Eurlyaid®
THE EUROPEAN ASSOCIATION ON EARLY CHILDHOOD INTERVENTION

LIGHTING THE WAY FOR INCLUSIVE FUTURES

Networks of **Support**

Working **Together**

Learning in Everyday **Life**

Early & Equal **Opportunities**

Screening & Identification with **Respect**

Families as **Leaders**

Inclusion Without **Borders**



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Manifesto reflecting Eurlyaid's long-standing commitment to high-quality Early Childhood Intervention across Europe.

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INTRODUCTION – LIGHTING THE WAY FOR INCLUSIVE FUTURES

A lighthouse is a tall tower with bright light at the top, typically located near the shore of a body of water. Its purpose is to warn ships of dangerous obstacles and guide them safely to their destination. They are an iconic symbol of safety, security, and stability. So is Early Childhood Intervention (ECI), in its mission of supporting and guiding families on their journey to raise their children with Special Needs. The guidance that ECI provides comes from research that guides how to effectively implement evidence-based practices (EBP) to support families & children in their daily lives and contexts, respecting their cultures and values, as the family is the captain of their ship.

Early Childhood Intervention in Europe: Lighting the Way for Inclusive Futures
Eurlyaid was founded in 1988. During the first years after 1988 the group of parents, professionals and researchers published a Manifesto to emphasize the following: Starting from the growing recognition of the importance of early identification and intervention Eurlyaid aims to contribute to the development of a common EC policy and legislation.

Here we describe a comprehensive framework for early intervention, presented as a preliminary manifesto. First of all the Manifesto gives a definition of key concepts, delineates the target group and states the rationale behind, and the content, of early intervention. Secondly, we present the conditions and demands necessary to attain the best quality early intervention, and make a number of recommendations.

In that era knowledge about ECI was not as extensive and advanced as it is now.
It's with gratitude to the colleagues that started Eurlyaid and the colleagues that joined in the following decades, we are pleased to present you an "updated" version.

Early Childhood Intervention (ECI) services and support for vulnerable children and their families, has become confidently established and it is founded conceptually and empirically in developmental models that suggest the importance of early experience and the greater malleability of early development. Evidence based practices are the foundation for Quality ECI practices.

BEAM 1 – FAMILIES AS LEADERS

Adopting a family-centered approach to ECI

Families are at the heart of ECI, so ECI services aim to support families and significant caregivers as mediators on children's acquisition of competencies within their natural environments, enabling children and their families to meaningfully participate in their daily environment and build relationships with key people in their lives. ECI services should enable and empower children and their families to be the main actors in the ECI process.

Family-centered is defined "as a particular type of help giving practice that involves adherence to principles and values that include treating families and family members with dignity and respect; information sharing so that families can make informed decisions; acknowledging and building on family member strengths; active family member participation in early childhood intervention; and the provision or mobilization of supports and resources in response to family concerns and priorities" (Dunst & Espe-Sherwindt, 2016; Dunst, 2002; Espe-Sherwindt, 2008; Serrano & Boavida, 2011; Carvalho et al., 2019).

The interacting influences of genes and experience entirely influence the architecture of the developing brain, and the active ingredient for this to happen is the reciprocity of the child's interactions with their parents and other caregivers in the family or in the community (National Scientific Council on the Developing Child, 2007).

As stated by Garbarino (2017), families are "the headquarters for Human development".

Families as Leaders

Early Childhood Intervention recognizes and empowers families as the central partners and decision-makers in their child's journey.

ECI builds on family strengths, supports informed choices, and respects the dignity, knowledge, and priorities of every family.

BEAM 2 – EARLY & EQUAL OPPORTUNITIES

Early Years – a Window of Opportunity

The past several decades have seen remarkable progress in understanding child development, particularly neurological development. Neurodevelopmental science has contributed to the scientific evidence of EI establishing a strong empirical base that demonstrates the importance of early years for life learning experience.

Neuroplasticity refers to the modifying capacity of the brain through experience.
This capacity varies throughout life but it is stronger in the first years of life. So early years constitute a "window of opportunity" for developmental change and to repair trajectories of the brain architecture that may rupture due to children's genetic predispositions and developmental problems.

The models that have emerged suggest that development is dynamic and, from the very beginning, involves the continuous interaction of genetic, organismic, and environmental factors.

There are several reasons for the provision of early childhood intervention services for young children who have Special Needs or developmental delays: ethical, developmental, economic, and empirical (Bailey et al., 1998; Moore, 2005; Moore et al., 2010).

As described by Moore et al. (2010), the ethical rationale for ECI childhood intervention is concerned with society and collective responsibilities to meet and protect child and family rights to these services and practices.

The developmental rationale for ECI is based on the research evidence related to how young children develop, including early brain development and its vulnerability to neglect and young children's receptivity to learning (Guralnick, 1998; Sameroff, 2009; Shonkoff, 2010; Shonkoff & Phillips, 2000; Shonkoff et al., 2009; Sroufe, 2009; Perry, 2002).

Research has long established that ECI support is more effective than intervening later and for families, the earlier they get support, the easier it will be for them to adapt to the challenges they face of having a child with Special Needs.

As far as the economic rationale the research has clearly demonstrated that investments made in the early years of life are cost effective as they save the need for costlier spending on remediation or other interventions later in the child's life course (Cunha & Heckman, 2009, 2010; Cunha et al., 2010; Heckman, 2000; Kershaw et al., 2009; Perez-Johnson & Maynard, 2007; Shonkoff & Phillips, 2000; Schweinhart, 2004).

The empirical rationale reinforces the importance and advantages of ECI for children with Special Needs through the research evidence in early intervention.

Early & Equal Opportunities

The early years represent a critical window of opportunity for development. ECI ensures timely, accessible, and high-quality support so that all children, regardless of background or location, have equal opportunities to thrive.



BEAM 3 – NETWORKS OF SUPPORT

Importance of Social Support in ECI

Within the ecological perspective of ECI, social support became a key concept for understanding families and ways of coping with a child who is at-risk or has been diagnosed with Special Needs.

Research findings demonstrate that social support, personal well-being, parenting interactional styles, and child development are both conceptually and empirically related, and that variation in child development is attributable to social support and well-being more so than to family Socioeconomic Status (Espe-Sherwindt & Serrano, 2020).

Dunst proposes a social systems definition of ECI as "the different types of parenting supports provided by early childhood practitioners and other social network members, that provide parents the time, energy, knowledge and skills, to engage their children in everyday child learning opportunities, that promote and enhance both child and parent confidence and competence".

The practical implications from all of the assumptions described above force us to conceptualize ECI services as a diverse range of experiences that should be provided to families with children at-risk through formal and informal support networks.

Social support functions as a "safety net", a net that holds families up or prevents them from falling (Espe-Sherwindt & Serrano, 2020; Kyzar et al., 2012; Seligman & Darling, 2009).

Networks of Support

Families benefit from strong formal and informal networks.

ECI strengthens and connects community-based supports that promote family wellbeing, resilience, and confidence in everyday life.

BEAM 4 – WORKING TOGETHER

Articulation of Services

The move towards more integrated service delivery has been driven by a growing awareness of how fragmented services for young children and their families are, and how that fragmentation undermines the capacity of the service system to support children and families effectively.

Cross-sectoral cooperation between the health, education and social services must be an essential component of services to ensure the child's well-being and the cornerstones for successful realization of ECI services (Guralnick, 2005, 2008, 2013).

The complexity of problems encountered by children with Special Needs and their families is not solved by only one discipline or specific service view; it needs coordination and a transdisciplinary view which requires rethinking ways of providing services often fragmented and forcing families to deal with a myriad of different services and professionals, adding stress to their lives (Bruner, 1991; Bruder & Bologna, 1993; Bruder, 2010; Fine, Pancharatnam & Thomson, 2005).

The transdisciplinary approach in ECI fosters collaboration across disciplines to provide holistic, personalized support for children with special needs and their families. By sharing expertise, professionals and families ensure coordinated family-centered services that lead to better outcomes and family wellbeing.

Working Together

Effective ECI requires and enables coordinated, transdisciplinary collaboration across health, education, and social services.

ECI reduces fragmentation and promotes shared responsibility to deliver coherent, family-centered support.

BEAM 5 – LEARNING IN EVERYDAY LIFE

How Children Learn

Translating evidence-based neuroscience into functional application for best practice takes into consideration that learning takes place through play, repetition of meaningful activities, and participation in natural learning opportunities that occur in everyday routines and activities as part of family and community life (Dunst, 2020; McWilliam, 2010; Bruder & Dunst, 2011; Adams et al., 2013).

This means that learning happens every day in continuous interactions between children and their environment (significant adults that spend most time with children as well as other children and materials).

Therapy sessions represent a tiny part of the amount of learning opportunities that children naturally experience, so this means that the knowledge base of the different ECI professionals should be embedded in solutions thought together with families and caregivers who spend most time with the children to ensure children's full participation in daily learning opportunities. Play is the motor of child development and learning in the early years.

Learning in Everyday Life

Children learn and develop through play, relationships, and participation in daily routines.

ECI builds on natural learning opportunities within family and community.

BEAM 6 – SCREENING & IDENTIFICATION WITH RESPECT

Early detection is crucial for effective support.
Early identification of developmental differences is essential to ensure timely access to appropriate support for children and their families. Screening and identification are core components of Early Childhood Intervention (ECI), as they enable early responses during periods of heightened developmental plasticity and reduce the risk of secondary difficulties (Guralnick, 1998; Shonkoff & Phillips, 2000).

Screening and identification should never be understood as isolated technical or diagnostic procedures. Rather, they are relational and contextual processes that take place within the child's family, cultural environment, and everyday life. Research consistently emphasizes that how concerns are identified, communicated, and followed up significantly influences parental well-being, trust in services, and engagement in intervention processes (Espe-Sherwindt, 2008; Dunst & Espe-Sherwindt, 2016).

Respectful screening is grounded in partnership with families. Parents and caregivers are often the first to recognize developmental concerns, and their observations, experiences, and interpretations represent a critical source of information (Guralnick, 2005; Sameroff, 2009). Screening processes should therefore be based on open dialogue, shared decision-making, and transparent information sharing, enabling families to make informed choices and actively participate in subsequent steps.

Cultural sensitivity and respect for family values are essential elements of ethical screening practices. Screening tools and procedures must be applied with awareness of cultural, linguistic, and contextual diversity, avoiding deficit-based interpretations and stigmatizing language (Shonkoff et al., 2009; Moore et al., 2010). A strengths-based approach supports families in recognizing children's competencies, resources, and potential, alongside areas where additional support may be beneficial.

Screening is not labeling. It is not a diagnosis, nor should it define a child's identity or future. Instead, screening serves as an entry point to guidance, support, and coordinated services that respond to the needs and priorities of the child and family (Dunst, 2002; Meisels & Shonkoff, 2000).

Ethical screening practices require that identification is meaningfully linked to action, ensuring continuity of support rather than uncertainty, delay, or exclusion.

Effective screening and identification depend on coordinated systems across health, education, and social services. Clear referral pathways, shared responsibilities, and ongoing communication among professionals are necessary to prevent fragmentation and service gaps (Bruder, 2010; Guralnick, 2013). When screening is embedded within an integrated ECI system, families experience smoother transitions and more coherent, family-centered support.

By ensuring that screening and identification are conducted with respect, sensitivity, and partnership, Early Childhood Intervention systems promote trust, early engagement, and equitable access to support, thereby strengthening developmental outcomes and family well-being.

Screening & Identification with Respect
Early screening and identification support timely access to appropriate services.
ECI conducts screening in partnership with families, guided by respect, cultural sensitivity, and a focus on strengths, opening pathways to support rather than labels.

BEAM 7 – INCLUSION WITHOUT BORDERS

Inclusion and Natural Environments

In order to promote child and family inclusion, autonomy and sustainability of the intervention process, support services should occur in children's natural environments.

The traditional clinical or rehabilitative approach (in which children were 'treated' by specialists in clinical settings) limits the opportunities the child has to practice the skills they need to develop and cannot guarantee that the child will transfer those skills to everyday settings. Accordingly, this form of intervention is being replaced by a natural learning environments approach in which professionals and families seek to identify and make use of natural learning opportunities that occur in the course of children's everyday home and community routines (Moore, 2010).

Natural learning environments include family and community life, child care or kindergarten (Bruder & Dunst, 1999; Dunst & Bruder, 2002; Dunst et al., 2010). ECI professionals should provide services and support within children's routines and daily activities to promote full participation of children in learning experiences and inclusion.

Inclusion Without Borders

Every child has the right to belong, participate, and grow within their family and community. ECI advocates for inclusive systems and policies that uphold children's rights and promote participation across cultures, contexts, and borders.

FROM PRINCIPLES TO SYSTEMS

The actual state of development in ECI is a challenge for all professionals and stakeholders to engage themselves in further improvements in the context of the above-cited UN Conventions which were ratified in most of the countries.

In order to develop successful and effective ECI services, it is vital that governments ensure that services can be developed in a proper way through broad national strategies. Among others, funding models, a comprehensive legal framework and professional training should all support and empower community-based services, with a focus on working with families and children within their natural environments.

In some countries some work has been done. Much remains in many countries in Europe to transform it into a free and universal systems approach of high-quality connected services for all children and families, reconfiguring early childhood intervention and family support services and guaranteeing their rights.

To create accessible, inclusive, and high-quality ECI services for all children, it is essential for governments to adopt comprehensive national strategies that ensure these services are properly developed and sustained.

Key factors for success include establishing long-term funding, a solid legal framework, and rigorous professional training to support community-based services.

To truly transform ECI into a free, universal, and cohesive system, these reforms should be guided by three core strategies: partnership, empowerment, and advocacy.

Effective partnerships require enhanced collaboration among diverse stakeholders, including cooperation with government, International Development Agencies (IDAs), NGOs, and local organizations.

Empowerment should focus on building capacities through training for caregivers, service providers, and professionals.

Advocacy must target parental and legislative levels, fostering awareness, promoting children's rights, and enforcing legal protections.

Moreover, key pillars of service transformation must include improved access to quality services, family-centered care, effective coordination, and accountability.

By strengthening these dimensions, we can create a sustainable ECI system that provides tailored support for every child and family, ensuring they have equal opportunities and the right to high-quality early intervention.



REFERENCES

Adams, R. C., Tapia, C., & The Council on Children with Disabilities. (2013). *Early intervention, IDEA Part C services, and the medical home: Collaboration for best practice and best outcomes. Pediatrics, 132*(4), 1073–1088.

Bailey, D. B., McWilliam, R. A., Buysse, V., & Wesley, P. W. (1998). Inclusion in the context of competing values in early childhood education. *Early Childhood Research Quarterly, 13*(1), 27–47.

Bruder, M. B. (2010). Early childhood intervention: A promise to children and families for their future. *Exceptional Children, 76*(3), 339–355.

Bruder, M. B., & Bologna, T. (1993). Collaboration and service coordination for effective early intervention. In *Family-centered early intervention with infants and toddlers: Innovative cross-disciplinary approaches* (pp. 103–127). Brookes Publishing.

Bruder, M. B., & Dunst, C. J. (1999). Expanding learning opportunities for infants and toddlers in natural environments: A chance to reconceptualise early intervention. *Zero to Three, 20*(3), 34–36.

Bruder, M. B., & Dunst, C. J. (2011). Infant, toddler and preschooler inclusion in community activities. *Revista de Educación Inclusiva, 4*(3), 21–34.

Bruner, C. (1991). *Thinking collaboratively: Ten questions and answers to help policy makers improve children's services.* ERIC

Carvalho, L., Almeida, I., Felgueiras, I., Leitão, S., Boavida, J., Santos, P., Serrano, A., Brito, A., Lança, C., Pimentel, J., Pinto, A., Grande,C., Brandão, T., & Franco, V. (2019). *Recommended Practices in Early Childhood Intervention: A Guidebook for Professionals. Eurlyaid.*

Cunha, F., & Heckman, J. J. (2009). The economics and psychology of inequality and human development. *Journal of the European Economic Association, 7*(2–3), 320–364.

Cunha, F., & Heckman, J. J. (2010). *Investing in our young people*. NBER Working Paper No. 16201.

Cunha, F., Heckman, J. J., & Schennach, S. M. (2010). Estimating the technology of cognitive and noncognitive skill formation. *Econometrica, 78*(3), 883–931.

Dunst, C. J. (2000). Revisiting "rethinking early intervention". *Topics in Early Childhood Special Education, 20(2)*, 95–104.

Dunst, C. J. (2002). Family-centered practices: Birth through high school. *Journal of Special Education, 36*, 139–147.

Dunst, C. J. (2007). Early intervention for infants and toddlers with developmental disabilities. In *Handbook of developmental disabilities* (pp. 161–180).

Dunst, C. J. (2020). Everyday learning opportunities of young children with and without developmental disabilities or delays. *International Journal of Early Childhood Environmental Education, 7*(3), 23–41.

Dunst, C. J., & Bruder, M. B. (2002). Valued outcomes of service coordination, early intervention, and natural environments. *Exceptional Children, 68*(3), 361–375.



REFERENCES

Dunst, C. J., & Espe-Sherwindt, M. (2016). Family-centered practices in early childhood intervention. In *Handbook of early childhood special education* (pp. 37–55).

Dunst, C. J., & Espe-Sherwindt, M. (2017). Contemporary early intervention models, research, and practice. In *Handbook of special education* (pp. 831–849).

Dunst, C. J., Raab, M., Trivette, C. M., & Swanson, J. (2010). Community-based everyday child learning opportunities. In R.A. McWilliam (Ed.), *Working with families of young children with special needs* (pp. 60–92). The Guilford Press.

Espe-Sherwindt, M. (2008). Family-centred practice: Collaboration, competency and evidence. *Support for Learning, 23,* 136–143. doi.org/10.1111/j.1467-9604.2008.00384.

Espe-Sherwindt, M., & Serrano, A. M. (2020). "I felt alone": The importance of social support for early intervention. *Educação,* 43(1). doi.org/10.15448/1981-2582.2020.1.35476

Fine, M., Pancharatnam, K., & Thomson, C. (2005). *Coordinated and integrated human service delivery models* (No. SPRC Report 1/05). Social Policy Research Centre, UNSW.

Garbarino, J. (2017). Children and families in the social environment: Modern applications of social work. Routledge.

Guralnick, M. J. (1998). The effectiveness of early intervention for vulnerable children. *American Journal on Mental Retardation,* 102, 319–345.

Guralnick, M. J. (Ed.). (2005). *The developmental systems approach to early intervention*. Baltimore: Brookes.

Guralnick, M. J. (2008). International perspectives on early intervention. *Journal of Early Intervention, 30*(2), 90–101.

Guralnick, M. J. (2013). Developmental science and preventive interventions. *Infants and Young Children, 26*(4), 270–279.

Heckman, J. J. (2000). *Invest in the very young.* Ounce of Prevention Fund.

Kershaw, P., Anderson, L., Warburton, B., & Hertzman, C. (2009). by 15: *A comprehensive policy framework for early human capital investment in BC.* Vancouver: University of British Columbia, Human Early Learning Partnership. www.earlylearning.ubc.ca/documents/2009/15by15-Full-Report.pdf

Kyzar, K. B., Turnbull, A. P., Summers, J. A., & Gómez, V. A. (2012). Family support and family outcomes. *Research & Practice for Persons with Severe Disabilities, 37*(1), 31–44.

McWilliam, R. A. (2010). *Routines-based early intervention.* Brookes Publishing.

Meisels, S. J., & Shonkoff, J. P. (Eds.). (2000). *Handbook of Early Childhood Intervention* (2nd ed.).

Moore, T. G. (2005). Why intervene early? In *Does this child need help?*

REFERENCES

Moore, T., Kennedy, A., McLoughlin, J., Gavidia-Payne, S., & Forster, J. (2010).
DEECD Early Childhood Intervention Reform Project. National Scientific Council on the Developing Child. (2007).

Boyce, W. T., Cameron, J., Duncan, G. J., Fox, N. A., Greenough, W. T., Gunnar, M. R., ... & Levitt, P. (2007).
The Science of Early Childhood Development. National Scientific Council on the Developing Child.

Odom, S. L., & Wolery, M. (2003). Evidence-based practices. *The Journal of Special Education, 37*(3), 164–173.

Perry, B. D. (2002). Childhood experience and genetic potential. *Brain and Mind, 3*(1), 79–100.

Perez-Johnson, I., & Maynard, R. (2007). Early targeted interventions. *Peabody Journal of Education, 82*(4), 587–616.

Reynolds, A. J. (2002). Early childhood interventions. *Focus, 22*(1), 112–117.

Sameroff, A. (2009). *The transactional model of development.*

Schweinhart, L. J. (2004). *The High/Scope Perry Preschool Study Through Age 40.*

Seligman, M., & Darling, R. (2009). *Ordinary families, special children* (3rd ed.).

Serrano, A. M., & Boavida, J. (2011). Early Childhood Intervention.: The Portuguese pathway towards inclusion.
Revista de Educación Inclusiva, 4(1), 123-138.

Shonkoff, J. P. (2010). Building a new biodevelopmental framework. *Child Development, 81*(1), 357–367.

Shonkoff, J. P., & Phillips, D. A. (Eds.). (2000). *From Neurons to Neighborhoods.*

Shonkoff, J. P., Boyce, W. T., & McEwen, B. (2009). Neuroscience and the lifelong effects of early childhood adversity.
JAMA, 301(21), 2252–2259.

Sroufe, L. A. (2009). Developmental psychopathology. *Child Development Perspectives, 3*(3), 178–183.

