their families, promoting cross-disciplinary information sharing.

Service diversity: ECI usually combines social, health, and educational services, however this might differ from nation to nation.

In order for ECI services to be successful, they must be created with the knowledge that learning occurs when young children and their caregivers have meaningful interactions. In order to apply family-centered approaches, children's services must have sufficient funds and support, and staff members must be trained in early childhood intervention models.

ECI is a collection of services for very young children and their families that are offered upon request at a specific point in the child's life. It includes any action taken when a child requires extra help to guarantee and improve personal development, build the family's own capacity, and encourage the child's and family's social inclusion.

2.1. Early Childhood Intervention: The Development of the Concept

Special schooling for children with impairments gave rise to the idea of early childhood intervention (Guralnick, 1997).

Early childhood intervention concepts and techniques have been developed by a number of writers using a variety of theoretical stances. There are two primary areas in which they have contributed:

By combining health, education, and social sciences—particularly psychology—which were previously more disparate and not always related, they have presented a novel idea of ECI.

They have highlighted the change from a child-centered approach to a more all-encompassing one, in which the family and community were given more attention than simply the child (Blackman, 2003).

The advancements in health and human sciences, along with broader societal changes, have directly influenced the concepts and methods currently used in ECI. Growing knowledge about brain development has underscored the importance of early experiences in shaping neural pathways and influencing growth (Kotulak, 1996)

There are examples of both noteworthy accomplishments and untapped potential in the field of early childhood intervention. Its breadth includes everything from practical service delivery to scholarly reflection. The development of specialization and the encouragement of interdisciplinary cooperation have been successful in this subject. It still faces unresolved theoretical and practical obstacles, nevertheless. Furthermore, it makes use of a wide range of intellectual resources in fields including philosophy, economics, social policy, education, healthcare, and child and family development (Bryman, 2008).

2.1.1. Kindergarten

Friedrich Froebel established the first regular kindergarten courses in Germany in the early 1800s, motivated by a philosophy based on traditional religious beliefs and the importance of learning via directed play (Froebel, 1975). Through play-based learning experiences, kindergarten fosters social, emotional, cognitive, and physical development, serving as a crucial transitional period between early childhood and formal schooling.

2.1.2. Nursery schools

Just like kindergarten, nursery schools originated throughout Europe. In 1910, Rachel and Margaret MacMillan established London's first nursery school, which began as a health clinic before developing into an outdoor school. Delivering comprehensive, prevention-focused services that addressed young children's social, physical, emotional, and intellectual needs was the goal of this ground-breaking initiative. While Froebel's kindergarten was religiously oriented, the Macmillan curriculum was grounded in secular social concepts and emphasized the development of self-care, personal responsibility, and educational preparedness (Peterson, 1987).

With structured play and exploration, nursery education focuses on developing critical skills including social interaction, early literacy, and numeracy in children who are not yet of school age.

In order to create a coherent early childhood continuum that supports children's general development, it is im-

portant to bridge the gaps between ECI, kindergarten, and nursery education. Thus, play-based learning, individualized support, and cooperation with families and communities are common themes that run throughout ECI, kindergarten, and nursery education. Teachers and legislators can create more inclusive and successful early childhood programs that cater to the diverse needs of young students by investigating the ideas, concepts, and development of early childhood intervention in addition to kindergarten and nursery education.

2.2. Maternal and Child Health Services

Preventing and treating complications associated to pregnancy and childbirth requires maternal health services (WHO, 2007). The promotion of wellbeing through screening, nutrition, and vaccination against diseases affecting individuals under five is referred to as child health services. Just as the industrialization and secularization of the nineteenth century facilitated the emergence of new ideas in early childhood education, persistently elevated mortality rates among young children sparked an increased focus on their physical health. In truth, many pediatric experts in the late 1800s advocated for prioritizing educational stimulation prior to the age of five to ensure that "vital forces" were not diverted from activities promoting physical health (Griffith, 1895).

The primary focus of the research paper concerning Maternal and Child Health Services within the realm of Early Childhood Intervention is likely to delve into the challenges and issues encountered in delivering comprehensive and effective services to mothers and children. Key topics may encompass barriers to accessing healthcare services, inequalities in service availability, the significance of early intervention and preventative strategies, the implications of maternal health on child development, and the importance of family-centered care in fostering positive outcomes for both mothers and their children. The paper may also address the necessity for interdisciplinary cooperation, culturally aware approaches, and policy considerations to enhance maternal and child health services within the framework of Early Childhood Intervention.

2.3. Research on Child Development

While decisions regarding program design and resource allocation are often driven by sociopolitical factors, the scholarly examination of young children's development has significantly influenced the evolving framework of early childhood services. Hence, this author argues that research in Child Development is essential for gaining insights into how children grow, learn, and engage with their surroundings. Investigations frequently delve into different facets of early childhood development, including cognitive, social, emotional, and physical aspects. Connecting Child Development research with Early Childhood Development underscores the crucial role that early experiences play in shaping a child's future. Gaining an understanding of children's development during their formative years can guide practices in education, healthcare, and parenting, fostering optimal growth and well-being. It highlights the importance of nurturing and stimulating environments that enable children to flourish and achieve their full potential.

2.4. The Significance of Early Relationships

As the child development field began to investigate how developmental outcomes could be influenced by child-rearing environments, numerous studies were initiated to examine the detrimental effects of deprivation in early human relationships (Antene et al., 2020). This author has reviewed existing research on the significance of early relationships in child development, which underscores the profound impact that nurturing and encouraging relationships can have on a child’s social, emotional, and cognitive growth. Positive early interactions with caregivers, family members, and peers can promote secure attachment, emotional regulation, and healthy social skills. These relationships establish a basis for developing trust, empathy, and resilience in children. Furthermore, linking early relationships with early childhood development accentuates the vital role that supportive interactions play in shaping a child's brain architecture and general well-being. Research indicates that secure attachments formed during early childhood can lead to lasting effects on a child's mental health, academic performance, and future relationships. Recognizing and fostering positive early relationships can lay a robust foun-

dation for healthy development and help create a nurturing environment in which children can thrive. By prioritizing supportive relationships during the early years, we can enhance children's social and emotional skills, ultimately leading to beneficial outcomes in their overall development.

2.5. Development of Early Childhood Intervention in the World and Africa

A review of the philosophical and practical foundations of early childhood intervention before the 1960s reveals influences from numerous sources. In each area—early childhood education, maternal and child health, special education, and child development research—the interaction between professional expertise and sociopolitical demands has played a crucial role in establishing the educational, psychological, public health, and public policy advancements of the past thirty years (Garell, 1994).

The expansion and progress of early childhood initiatives in Africa, notably in Ethiopia, demonstrate the importance of investing in early education and care. The AbebechGobena Child Development Center in Ethiopia embodies a model for delivering comprehensive support to young children, addressing their physical, cognitive, emotional, and social development. The center provides a caring environment that emphasizes early learning, health, nutrition, and overall well-being. By combining early childhood education with community involvement and support services, the center caters to the specific needs of children in Ethiopia, establishing a solid foundation for their future growth and success. Through initiatives such as the AbebechGobena Child Development Center, Africa is acknowledging the crucial role of early childhood development in influencing children's life trajectories and investing in programs that promote a healthy beginning for young learners. Such efforts contribute to improving outcomes for children, families, and communities, emphasizing the importance of early intervention and support in ensuring positive growth and development in the early years.(AGCDC Report ,2015)

2.6. Abebech Gobena Care and Development Centre (AGCDC)

This study have reviewed ECI globally and focus on Ethiopia specially on AbebechGobena Care and Development centre. The last five decadeAbebechGobena, often referred to as the "Mother Teresa of Africa," started the center with the mission of offering a safe and nurturing environment for children in need. Over the years, the center has expanded its services to not only provide basic necessities like shelter, food, and education but also to address the emotional and psychological well-being of the children under its care.

AGCDC emphasizes holistic development, focusing on the physical, cognitive, emotional, and social needs of each child. The center's programs aim to break the cycle of poverty and empower children to reach their full potential. Through community engagement and partnerships, AGCDC has been able to make a significant impact on the lives of many children in Ethiopia.

Today, the AbebechGobena Child Development Center continues to be a beacon of hope and a testament to the transformative power of education and care in shaping the future of young individuals in Ethiopia.(AGCDC Report,2017)

2.7. Rethinking Traditional Disciplinary Boundaries Related to Early Childhood

Current conceptualizations of the early childhood development process highlight the futility of trying to separate the needs of young children into distinct components defined by traditional disciplinary boundaries, even though the contributions of various professional orientations continue to influence the delivery of early intervention services (Lazar & Darlington, 1982)

For instance, discussions concerning how to distinguish between health issues and academic pursuits typically turn into semantic frustration exercises. Is it a medical issue, an educational one, or even a combination of the two if a 2-year-old has recurrent otitis media, variable hearing loss, and related communication deficits? What about the 800-gram newborn born to a 15-year-old single mother who is solely dependent on government aid after a 29-week pregnancy? Do this infant's needs fall more under the purview of social services, or are they

primarily medical, educational, or developmental? What about the 3-year-old who presents serious management issues in a Head Start program due to their aggressive, disorganized behavior and short attention span? Are these issues fundamentally instructional? Do the issues turn into medical ones if the youngster is discovered to be underweight and anemic? Are we now more inclined to view the issues as a mental health or social service concern if the child has experienced physical abuse or extreme neglect? (Lazar & Darlington, 1982)

The list of examples that illustrate the difficulties inherent in a strict categorical approach to the needs of young children is virtually endless. Furthermore, it is not a fist of hypothetical situations; rather, it is a catalogue of the kinds of problems that make up an average caseload in a typical early intervention program. The boundaries among the domains of social welfare, physical and mental health, and early childhood education have become less clear, and the more sophisticated we become in our understanding of the complexities of early human development, the more difficult it becomes to sharpen them (Lazar & Darlington, 1982)

The progressive and inevitable ambiguity of disciplinary boundaries represents one of the central challenges facing the field of early childhood intervention, and the role of the case manager may be one of the primary vehicles for successfully communicating among the disciplines.

The need to rethink traditional disciplinary boundaries demands an intellectually flexible orientation toward the definition of adaptive functioning and individual needs in young children - an orientation that strikes at the very core of the professional identities of a wide variety of disciplines that have played key roles in shaping our concepts of development and intervention. The stresses that accompany such critical reexamination of the boundaries of disciplinary expertise must not be underestimated, and the implications of this phenomenon for the content of professional training programs are enormous. However despite the formidable nature of the task, such change must occur if we are to move toward the design and implementation of truly integrated services for young children and their families (Lazar & Darlington, 1982)

2.8. Redesigning Service Delivery Systems

At the level of individual service delivery, appropriately trained and experienced professionals are able to deal effectively with the kind of disciplinary overlap and ambiguity just described. At the level of service system organization, however, and particularly at the point where decisions are made about the allocation of public resources, vague boundaries are a bureaucratic nightmare (Kamin, 1974).

Departments of health, education, mental health, social service, and public welfare were all established at certain points in history in order to accomplish specific purposes. Each reflects the expertise of a distinct professional discipline and each focuses on an explicitly defined human service domain. As a consequence of this organizational structure, most public programs tend to adopt narrow goals, and well-integrated comprehensive approaches to social problems are rare. In contrast, early childhood intervention efforts demand a coordinated array of inputs from a range of disciplinary perspectives in order to devise a unified approach that views young children as multidimensional, yet essentially indivisible (Kamin, 1974).

Thus, our evolving theoretical sophistication about the process of human development suggests that the traditional bureaucratic organization of services is becoming increasingly dysfunctional for the delivery of early childhood intervention services. Models of interagency collaboration and the designation of lead agencies and coordinating councils represent the first stage in a process designed to reduce the fragmentation and inefficiency that characterizes current agency structures. Such arrangements are likely to proliferate in the nineties, as states seek to fulfill the mandates for collaborative planning and implementation of comprehensive service systems (Kamin, 1974).

The ultimate challenge for the field of early childhood intervention would be a reconceptualization and reorganization of human service agencies at the community, state, and ultimately the federal level. Such reorganization would require bold, creative political leadership and strong support from constituency groups willing to invest considerable energy and resources in a long-term process of change. Although the bureaucratic inertia and interest group activity that would oppose fundamental restructuring is great, one cannot help but wonder about the

long-term viability of a system that continues to ask questions about which aspects of early childhood intervention should be paid for with health dollars, which with education dollars, and which from other agency appropriations. Mandates for the sharing of administrative responsibilities and costs represent an important step in the development of new infrastructures that will facilitate more integrated services delivery (Hunt, J. M. 1961).

2.9.Aligning Service Goals with Recipients

The anticipated growth of a wide variety of child-care services, generic family support programs, and specifically focused early intervention services highlights the need for a clearer definition of target populations and service goals and objectives. Thus, the broad diversity of families and children who could benefit from early childhood programs demands a comparable diversity in the availability of service options. As this diversity grows, it becomes increasingly important that we develop criteria for matching specific service models to individual child and family needs (Dennis, 1980).

Some program models concentrate on the basic needs of all parents with young children (Kagan, Powell, Weisbourd, and Zigler, 1987). Rather than focusing on the unique needs of youngsters with specific disabilities and their families, such generic family support programs are fueled by the recognition that all young children and their parents need support. Recent demographic trends, such as increased isolation of small nuclear families from extended kinships, larger percentages of working parents, higher numbers of single parents, and greater economic stresses in general serve to create significant burdens for all those who rear young children (Dennis, 1973).

Some programs target their activities to the specific vulnerabilities exhibited by particular subgroups of children or their parents. The identification of appropriate service recipients for such programs will require a more refined understanding of developmental risk as an extremely complex and multidimensional construct extending far beyond the simple presence of univariate "organic" and "experiential" factors. The result of such expanded thinking inevitably will complicate what was once considered to be a deceptively straightforward process of selecting children for services (Dennis, 1973).

Closely linked to the task of identifying the target population and specifying individual program objectives more precisely is the responsibility for ongoing evaluation of service efficacy. In some cases, intervention or support programs can have substantial impact. Under other circumstances, their effects may be relatively small compared to those of other influences.

The investigations of the nineties will require a full recognition of the rich range of individual differences found among children, families, and the social contexts in which they live . Evaluations must focus both on the broad range of children's abilities that programs seek to enhance and on the equally important effects that services may have on parents, siblings, and on the family system as a whole.

Finally, future investigators must acknowledge the diverse audiences for whom efficacy data are needed, including scholars of human development, makers of public policy, providers of direct services, and the children and families for whom programs are and will be designed (Dennis, 1973).

2.10.Reconsidering Parent-Professional Relationships

One of the most important legacies of the human service programs of the past decade, whose spirit is reflected in the provisions is the growing recognition of the need for a more collaborative, less hierarchical relationship between service providers and service recipients. The degree to which our reexamination of these relationships moves beyond the facade of simple slogans, and the extent to which we are able to examine the substance and complexity of these extremely sensitive interactions, will be an important gauge of how our service system matures (Caldell, 1986).

The 1990s are likely to be a decade in which relationships between parents of young developmentally vulnerable children and providers of early childhood intervention services undergo critical examination and redefinition. However, in order for this process to be successful, its complexity and the importance of individual differences must be appreciated. Some parents of young children with developmental disabilities, for example, have the personal resources and motivation to assume responsibility quickly for all aspects of decision making regarding their child's care and education. Others may require a longer period of dependence on professional

guidance, and still others may resist greater autonomy for indefinite periods of time. Advocates of "parent empowerment" correctly emphasize the critical role that parents play in the development of their children, as well as the enduring responsibility they maintain long after program resources are gone. Some suggest, however, that the concept of empowerment itself can be paternalistic if it is viewed as the giving of power to parents by professionals, rather than the assumption of power by parents themselves. Notwithstanding the critical need for the parenting role to be strengthened, all families who seek the resources of an early childhood intervention program begin inevitably from a position of dependence (Caldell, 1986).

The needs of professionals cannot be ignored in this process, and an endorsement of the ultimate value of parental autonomy must not be equivalent to a dismissal of the value of professional expertise. Service providers are also people with needs for respect, appreciation, and reinforcement of self-worth. Early childhood intervention programs require professional staff with highly refined skills and sensitivities. In many circumstances, years of formal education and practical experience culminate in jobs whose rewards come more from the satisfaction of "making a difference" in a family's life than from significant financial remuneration (Caldell, 1986).

Thus, the process in which parental competence is affirmed cannot succeed if it depends upon a devaluation of professional expertise. It is only when the roles of both partners in the relationship are respected that the potential contributions of each can be realized optimally. Under such circumstances, the professional service provider may be viewed best as the generalist regarding early childhood development, while the parent is considered the ultimate specialist who knows her or his individual child best (Caldell, 1986).

Finally, the frequently difficult problem of deciding who represents "the best interests of the child" in the event of a disagreement determines how much decision-making authority can be optimally divided between parents and professionals. In every situation involving a child's welfare, the parent's claim must be (and typically is) given top priority. There is no denying the societal and political push to reconsider how parental and professional decision-making authority should be balanced in early childhood intervention programs. Various advocacy groups have pushed for greater equality in the parent-professional connection, and the due process provisions

have reinforced these demands, challenging the traditional asymmetry of that relationship. In this extremely delicate field, much work still has to be done (Arnkil, 2003).

2.11. Review of Literature Gaps

Early intervention is defined narrowly under the new law as "developmental services which are designed to meet a handicapped infant's or toddler's developmental needs in any one or more of the following areas: physical development; cognitive development; language and speech development; psychosocial development; or self-help skills".

In ECI, it is necessary to look into four major concerns that have a lot of potential for ushering in a fascinating new era of services for young, vulnerable children and their families (Lazar & Darlington, 1982).

Thus, Issues of rethinking traditional Disciplinary boundaries, Redesigning Service Delivery Systems, Reconsidering parent-professional relationships have reviewed since as each state seeks its own path in meeting the challenges and conceptual battles and political struggles can shape the agenda for early childhood intervention since as each state seeks its own path in meeting the challenges on conceptual battles and political struggles can shape the agenda for early childhood intervention shall be considered in Ethiopia.

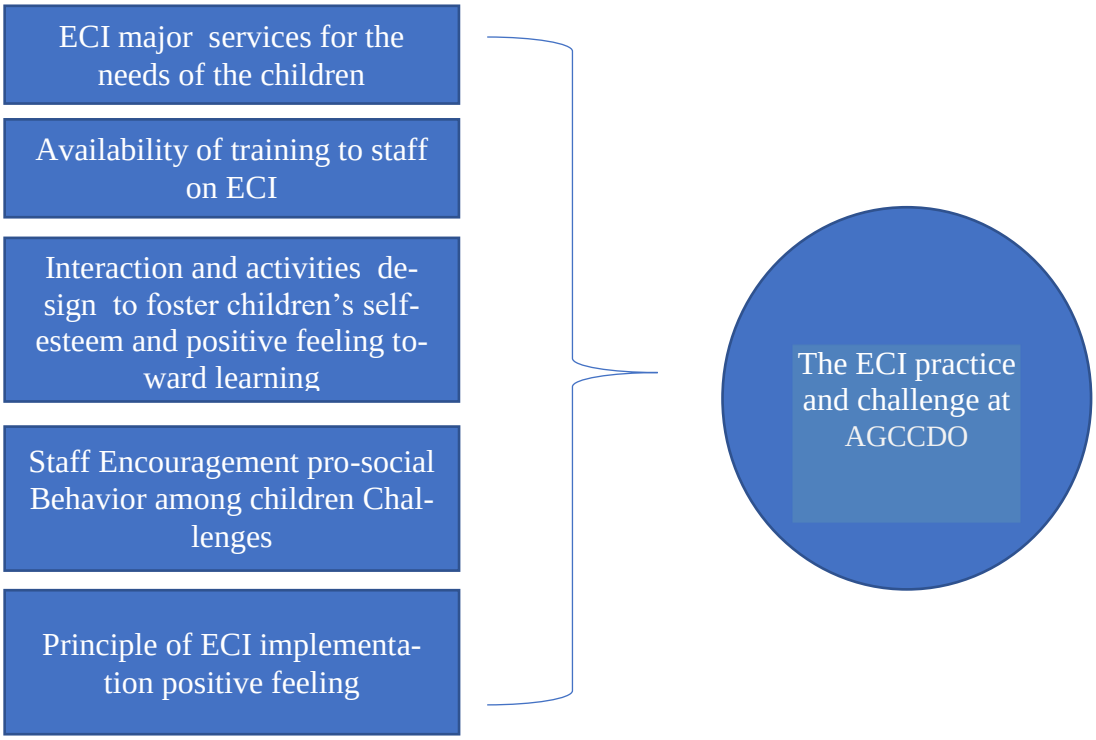
Beside these, matching Service Goals and Recipients Reconsidering parent-professional relationships since at the level of individual service delivery, appropriately trained and experienced professionals are able to deal effectively with the kind of disciplinary overlap and ambiguity just described. At the level of service system organization, however, and particularly at the point where decisions are made about the allocation of public resources, vague boundaries are a bureaucratic nightmare (Kamin, 1974).

The charity model of disability adheres to a conventional view, viewing PWDs as either victims of circumstance or as objects of pity and charity (UNICEF, 2007). PWDs are regarded in this concept as long-term beneficiaries of welfare and support (Duyan, 2007).

2.12 Conceptual Framework

A conceptual framework is a collection of ideas and/or principles that, when combined, form a figure for the study and illustrate the relationship between the research variables (Mugenda, 2003). It is used to explain how the independent and dependent variables relate to one another. The dependent variable is the ECI practice and challenge at AGCDCO. The independent variables are staff encouragement and pro-social behavior among children, the availability of ECI training for staff, interaction and activities designed to foster children's self-esteem and positive feeling improved, and the Principle of ECI implementation positive feeling. This relationship diagrammatically, shown in Figure 1 below

Figure 1 : Conceptual Framework



CHAPTER THREE

3.RESEARCH METHODOLOGY

This chapter describes the research design approach applied, research methods employed for the present study. The discussion starts with the research design, the data source and sampling techniques applied. Data gathering tools and procedure of data collection, the data analysis approach applied and ethical issues and considerations are presented and discussed.

3.1 Research Design

In this study the research design applied was both the qualitative and quantitative approaches. The research method applied include both case study and survey methods research approach have utilized. The survey research design involving the qualitative approach would help to capture data obtained from interview of expert observations, and review of report, research publication. The qualitative research approaches as case study help to probe to identify the current practice of early childhood intervention for children with special needs in AbebechGobena children's care and development organization. While the quantitative data have obtained from structured questionnaire distributed to the parents of children the as survey approach (Creswell, 2009)

3.2 Study Site Description

The target population of this study are staffs , managers, experts and parents of children with special needs working in AbebechGobena children's care and development organization. From the total target population of 250 parents , a total 60 parents of children with special needs who are active learning in 'AbebechGobena Primary School' (Kindergarten to grade 8) the main representative have selected for the quantitative research of survey method. Besides, 10 experts in AbebechGbena have selected from the total of 21 experts purposefully for this this research the 10 exper who work on service deleivery , teachers , administration staff are selected. Since (Creswell, 2009) Purposeful sampling, also known as judgmental or selective sampling, is a non-probability sampling technique where the researcher selects participants based on specific characteristics or

qualities that align with the research objectives. The goal is to select individuals who are most likely to provide rich, relevant, and detailed information about the research topic.

(Creswell, 2009) argued that, in qualitative research, a study area and those participants that best help to understand a problem and research questions are selected purposefully. That means, the selection procedure is deliberate rather than a random process.

This researcher area focused on AbebechGobenaYehetsanatKebekabenaLimatMahber as a contributing to increase in enrolment rates of school aged children including increasing access to an educational facility and improving the quality of education provided.

The primary schools called the 'AbebechGobena Primary School' (Kindergarten to grade 8) and the other located at outskirts of Addis Ababa in Burayou (Kindergarten to grade 4). Both schools provide free education to those children living under the care of AGOHELMA as well as children living in the surrounding areas who would otherwise not be attending school.

Due to time and resource constraints the researcher preferred to undertake the research in one of those schools which is located in Addis Ababa. By the help of parents and experts in the organizations 60 parents of children with special needs and 10 experts in AbebechGobena have selected for this research. The total number of participants of the study are 70 individuals.

3.3 Data Source and Sampling Techniques

The basic data source applied in this research are both primary data source and secondary data source. As a qualitative and quantitative research design, the study is engaged in examining the practice of early childhood intervention and its challenges in AbebechGobena primary school. Thus from intensive field work data collected through different techniques namely in- depth interviews, structure questioner are conducted .

The sampling techniques applied for the survey approach of the quantitative design is a simple random sampling technique using lottery method have employed. Structured questionnaires have distributed for the 60 parents of the children which annexed at the end of this research study.

For the qualitative approach purposive sampling technique have used to select 10 experts and principals management of CBR have purposively select for interview questions which is annexed at the end of this study.

3.4 Data Gathering Tools and Procedure of Data Collection

3.4.1 Structured Interview

According to Zucker (2009), an in-depth interview is the best method for eliciting a participant's thoughts on a specific subject or area, and the interviewer may be persuaded to ask more detailed questions based on the participant's responses. Additionally, during an in-depth interview, the participant is allowed to discuss anything they think is essential, with minimal guidance from the researcher. Experts were asked a number of important questions during this interview. The purpose was to give the respondents the opportunity to contribute to the study in their own words and from their perspective. The researcher creates an interview guide that includes the study's fundamental questions. Each participants/interviewees of the study were asked guided questions and other additional curious questions as needed for discussion.

Interviews with the respondents took place at AbebechGobena Primary School for fifteen days. Every day, discussions lasted between thirty and fifty minutes. Their backgrounds, including age, sex, education, and previous job, were the main emphasis of the first sets of inquiries. These questions put the respondents in their current environment and allowed for a general assessment of their knowledge and expertise with the study problem. The second topic sought firsthand information about the challenges and methods of early childhood intervention.

3.4.2 Structured Questioners

The researcher created questionnaires based on the goal of the study and a review of the literature. The questionnaire was used to evaluate the quality of ECI and the difficulties encountered when implementing ECI in primary schools. Before being implemented, the created draft surveys are reviewed and approved. The surveys were field tested in response to the input. Questions that were unclear or redundant were identified and changed to better serve the goal.

The respondents were asked to write the necessary information in the blank spaces or to place "X" marks in the designated boxes or beneath the "Yes or No" column in the tables that accompanied each question. The method used was self-reported.

To facilitate communication and obtain useful input from the parents of respondents who took part, a structured questionnaire has been produced in English and translated into Amharic.

3.5 Method of Data Analysis and Presentation

The data analysis based on my research is applied in this study. Basically explanatory analysis usedbeside triangulate approach the data collected form the three data sources through observation , interview and questioners were analyzed in line with the research questions. SPSS version 28 software was used for data collected from the questionnaires'.

3.6 Ethical Considerations

Ethical consent letter from the college of education and behavioral studies department of special need education was taken and given to AbebechGobena children's care and development organizationprimary school.

Furthermore, participants or responders were fully informed about the study's objectives. The participants provided their oral consent after hearing a verbal explanation of the research project. Every participant in the study was given the independence, dignity, and respect they deserved. Investigate Participants received assurances that the information they submitted would be kept private and would not be shared with anybody outside of the association.

CHAPTER FOUR

4. RESULT AND DISCUSSION

This chapter deals with presentation, analysis and interpretation of data gathered from sampled questionnaires obtained , interview , date obtained from review of literature. To answer the following research questions: What are current practices and challenges of early childhood intervention in AbebechGobena children's care and development organization.

The result summarized as follows :

4.1 RESULT

4.1.1 Socio-Demographic Characteristics the Respondents

Under this topic demographic characteristic of respondents' sex, age, and educational qualification presented from questionaries' obtained from the parents and experts.

Socio- Demographic Characteristics of Respondents

Figure 2 : Age Characteristics of Respondents

As shown in the figure-2 below, the majority of the respondents from all returned questionnaires of this study 20-30 ages frequency 9 (13%) , 31-40 ages frequency 27 (38.6%), 41-50 ages frequency 11 (16%) , 51-64ages ages frequency 7 (5%) ,were few in number.

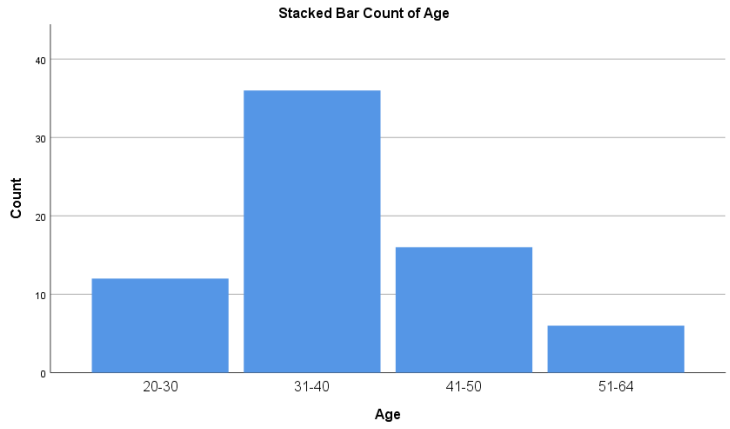


Figure 3 : Gender Characteristics of Respondents

As shown in the figure-3 below, from all participants of this study 50 were female, which was about 75.6 percent from all returned questionnaires. The numbers of male participants were 20, which was about 29.4 percent

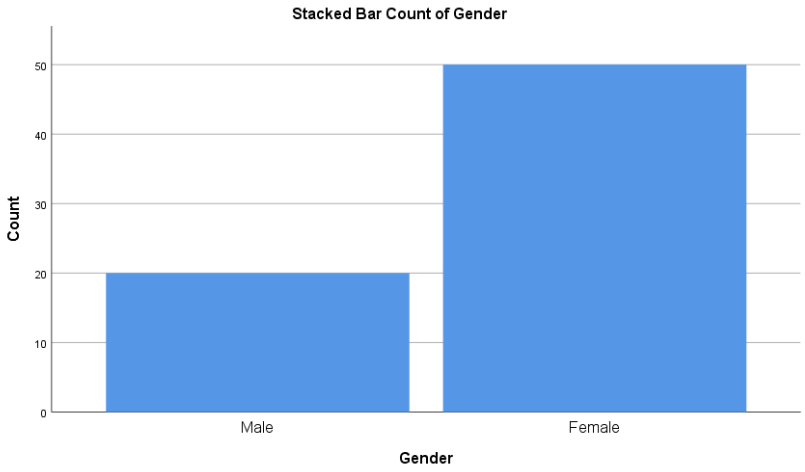
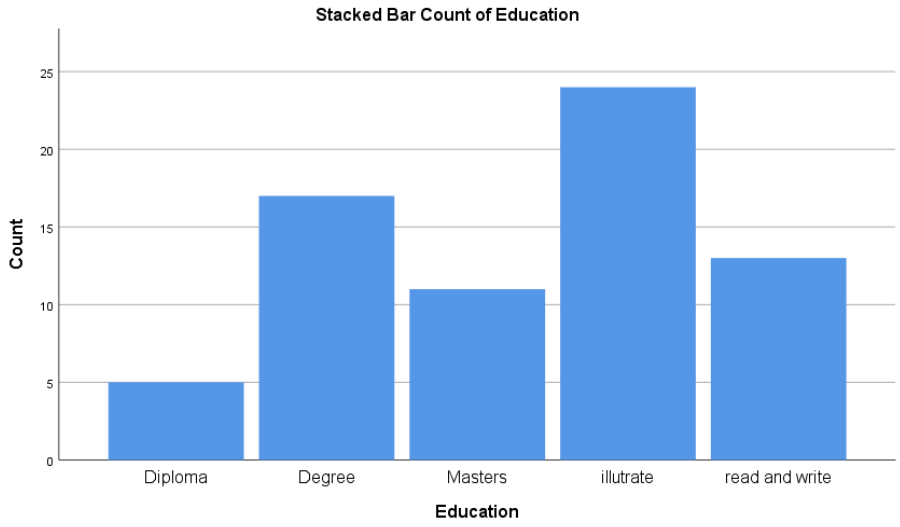


Figure 4 : Educational Characteristics of Respondents

The third item was educational qualification. From the above information, it is possible to conclude that the majority of the respondents were at educational qualification of illiterate 25 and read and write 15 (Basic education) level



4.1. 2 Statistical Result

The discussion attempts to accomplish the objectives of the study and answer the research questions raised during study design.

To measure the effect of practice ECI performance by a means of a five-point Likert scale measurement(1=Very strongly disagree, 2= Disagree, 3= neutral, 4= Agree and 5=Very high strongly agree).

Based on the Likert scale of 1-5 where 1 was “least effect” while 5 was “greatest effect”.

The data collected by using the likert scale measurement and summarized by using descriptive statistics.

Table 1Stastical Resultof ECI Challenges at AGCDC school form Parents :

The detail responses of Parents faced and intervene made for the needs of children andthe remedial action taken about ECI at AGCDC school.

The detail responses about the challenges to intervene for the needs of children. Firstly out of 60 parent respondents 35 (58.34%) replied they agree for the 7 challenges they were asked. Specifically for the lack of knowledge creation about ECI 10 respondent (13.5 %) replied the agree; beside 11 respondent (14%)replied strongly agree. 2 respondents (2.6 %) replied they disagree and 4 respondents (5.2%) replied they are neutral These shows that major challenges parents have faced in ECI practice at **AGCDC is lack of knowedge creation about ECI among staff and parents.** 10 respondents (13.5) replied the agree on relationship between staff and parents are positive, 4 respondents (5.2%) they replied strongly agree , 2 respondents (2.6%) replied they disagree and neutral respectively . These shows that the second most challenges Parents faced at **AGCDC** relationship between staff and parents are positive due to the remedial action they gained. Regarding the challenges of Based on the knowledge that infants and young children develop and learn in the context of their families 5 respondents’ (5.6 %) they replied agree , 2 respondents (2.6) replied neutral and disagree respectively. The challenges regarding CBR principles are well consideredat AGCDC 3 respondents (3.2 %) replied they agree. Challenge regarding the stalk holders should not work as collaboration on awareness creation 2 respondents(2.6) repled they agree.

Table 1: Descriptive Stastical Result of ECI Challenges at AGCDC school from Parents for detail presentionin Appendix I

What are the challenges you face(meaning parents) to intervene for the needs of your child care services at AGCDC school						
Count						
Specific question	strongly disagree	dis agree	neutral	agree	strongly agree	Total
Government bodies and non-government organizational should not work as collaboration on awareness creation	0	0	0	2	0	2
Based on the knowledge that infants and young children develop and learn in the context of their families	0	1	1	5	1	8
relationship between staff and parents are positive	0	1	1	9	4	15
lack of knowledge creation	0	2	4	10	11	27
The CBR principles are well considered	0	0	0	3	0	3
ECI starting from inception stage, work at the school on English language and math's	0	0	1	0	0	1
There are good work environment at the school	0	0	0	1	0	1
others	0	0	0	1	0	1
Total	1	5	9	35	20	60

Table 2 : Descriptive Stastical Result about the kind of changes parents/ experts observe on your child

The detail responses about the kind of changes parents respondents observe on their child 4 respondent replied they strongly agree; beside 15 respondents replied agree change on Physical and cognitive changes and 11 respondent replied agree on change education , 7 respondents replied the agree behavioral change.

The kind of changes parents/ experts observe on your child and the remedial action you gained to face the challenges							
Count							
		strongly disagree	dis agree	neutral	agree	strongly agree	Total
What kind of changes you observe on your child?	Health	0	1	0	2	4	7
	Physical and cognitive	0	0	4	15	9	28
	education	0	2	4	11	5	22
	Behavioral	1	2	1	7	2	13
Total		1	5	9	35	20	60

Figure 5 : Major Services (education , chaild care, health etc) you get for the needs of your child

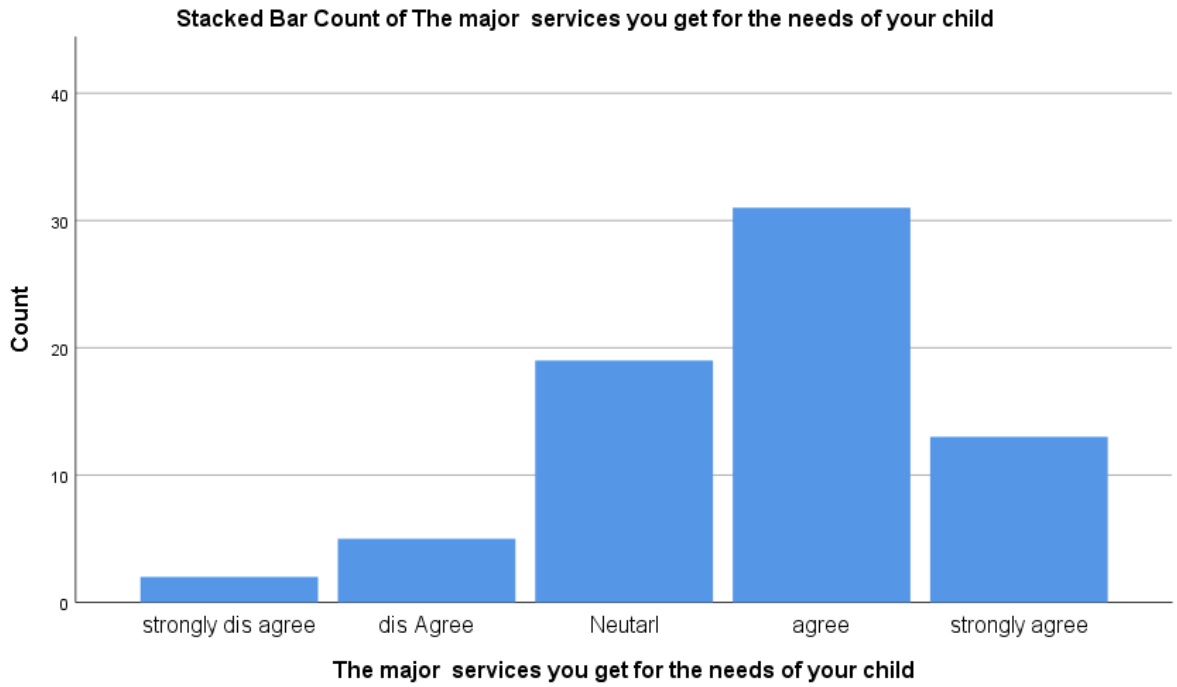


Figure 6 : Staff Encouragement Pro-social Behavior Among Children

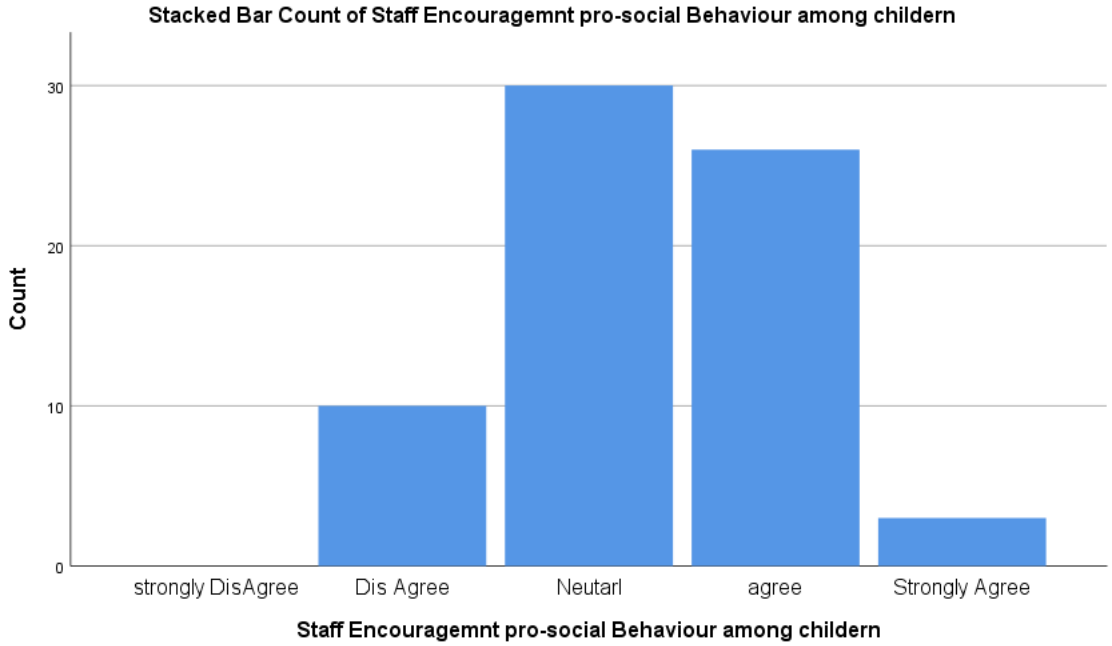


Figure 7 : There are Opportunities for Positive Interaction

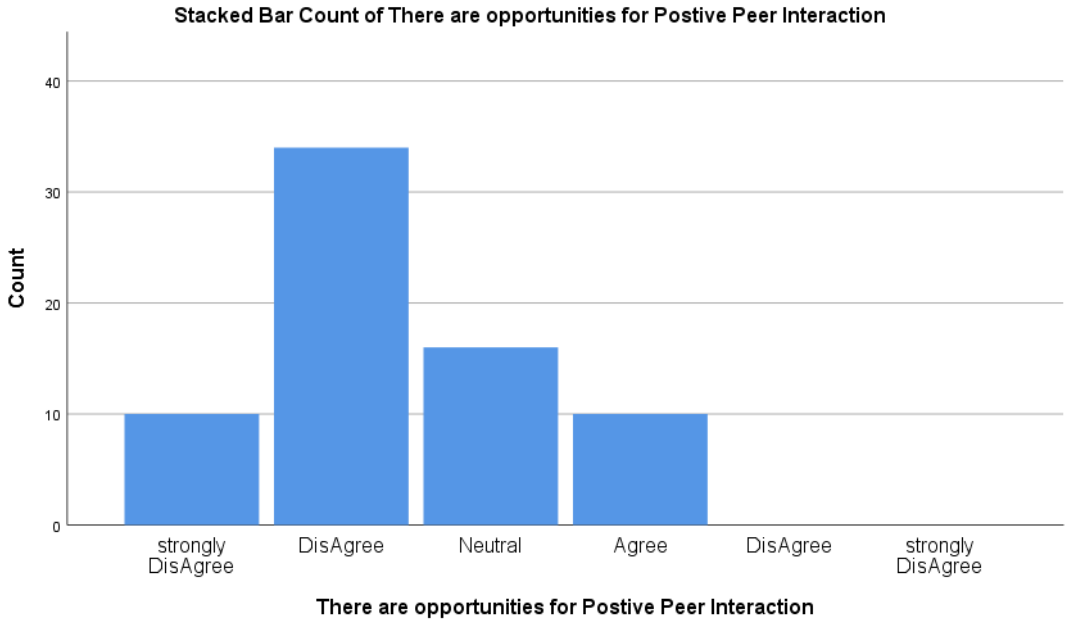
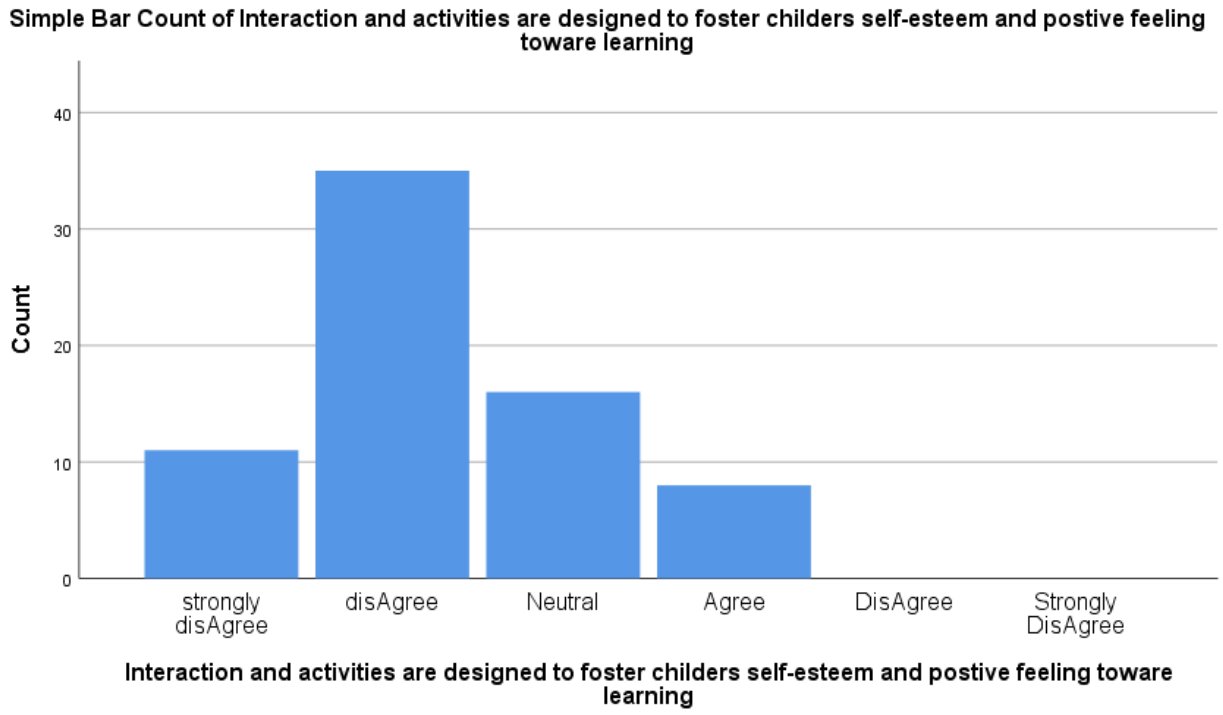


Figure 8 : Interaction and Activities are Designed to Foster Childes Self-esteem and Positive Feeling towards Learning



4.1.3 Result Regression Analysisandconceptual Model

Regressionanalysisisa stasticalmethodthatconsideredtheaveragevaluedistributionsofa dependentvariableand oneormoreindependentvariables.Themethod usedindependent variableas aninputs andassessed theeffects onprojectperformancevariables. Thestudy applied alinearregression model.

The study used linear regression analysistolook intothererelationship andeffectofearly childhood intervention-practice and challenge.For triangulation of primary data,secondary datawasused under data interpretations.

Theregression equation will be: Staff Encouragement and pro-social Behavior among children , Interaction and activities design to foster children's self-esteem and positive feeling toward learning, availability of training to staff on early childhood intervention, Interaction and activities de-sign to foster children's self-esteem and pos-itive feeling staff's performance, major services you get for the needs of your child are the independent varia-bles and principle of early childhood intervention implementation while the early childhood intervention prac-tice and challenge at AbebechGobena NGO is the dependent variable.

$Y=\beta_0+\beta_1X_1+\beta_2X_2+\beta_3X_3+\beta_4X_4+\alpha$ ……..equation # 1

Where: Y is The ECI practice and performance level isthe dependent variable

β_0:,β_1, β_2, β_3 and β_4 is theregression coefficient: α is the slopes of the regression equation,

X_1: ECI major services for the needs of the childern

X_2: Availability of training to staff on early childhood intervention

X_3 : Interaction and activities de-sign to foster children's self-esteem and positive feeling

X_4: Staff Encouragement and pro-social Behavior among children

X_5: Principle of early childhood intervention implementation positive feeling

Table 3 : Linear Regression Analysis of Model Summary

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.552[a]	.424	.554	.065

a. Predictors: (Constant), Interaction and activities are designed to foster Childers self-esteem and positive feeling toward learning, the major services you get for the needs of your child, there are opportunities for Positive Peer Interaction , staff encouragement pro-social Behavior among children, Training in ECI practice has improved the staff's performance

The regression result shows that the model R result is 0.552 , R square is 0.424 , the adjusted R square is 0.554 and .065.

The linear regression results indicate the following:

- **R = 0.552**: This suggests a moderate positive correlation between the independent and dependent variables, indicating a reasonably strong linear relationship.
- **R-squared = 0.424**: This means that 42.4% of the variance in the dependent variable is explained by the model. While not very high, this indicates that the independent variable(s) have a moderate level of explanatory power.
- **Adjusted R-squared = 0.554**: This value, which accounts for the number of predictors in the model, is slightly higher than the R-squared. This suggests that, after adjusting for the number of predictors, the model's explanatory power improves, which is a positive sign. It indicates that adding predictors helps the model explain more of the variance in the dependent variable.

Overall, the model demonstrates a moderate fit to the data, with a reasonable ability to explain the variance in the dependent variable. The slight increase in adjusted R-squared further suggests the model is relatively well-specified.

Table 4: Linear Regression Analysis of coefficients

Coefficients[a]

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	-.903	.907		-.995	.324
The major services you get for the needs of your child	.056	.119	.054	.468	.642
Avaliblity of Training to staff on ECI	.287	.125	.279	2.303	.025
Principle of early childhood intervention implementation	.448	.122	.462	3.671	.001
Staff Encouragemnt and pro-social Behaviour among childern	.275	.134	.249	2.055	.045
Interaction and activities designed help to foster childers self-esteem and postive feeling towared learning	.125	.113	.122	1.108	.273

a. Dependent Variable: ECI challenge and practice

Theresult of standard coefficients valueofthestudytraining in early childhood intervention practice has major services you get for the needs of your child 0.56,Avaliblity of Training to staff on ECI 0.26, Principle of early childhood intervention implementation0.46 ,staff encouragement pro-social behavior among children value 0.24 and interaction and activities are designed to foster children's self-esteem and positive feeling toward learning 0.12and this indicated that 79% of the early childhood intervention practice and challenge variables changeswereexplainedbythe practicevariable, with Sig.=0.32

As shown from table 6 the t variables which is describe the independent variables value Training in ECI practice has improved the staff's performance 3.102, There are opportunities for Positive Peer Interaction 1.420,the major services you get for the needs of your child 1.866, Staff Encouragement pro-social Behavior among children 0.370 , and Interaction and activities are designed to foster children's self-esteem and positive feeling toward learning -.009.These shows that among the all independent variables the last two variables value are the high factor to change the dependent variable.

Primary data collected from questionaries' of parents of children with special needs shows that early childhood intervention provided brings not significant progress in their health and also educational status of the children with special needs. For instance among the all independent variables the staff encouragement prosocial behavior among children t-value is 0.370 , and interaction and activities that were designed to foster children's self-esteem and positive feeling toward learning t-value result -0.009. variables value are the high factor to change the dependent variable.

4.2 Result Obtained from Interview

Interview guide for expertsin AbebechGobena

According to the data collected, Some experts did not take training on how to intervene for the needs of children with special needs, so that it creates challenges to understand the needs of children and understand their personal behavior. sometimes the students also create problems by quarreling each other. Since their parents/care givers are busy to look for them after school, they develop bad behavior because of spending most of their time in their village.

Healthy and well-nourished children are more likely to develop to their full physical, cognitive and socio-emotional potential than children who are frequently ill, suffer from vitamin or other deficiencies and are stunted or underweight. According to the study, children who are not well-nourished takes longer time to be equally competent with other students.

4.3 DISCUSSION

The purpose of this study was to assess the ECI activities found in the AbebechGobena . In order to achieve the desired purpose the following basic questions were raised:

As mentioned in the methodology section, by employing qualitative research method, 60 parents of children with special needs and 10 experts fromAbebechGobena were included in the study. This section discusses on major findings based on the objective of the research.

The participation , empowerment, sustainability and accessibility of the CBR principles reviewed should be considered at the organization since it collectively guide the development and implementation of CBR programs, fostering a holistic and community-driven approach to rehabilitation and social inclusion

Early intervention is defined narrowly under the new law as "developmental services which are designed to meet a handicapped infant's or toddler's developmental needs in any one or more of the following areas: physical development; cognitive development; language and speech development; psychosocial development; or self-help skills".

RESULT AND DISCUSSION: data analysis's and interpretation based of review of the literature is done to reach at the findings of the study. Early intervention to promote social and emotional development can significantly improve mental and physical health, educational attainment and employment opportunities. Early intervention can also help to prevent criminal behaviors especially violent behavior, drug and alcohols misuses and teenage pregnancy.

4.3.1 Practice of Early Childhood Intervention

The detail responses about the challenges to intervene for the needs of children lack of knowledge creation 10 respondent replied agree challenge of lack of knowledge creation; beside 11 respondent replied strongly agree , 10 respondents replied the agree on relationship between staff and parents are positive the remedial action you gained to face the challenges; 3 respondents' replied agree CBR principles are well considered.

4.3.2 Analysis of Current Practices of Early Childhood Intervention

Under this section, the current practices and challenges of early childhood intervention of AbebechaGobenawas presented as follows

Early intervention inAbebechGobena primary school designed to enhance a young child's development. According to the respondents of the study Practice of early childhood intervention program provided for the children with special needs in AbebechGobena primary school is intended to provide different support for children with special needs. Children from low income source families and orphans come to the primary school to attend their education. Those children are not able to get the necessary food, clothing, educational support and

proper medication from their families or care givers. Thus the early childhood intervention program is mainly to support those children in need.

According to the parents (27 respondents) of children with special needs in the school, they send their children to this school for the benefit of their children. They know that there are different kinds of support given for the children in the school. There is food supply for mal nourished students, attend school without payment, proper health support and health education by the support of health extension workers for mothers and children. So that parents can observe changes in the lives of their children.

Some respondents were not able to send their children to this school because of lack of information about the school service for the children and also being ashamed of accepting the fact that their children are in need of different support.

Some other respondents were not sending their children to this school because of not believing that the support may not bring changes in the education and health of their children.

Most of the women participated in the study are single mothers with very low income. They spent most of their time by working heavy works like daily laborer to cover their daily expenses but the money they earn is not enough to buy nutritious food, proper clothing and necessary medicine for their children.

4.3.3 Challenges of Early Childhood Intervention

According to the data collected from the respondents of the study, there the challenges of early childhood intervention at the AbabechGobena primary school are discussed below:

Lack of awareness among parents of children with special needs to work together with teachers for better performance of their children can be observed in the study. Thinking of parents that the support for their children at school is enough and forget to give continuous assistance create challenges in the intervention program.

The challenges of each stage of childhood and of passage into adulthood – especially the challenge of becoming good parents to their own children. In spite of its merits, which have achieved increasing recognition by national and local government and the voluntary sector, the provision of successful evidence-based Early Intervention

programs remains persistently patchy and dogged by institutional and financial obstacles. A move to successful Early Intervention requires new thinking about the relationship between the community and local provider (Holt, 1897).

Early childhood intervention in AbebechGobena primary school has its own challenges.

According to the managers ,staff experts in the school, there are some challenges on working together with parents of children with special needs.

Result

1. **Practice**

- Major Services (education , child care, health etc at AGCDC) you get for the needs of your child most respondents 32 % replied they agree
- Staff encouragement pro social behavior among children most respondents 30 % replied they are neutral
- Opportunities for positive peer interaction at AGCDC 30 % respondents disagree and 10 respondents replied they agree
- Statically Result about the kind of changes parents/ experts observe on your child: 4 respondent replied they strongly agree; beside 15 respondents replied agree change on Physical and cognitive changes and 11 respondent replied agree on change education , 7 respondents replied the agree behavioral change.

2. **Qualitative and quantitative**

The regression result shows that the model R result is 0.552 , R square is 0.424 , the adjusted R square is 0.554 and).065. Overall, the model demonstrates a moderate fit to the data, with a reasonable ability to explain the variance in the dependent variable. The slight increase in adjusted R-squared further suggests the model is relatively well-specified.

3. Challenges

The responses from parents regarding the challenges they faced and the interventions made to address the needs of children, as well as the remedial actions taken for Early Childhood Intervention (ECI) at AGCDC school, are as follows:

Out of 60 parent respondents, 35 (58.34%) agreed with the 7 challenges presented to them. Specifically, regarding the lack of knowledge creation about Early childhood intervention, 10 respondents (13.5%) agreed, while 11 respondents (14%) strongly agreed. In contrast, 2 respondents (2.6%) disagreed, and 4 respondents (5.2%) remained neutral. These responses indicate that the primary challenge faced by parents in Early childhood intervention practice at AGCDC is the insufficient knowledge creation about early childhood intervention among both staff and parents.

Regarding the relationship between staff and parents, 10 respondents (13.5%) agreed that it was positive, while 4 respondents (5.2%) strongly agreed. 2 respondents (2.6%) disagreed, and 2 respondents (2.6%) were neutral. These responses suggest that the second most significant challenge parents faced at AGCDC was related to the staff-parent relationship, though the remedial actions taken have helped to improve this relationship.

The analysis of parent responses reveals two major challenges faced in Early Childhood Intervention (ECI) at AGCDC School. First, a significant portion of parents (58.34%) agreed with the 7 challenges presented, highlighting that a primary issue was the **lack of knowledge creation aboutearly childhood intervention**among both parents and staff. This points to a need for enhanced training and awareness programs to bridge the knowledge gap.

The second challenge identified by parents relates to the **relationship between staff and parents**. Although the majority of parents reported a positive relationship (13.5% agreed and 5.2% strongly agreed), the responses suggest that there is room for improvement in communication and collaboration between staff and parents. De-

spite this, the remedial actions taken seem to have positively impacted this relationship, as seen by the relatively high percentage of parents who view it as positive.

In summary, the two key challenges identified by parents—insufficient knowledge about early childhood intervention and staff-parent relationship issues—highlight areas for potential intervention. Addressing these issues could improve the effectiveness of ECI programs at AGCDC School, benefiting both parents and children.

CHAPTER FIVE

5. CONCLUSION AND RECOMMENDATION

5.1. CONCLUSION

Early childhood intervention is crucial not only for supporting children's development but also for addressing developmental delays or disabilities. When applied effectively, ECI can boost educational success, enhance social and emotional development, improve mental and physical health, and increase employment prospects later in life. As our understanding of child development grows, our capacity to provide tailored interventions that optimize outcomes for young children also improves.

Early childhood intervention plays a key role in fostering children's development and unlocking their full potential. By addressing developmental delays and disabilities early on, during the critical early years, intervention programs can have long-term positive effects on children's cognitive, social, and emotional growth. The impact of early intervention extends beyond childhood, influencing the overall course of a child's life and helping them reach their maximum potential.

However, early childhood intervention faces challenges such as inadequate collaboration between experts, teachers, and parents, a shortage of skilled professionals, and a limited understanding of its importance. Key components of Early childhood intervention, such as availability, proximity, affordability, interdisciplinary teamwork, and coordination, are all interconnected and must be considered together. Early childhood intervention is a fundamental right for every child and their family, ensuring they receive the necessary support. The goal of early childhood intervention is to empower the child, the family, and the service providers, helping to create a more inclusive and cohesive society that recognizes the rights of children and their families.

At the AbebechGobena Children's Care and Development Organization, several challenges were identified in their early childhood intervention practices. These include a lack of knowledge sharing among staff and parents, poor collaboration between stakeholders, and insufficient focus on health and physical well-being. There is also a need for a more holistic, family-centered approach, as well as greater attention to emotional and social devel-

opment. Additionally, there is inadequate focus on improving English and math skills in schools, and a lack of incentives and capacity-building training for staff to better understand early childhood intervention.

5.2 **RECOMMENDATION**

In order to improve the problems that were identified by the study, the following recommendations were forwarded:

- Early childhood intervention shallbe started from the earliest stages, addressing both health and physical well-being, while also focusing on emotional and social preparation.
- Training shall be provided for caregivers and parents.
- Professional development programs and incentives packages shall be applied for staffs.
- The government, organizations, and relevant bodies shall work to motivate early childhood intervention workers.
- More professionals specializing in early childhood intervention shall be trained and produced by the organization, government, and other relevant bodies.
- To guarantee that children and their families receive the assistance they need, their needs and rights will be respected.
- All populations in need of early childhood intervention shall be reached.
- Quality and equality in the provision of services shall be ensured.
- Early childhood intervention shall be effectively implemented with a focus on availability, accessibility, affordability, interdisciplinary collaboration, diversity, and coordination.
- Efforts shall be made by organizations, the government, and relevant bodies to raise awareness about early childhood intervention through further research.
- Decision-makers shall be engaged in early childhood intervention practices, collaborating with government and non-government organizations to raise awareness.

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APPENDICES

Appendix 1 Questionnaire

Dear respondant,

The purpose of this questionnaire is to collect and acquire the relevant first-hand information that would be required to conduct a study on "Early childhood intervention practices and challenges in AbebechGobena children's care and development organization." As a result, your response in this area significantly contributes to the study's successful completion. Your participation and the time you invested in filling out this questionnaire are greatly appreciated by the researcher.

Section I Demographic characteristics

1. Sex A. Male B. female

2. Age: A. 25 – 30 B. 31 – 35

C. 36 – 40 D. 41 – 45 E. Above 45 years

3. Educational Qualification:

A. illiterate B. Read and write C. certificate

D. Diploma Holder E. Another, please specify----------

Section II. This part of the questionnaire covers items related with the topic.

1. How do you rate whether or not there are opportunities for Positive Peer Interaction?

   A. Strongly agree B. Agree C. Neutral

   D. Disagree E. Strongly disagree

2. How do you rate whether or not there are Interaction and activities are designed to foster Children self-esteem and positive feeling toward learning?

   A. Strongly agree B. Agree C. Neutral

   D. Disagree E. Strongly disagree

3. How do you rate the level of school and the NGO Staff encouragement pro-social Behavior among children, helping, independent, confortable children fairly and equitability?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

4. How do you rate the major services you get for the needs of your child?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

5. How do you rate the practice of early childhood intervention in the organization?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

6. How do you rate the practice of ECI procedures influenced CBR practices and performance?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

7. How do you rate the level of Staff encouragement pro-social Behavior among children?

Agree?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

8. How do you rate the level of training availability in ECI practice has improved the staff's performance?

A. Strongly agree B. Agree C. Neutral

D. Disagree E. Strongly disagree

9. What are the challenges you face to intervene for the needs of your child?

A. The knowledge that infants and young children develop and learn in the context of their families is positive

B. The relationship between the staff ,care givers and parents are positive

C. lack of knowledge creation

D. There are sufficient availability of CBR principles are not considered at the organization

E. There is positive government bodies and non-government organizational should not work as collaboration on awareness creation

F. ECI starting from inception stage

G. There is enough work on emotional and social preparation,

H. Others

10. How do you rate the Practice of ECI in the NGO ?

A. Agree B. Neutral D. Disagree

E. Strongly agree F. Strongly disagree

11. How do you rate the remedial action you take to face the challenges?

A. Agree B. Neutral D. Disagree

E. Strongly agree F. Strongly disagree

Appendix 2 Interview Question

Interview Questionnarie for experts and teachers inAbebechGobena primary school

12. How do you rate whether or not there are opportunities for Positive Peer Interaction?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

13. How do you rate whether or not there are Interaction and activities are designed to foster Children self-esteem and positive feeling toward learning?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

14. How do you rate the level of school and the NGO Staff encouragement pro-social Behavior among children, helping, independent, confortable children fairly and equitability?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

15. How do you rate the major services you get for the needs of your child?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

16. How do you rate the practice of early childhood intervention in the organization?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

17. How do you rate the practice of ECI procedures influenced CBR practices and performance?

    B. Strongly agree B. Agree C. Neutral

    E. Disagree E. Strongly disagree

18. How do you rate the level of Staff encouragement pro-social Behavior among children?

    Agree?

A. Strongly agree B. Agree C. Neutral

F. Disagree E. Strongly disagree

19. How do you rate the level of training availability in ECI practice has improved the staff's performance?

B. Strongly agree B. Agree C. Neutral

F. Disagree E. Strongly disagree

20. What are the challenges you face to intervene for the needs of your child?

a. The knowledge that infants and young children develop and learn in the context of their families is Positive

b. The relationship between the staff ,care givers and parents are positive

c. lack of knowledge creation

d. There are sufficient availability of CBR principles are not considered at the organization

e. There is positive government bodies and non-government organizational should not work as collaboration on awareness creation

f. ECI starting from inception stage

g. There is enough work on emotional and social preparation,

h. Others

21. How do you rate the Practice of ECI in the NGO ?

A. Agree B. Neutral D. Disagree

G. Strongly agree F. Strongly disagree

22. How do you rate the remedial action you take to face the challenges ?

A. Agree B. Neutral D. Disagree

G. Strongly agree F. Strongly disagree