

## Support to Children at Risk of Social Exclusion as a Component of Inclusive Education in Croatian Early Childhood Education and Care Institutions<sup>1</sup>

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### ABSTRACT

Children's participation in high-quality early childhood education and care (hereinafter ECEC) institutions and inclusive pedagogical practice represent an important compensatory mechanism that significantly reduces the risk of children's social exclusion. The role of ECEC is to contribute to the reduction or possible elimination of the risks of social exclusion (hereinafter RSE) of children and the consequences of their unfavourable actions through systematic preventive action. The scientific project "Models of Response to Educational Needs of Children at Risk of Social Exclusion in ECEC Institutions" (MORENEC, hereafter the Project MORENEC), funded by the Croatian Science Foundation, is focused on issues arising from this topic. This research is an integral part of the Project, and its goal is to analyse how Croatian ECEC institutions contribute to the prevention of the RSE of children in order to prevent unfavourable developmental outcomes. The data were collected on a sample of 65 ECEC institutions, which is representative for Croatia. The obtained results indicate an uneven practice of preventing the RSE in Croatian ECEC institutions. Various methods, programmes and techniques are used to prevent the RSE of children. Only a third of ECEC institutions implement comprehensive, structured preventive programs, and only a fifth of institutions offer different forms of support for parents.

The authors conclude that systematic support for children and families at RSE in the Croatian ECEC system, has not yet fully taken root. The findings point to the need to improve the preventive capacities of the Croatian ECEC system, with an emphasis on expanding the offer of science-based programmes led by educated staff, which includes various forms of support for children at RSE and their family members.

*Keywords:* risk of social exclusion, early and preschool education and care, universal prevention, selective prevention, Croatia

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<sup>1</sup> The Project funded by the Croatian Science Foundation IP-2019-04-2011.

## Introduction

Inclusive education is the process of responding to the various educational needs of children by increasing their participation in culture, community and learning and reducing their exclusion from education (UNESCO, 2005). Children's participation in high-quality ECEC programmes is a key component of inclusive education and has a positive impact on a child's development from an early age (Biedinger et al., 2008; Love et al., 2003). Children's participation in high-quality early childhood education care programmes (ECEC) is a key component of inclusive education and has a positive impact on child development from an early age, while their accessibility together with inclusive pedagogical practice represent an important compensatory mechanism that significantly reduces the risk of children's social exclusion (Balladares & Kankaraš, 2020). Social exclusion of children is defined as a multidimensional construct that includes economic, social, cultural, health and other aspects of disadvantage and deprivation that individually or in combination can have an unfavourable impact on the development of a child in childhood and adulthood (Bouillet & Domović, 2021; Sukkar et al., 2017). The role of high-quality ECEC programmes is to contribute to the reduction or elimination of the RSE and the consequences of their unfavourable effects through systematic preventive action. Until now, there has been no systematic research in Croatia on the role and possibilities of ECEC institutions to contribute to the prevention of children's RSE. The scientific project "Models of response to educational needs of children at risk of social exclusion in ECEC institutions" funded by the Croatian Science Foundation is dedicated to this topic. One of the goals of the Project MORENEC is to investigate the effectiveness of available support programmes for families and children at RSE in Croatian ECEC institutions. The goal of this work emerged from the stated goal of the Project, which is to analyse the ways in which Croatian ECEC institutions contribute to the prevention of RSE of children with the aim of preventing unfavourable developmental outcomes.

## The prevention of RSE of children in ECEC

ECEC in Croatia is regulated by the Preschool Education Law (1997) and related by-laws. It includes education and care for children of early and preschool age, and is realised through programmes of education, health care, nutrition and social care for children from six months until they start primary school. ECEC forms the initial level of the educational system and, with the exception of the preschool programme (which is compulsory for children one year before entering primary school), is not compulsory for all children. It is divided into two educational cycles:

- 1) nursery (6 month – 3 yr.) and
- 2) kindergarten (3 yr.– 7 yr.).

ECEC institutions are expected to provide the best possible conditions and support for the successful learning and integral development of every child, because every child has the right to experience belonging, to be equally valued and treated with respect, which are important features of inclusive education (Berge & Johansson, 2021) and a prerequisite for the prevention of RSE of children (Bašić, 2009; Dunst, 2009; Sukkar et al., 2017). The starting points, principles, values and goals of ECEC are defined by the National Curriculum for ECEC (hereinafter National curriculum, 2015). The document promotes an inclusive approach because it advocates abandoning unified, unique standards for all children in favour of respecting and accepting the diversity of children, primarily through the implementation of various educational programmes that have the character of preventing unfavourable developmental outcomes of children at RSE.

The term prevention is widely used to denote any system of measures or programmes aimed at reducing or eliminating risk factors and the consequences of their action (Dadds & Fraser, 2003) by supporting the positive development of children and developing their resilience (Miljević-Ridički et al., 2017). World Health Organization (WHO, 2004) classifies prevention on three levels: *universal*, *selective* and *indicated*, depending on the level of risk in the population or group targeted by prevention measures. *Universal* prevention refers to the general public or the entire population, not identified on the basis of individual risk (Dadds & Fraser, 2003; Stoolmiller et al., 2000). In ECEC institutions, universal prevention is intended for all children and is often implemented in the curricula and educational work of preschool teachers (Ştefan & Miclea, 2012). The goal of universal prevention is most often the development of children's socio-emotional competences (Aksoy, 2019; Nelson et al., 2003; Ştefan & Miclea, 2012). *Selective* prevention is aimed at individuals or subgroups of the population whose risk in a certain area is higher than average (European Monitoring Centre for Drugs and Drug Addiction, 2019). Within ECEC, it covers the learning of social skills of children at RSE, but also systematic work with parents (Mikas et al., 2013). *Indicated* prevention is aimed at high-risk individuals with visible signs pointing to a certain problem (Sakashita & Oyama, 2019).

Preventive programmes have a positive effect on the quality of life of children of early and preschool age because they act as a protective factor and increase the opportunities for children's later academic achievements (Aksoy, 2019; Nelson et al., 2003). Many studies show that universal prevention programmes have a great effect on improving children's socio-emotional, behavioural and cognitive skills (Catalano et al., 2002; Dadds & Roth, 2008; Domitrovich et al., 2007; Greenberg et al., 2001; Manning et al., 2010), while some meta-analyses (Gates et al., 2017; Turner et al., 2018) attribute the improvement of social skills to selective and indicated prevention. The involvement of parents in prevention programmes is an important element of successful prevention programmes (Hahlweg et al.,

2010; Ştefan & Miclea, 2012) because it encourages the transfer of skills acquired within the ECEC institution to the relationship between parent and child (Hughes et al., 2005; Manning et al., 2010). Such programmes contribute to the reduction of aggressive and unacceptable behaviour of children at RSE in the family and institutional environment (Bašić, 2009; Manning et al., 2010; Webster-Stratton et al., 2003). The quality and effectiveness of prevention programmes in ECEC institutions depend on the professional competence of preschool teachers (Bašić, 2009; Lochman & Wells, 2002; Tatalović Vorkapić et al., 2012; Webster-Stratton et al., 2008) which are the cornerstone of comprehensive prevention. It covers all three levels of prevention, with integrated action towards the child, family and community. The positive effects of such programmes are multiple (Nelson et al., 2003), and are visible in the development of social competence and the reduction of children's social withdrawal (Domitrovich et al., 2007). Therefore, the systematic support of ECEC institutions for children at RSE is reflected in the offer of various types of prevention programmes led by educated preschool teachers, with the involvement of parents/guardians of children.

### **RSE prevention model in the ECEC system in Croatia**

In Croatia, there is very little research devoted to the evaluation of RSE prevention programmes in ECEC institutions. The Project MORENEC is aimed at achieving this goal by developing a model of response to the educational needs of children at RSE, which is based on a theoretical model of evaluation and development of quality ECEC (Vlasov et al., 2019, Figure 1).

The model points to the need of implementing the ISSA quality standards within measures to support families and children at RSE, as the starting point of the value system from which pedagogical practice emerges. The ISSA quality standards describe the value system that defines quality, the goals that ECEC strives for, and the reasons why these goals are considered important. When it comes to children at RSE, as a rule, their needs require additional support measures that form an integral part of the structural and process factors of quality. These factors are in dynamic interaction, and are dependent on national, regional, local and institutional policies. Structural factors of quality are related to the organisation, accessibility and conceptualisation of the ECEC system and the division of responsibilities among different levels, and are defined by legal regulations. As such, they provide prerequisites for pedagogical practice that reflects the process factors of quality, that is, the ways, forms and contents of realising the key function of institutional ECEC. Pedagogical practice takes place at the level of the individual and institution, and is directly related to the experiences of children, while it operationalises the institutional culture. It describes how the goals and contents of ECEC are realised in practice, in the interaction of individuals and contexts. When it comes to children at RSE, it answers the

question of how the ECEC system contributes to the prevention of unfavourable developmental outcomes of children and ensures their well-being, acting as a factor of protection in the child's social environment. It is not possible to precisely determine these effects if pedagogical practice and support measures for families and children at RSE are not continuously evaluated. That is why the model implies the application of four interconnected phases or steps, namely: assessment of needs, planning of educational intervention within the framework of appropriate pedagogical practice, implementation and evaluation.

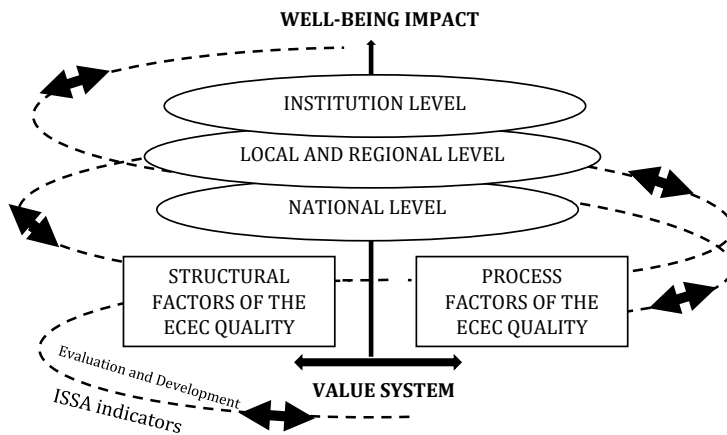


Figure 1. A theoretical model of mapping support measures in ECEC institutions (adjusted according to Vlasov et al., 2019, p. 40)

The first step, *the assessment of needs*, includes the assessment of children's RSE and the definition of criteria for the inclusion of children and their family members in the intervention. The assessment is aimed at getting to know, understand and interpret the risks, needs and strengths of children and their ecological system, whereby such an assessment is considered a key link in ensuring appropriate and timely intervention. The second step, *planning the intervention*, refers to the definition of intervention's specific goals with regard to the identified RSE of children, the selection of activities that will achieve, the defined goals and the elaboration of the activity plan (e.g., duration, frequency, performers, resources). The third step, *the implementation of intervention*, refers to the professional activities of educational and other experts in the ECEC institution in accordance with the previously defined intervention plan, and refers to the application of educational strategies, programmes, methods and techniques aimed at the prevention of RSE of children. The fourth step, *evaluation of the intervention*, is based on the

assessment of the effectiveness of the programme. It is a periodic assessment of the cost-effectiveness, efficiency, impact, sustainability and relevance of a specific programme, project or intervention in the context of established goals.

### **Examples of preventive programmes in ECEC institutions in Croatia**

This article is focused on the mapping of pedagogical practice that contributes to the prevention of children's RSE, and includes the implementation of evaluated programmes at the level of universal prevention in ECEC institutions and the application of strategies and methods in direct work with children at RSE, at the level of selective prevention. For example, at the level of universal prevention, the following programmes are implemented:

- **A resilience curriculum for early years and primary schools** (RESCUR) offers key tools for overcoming obstacles in their development, with the use of personal strength as part of activities for social and emotional learning of preschool and primary school children (Miljević-Ridički et al., 2015).
- **CAP programme** is aimed at the prevention of child abuse with the aim of encouraging the active commitment of the local community and educational systems for a comprehensive approach to the prevention of violence against and among children, through the implementation of structured workshops (Parents association "Korak po korak", 2014).
- **Growing Up Together** is a programme of workshops for parents, which is carried out with the aim of creating a stimulating and empowering environment in which parents get to know their role as parents, recognise how they relate to their child, and see other possibilities of relating to the child (Pećnik & Starc, 2010).
- **Appreciation of Diversity to a Culture of Peace** is implemented with the aim of developing socio-emotional competences of children in ECEC curricula, through the realisation of curricular activities in four areas: identity and belonging, expression of emotions and thoughts, appreciation of diversity, safety and responsibility (Bouillet & Šarić, 2016).
- **Problem-solving Management Model** (UPS model) refers to teaching how to solve problems by understanding human behaviour, providing assistance in meeting human needs, and developing problem-solving skills. UPS model helps the child to independently find a responsible solution to a problem that will not endanger him/herself, others or property (Modrić, 2021).
- **Persona doll** is a method in which a doll is used as a mediator between preschool teachers and children with an emphasis on different anti-discrimination scenarios. Recognition and appropriate response to injustice in society is part of education for social justice, which is applied with the aim of developing children's emotional competences (Logue & Kim, 2011).

Examples of educational practices and programs at the level of selective prevention in the ECEC system:

- **Small Creative Socialisation Groups** is a programme aimed at the process of socialisation and training for successful coping of children at RSE and strengthening of protection factors in children's environment (Janković & Richter, 2010).
- **Growing up Together Plus**, as a version of the programme *Growing up Together*, for parents of children with developmental disabilities (Pećnik & Starc, 2010).
- **Application of behaviour modification techniques** within social modelling (Bandura, 1977). These techniques are aimed at directly changing the child's behaviour, relying on the principles of learning (e.g., loss of privileges, positive feedback, rewards, behaviour rules checking, behaviour contract, restitution, self-reflection, time-out).
- **Mediation** i.e., intervention in negotiation or conflict resolution by an impartial person to achieve a mutually satisfactory solution. It contributes to personal growth and development, long-term problem solving and the promotion of equality and social justice (Munivrana et al., 2017).
- **Restitution** is an approach to strengthening children, a substitute for punishment and supervision, a means of developing self-discipline, and at the same time it is a collaborative process in which children learn to seek solutions to problems and learn about rights and obligations (Chelsom Gossen, 1994). It enables the redirection of children's behaviour because it is a proactive process, which leads the child to stop avoiding embarrassment and turn to a better relationship with other people and appropriate ways of social development.
- **Play therapy** is a measure of support for children who have difficulties in socio-emotional development and/or behaviour, in the form of workshops that help create contact and an emotional connection with a child at risk of developing behavioural problems (Ray et al., 2001).

The presented examples are part of pedagogical practices that some ECEC institutions include in their curricula, but they are not mandatory, so some institutions apply them and some do not.

## Research methods

With the aim of determining and analysing the ways in which Croatian ECEC institutions provide support to families and children in order to prevent unfavourable developmental outcomes of children at RSE, within the framework of the Project MORENEC, a mapping of pedagogical practice was carried out on

a representative sample of 65 ECEC institutions (10.4% of the total number of ECEC institutions in Croatia at the time of data collection<sup>2</sup>). The sample is representative according to: the criteria of number of children between the ages of 5 and 7 included in ECEC programs in 6 Croatian regions, according to the founder of the institution, the administrative status of the local self-government unit in which it operates and the size of the ECEC institution. The size of the ECEC institution is determined by the number of preschool teachers employed, and ranges from 2 to 320, and the average number of preschool teachers in kindergartens is 40. In the included kindergartens, the number of professional associates ranges from 0 to 16, with an average of 3 employed within one institution. The number of facilities in which the ECEC institution operates varies on a continuum from 1 to 26, and the average number of facilities per institution is 4. In the included ECEC institutions, the number of enrolled children ranges from 31 to 2972, while an average of 369 children are enrolled in kindergarten.

Representatives of ECEC institutions, in cooperation with members of the research team, completed The Protocol for mapping measures to support families and children at RSE in ECEC institutions, which was developed as part of the Project MORENEC. The Protocol consists of questions related to: assessment methods for children at RSE, ways in which parents of children at RSE can be involved in the work of the educational institution, forms of support for families of children at RSE offered by ECEC institutions, available programs, methods and techniques for preventing children's RSE, sources of funding for prevention programs, methods of evaluation and quality assurance of support measures for families and children at RSE. In addition to the above, a detailed explanation of one support measure used in the ECEC institution is requested i.e., data on the RSE group to which the measure is directed, the number of users of the measure, the objectives of the measure, activities and methods of evaluating the success of the measure. This paper presents basic information on the representation of the 4 steps of the RSE prevention model in ECEC institutions (needs assessment, planning, implementation and evaluation).

The data were collected in the spring of 2022, and were processed in the SPSS program (version 26) at the level of descriptive statistics (percentages) and using the non-parametric Spearman correlation coefficient.

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<sup>2</sup> Croatian Bureau of Statistics (2021). *Kindergartens and other legal entities that implement preschool education programs, the beginning of the pedagogical year 2020./21*. Zagreb: Croatian Bureau of Statistics. [www.dzs.hr](http://www.dzs.hr)



## Results

The first step in the prevention of children at RSE refers to the assessment of needs, that is, their recognition. Table 1 shows the frequency of application of different assessment methods in ECEC institutions, according to whether they are applied at the level of the institution, individual facilities, educational groups or specific children.

*Table 1.* The frequency of application of different assessment methods of children at RSE in ECEC institutions (%)

RSE assessment methods	Institution	Facilities	Groups	Children	Doesn't apply
Initial interview with the child before enrolling in the ECEC programme	69.2	1.5	1.5	9.2	18.5
Initial interview with the child's parents/guardians before enrolling in the ECEC programme	93.8	0	0	4.6	1.5
Regular individual meetings with parents/guardians of the child during the pedagogical year	70.8	0	7.7	21.5	0
Use of a standardised measuring instrument to assess the child's developmental status	30.8	1.5	4.6	29.2	33.8
Using internal scales to assess children's developmental status	58.5	3.1	10.8	16.9	10.8
Individual assessments of professional associates in the kindergarten	44.6	1.5	1.5	41.5	10.8
Comprehensive team differentiated assessment of the child	27.7	1.5	1.5	55.4	13.8
Creation and monitoring of the child's development map	50.8	4.6	27.7	3.1	13.8
Observation of the child in the educational group by a member of the professional team	47.7	1.5	3.1	40.0	7.7

It can be seen that ECEC institutions use different methods of assessing RSE of children, while the practice itself is extremely uneven. Most institutions apply initial interviews with the child's parents/guardians before enrolling in the ECEC program. Two-thirds of institutions use regular individual interviews with the child's parents/guardians during the pedagogical year, and initial interviews with the child before enrolling in the ECEC programme (69.2%). Only a third of institutions apply comprehensive team differentiated assessment of children, or standardised measuring instruments. Summary indicators of the application of different methods of RSE assessment of children in individual ECEC institutions are presented in the Figure 2.

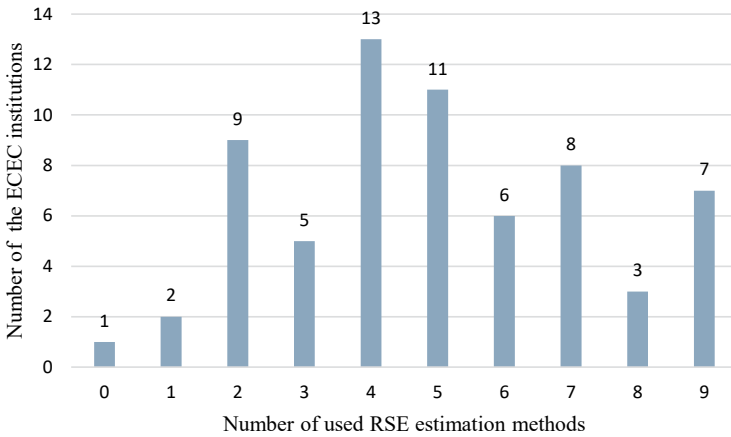


Figure 2. ECEC institutions according to the number of applied methods of assessment of children’s RSE

The assessment methods used in institutions range from 0 to 9, while more than half (58%) use 2 to 5 methods. A modest assessment practice is noticeable in (4.6%) institutions that do not assess RSE of children, or use only one assessment method. On the other hand, there are institutions with a very rich practice of applying different methods of assessing children’s RSE (37%).

The purpose of the assessment is the planning and implementation of various support measures for children, which inevitably includes work with parents. Table 2 shows the forms of cooperation with parents in Croatian ECEC institutions.

The findings show that the most frequent practice of working with parents is individual counselling work. Two-thirds of institutions offer parent education through lectures and workshops, while only one-fifth of institutions organise group counselling work with parents. Support groups for parents are offered by one-third of ECEC institutions in Croatia.

Table 2. Frequency of different forms of support for families of children at RSE in ECEC institutions (%)

Forms of support for families of children at RSE	NO	YES
Lectures	29.2	70.8
Workshops	32.3	67.7
Support groups for parents/guardians	69.2	30.8
Individual counselling work with parents/guardians	4.6	95.4
Group counselling work with parents/guardians	80.0	20.0
Informing about social and health services in the community	27.7	72.3

The share of ECEC institutions according to the number of forms of support they offer to families is shown in the Figure 3.

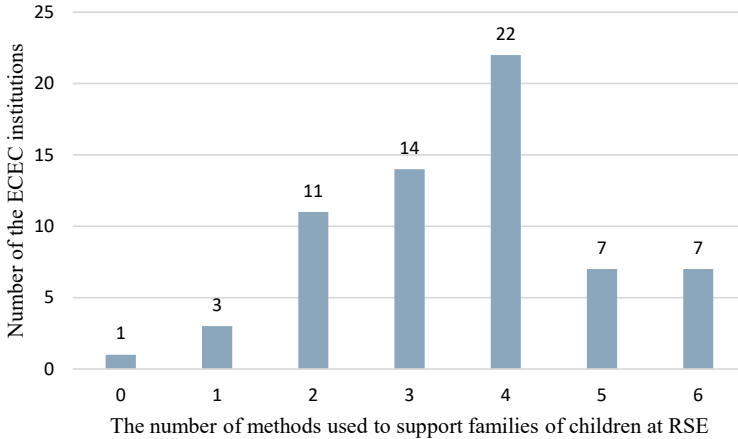


Figure 3. ECEC institutions, according to the number of support forms for parents

The data point to the conclusion that the Croatian ECEC system is dominated by institutions that offer parents 2 to 4 forms of support (72.3%). A modest support form practice involves 6% institutions, while a fifth of institutions have developed a diverse support practice.

Data on the distribution of structured children’s RSE prevention programme and behaviour modification techniques are presented in the Table 3.

Table 3. Frequency of implementation of programmes, methods and techniques of prevention of children at RSE in ECEC institutions (%)

Programmes, methods and techniques of prevention of children at RSE	Institution	Facilities	Groups	Doesn't apply
CAP programme	23.1	4.6	7.7	64.6
RESCUR	1.5	0	4.6	93.8
Appreciating Diversity Leads to a Culture of Peace	6.2	1.5	12.3	80.0
Growing Up Together	50.8	1.5	4.6	43.1
Growing Up Together Plus	16.9	1.5	3.1	78.5
Mediation	6.2	3.1	6.2	84.6
Restitution	6.2	0	7.7	86.2
Modelling	13.8	0	10.8	75.4
Play therapy	6.2	4.6	15.4	73.8
Persona doll	7.7	0	16.9	75.4
Problem-solving Management	12.3	3.1	9.2	75.4

Overall, the findings point to the conclusion that structured prevention programs for children at RSE are implemented by a minority of ECEC institutions. The most often applied programme is Growing Up Together, while other programmes took root in fewer institutions. Selective prevention programmes in ECEC institutions almost do not exist, while the program Growing Up Together Plus is carried out in one fifth of institutions.

In summary, only a third of ECEC institutions have developed a comprehensive strategy for the prevention of children at RSE, which is reflected in the offer of preventive programmes at the level of individual institutions. The practice of evaluating the effectiveness of programmes to prevent RSE of children is relatively modest, and most often comes down to keeping pedagogical documentation and internal evaluation, while other forms of evaluation are extremely rare (Table 4).

*Table 4.* The frequency of application of evaluation methods and quality assurance of support measures for families and children at RSE in ECEC institutions (%)

Methods of evaluation and quality assurance of support measures	NO	YES
Ensuring the internal education of preschool teachers for a specific programme/measure/method	26.2	73.8
Ensuring external education of preschool teachers for a specific programme/measure/method	35.4	64.6
Organising regular internal support of professionals during the implementation of the programme/measure/method	50.8	49.2
Organising regular external support of professionals (supervision) during the implementation of the programme/measure/method	73.8	26.2
Management and monitoring of pedagogical documentation	4.6	95.4
By applying scientific evaluation	89.2	10.8
System of internal evaluation	23.1	76.9
Through occasional external evaluation	81.5	18.5

More than half of the ECEC institutions provide external education for preschool teachers for the application of specific forms of prevention for children at RSE, and almost half of the institutions offer internal support from a professional support team. In summary, the majority of institutions (80%) implement 3 or more evaluation methods, although it is mainly an evaluation of the usual pedagogical practice that is not focused on the prevention of the specificities of children at RSE (Figure 4).

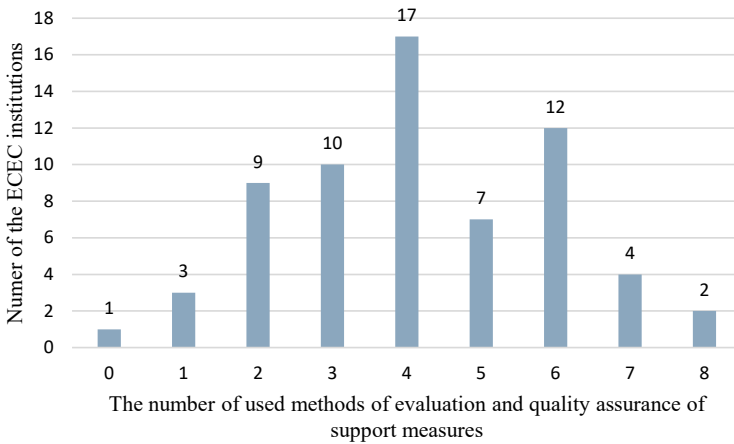


Figure 4. ECEC institutions according to the number of methods of evaluation of support measures for families and children at RSE

The results shown in Table 5 show that there is a statistically significant relationship between the components (steps) of prevention of children at RSE. Institutions that implement comprehensive prevention programmes for children at RSE offer several forms of support to families of children at RSE. They are directed in several different ways towards evaluating and ensuring the quality of support measures for families and children at RSE.

Table 5. Spearman correlation coefficient on composite variables

Components of RSE prevention	Needs assessment	Parents support	Comprehensive programmes	Evaluation
Needs assessment	1	.113	.155	.173
Parents support		1	.434**	.578**
Comprehensive programmes			1	.385**
Evaluation				1

\*\* p < .01

### Research limitations

The research is based on information received from representatives of ECEC institutions and not on objective data. However, this is the first research of this type conducted in Croatia, so further analyses are needed to verify the obtained results. In addition, the research is of a descriptive nature, which limits the

possibilities of finding a connection between the described preventive practice and the well-being of children at RSE. It is important to emphasise that the Project MORENEC is ongoing and that the evaluation of the described support measures is yet to follow.

## Discussion

The results of the research indicate an uneven pedagogical practice of prevention aimed at children at RSE in the form of reducing and preventing unfavourable developmental outcomes of children and ensuring their well-being in ECEC institutions in Croatia. Earlier research (Bouillet & Antulić Majcen, 2022; Khan et al., 2015) showed that an assessment aimed at getting to know and understand the individual risks and needs of children is considered crucial in providing interventions that lead to an increase in favourable and a decrease in unfavourable developmental outcomes of children. This research showed that assessment of children at RSE in ECEC institutions is done in different ways using different methods. Institutions that use 2 to 5 methods predominate, while there are still institutions that do not assess children at RSE at all or use only one method. Although the involvement of parents in prevention programmes has been recognised as a key element in the successful prevention of children's RSE in many studies (Hahlweg et al., 2010; Manning et al., 2010; Ştefan & Miclea, 2012), different forms of parent support and their involvement in the work of the educational institution are implemented only in a fifth of ECEC institutions in Croatia. Most ECEC institutions offer 2 to 4 forms of support to parents, while there are still institutions that do not have integrated support for parents in their practice. Although comprehensive prevention, which includes all three levels of prevention and works towards the child, family and community has been recognised in previous research as very successful (Domitrovich et al., 2007; Nelson et al., 2003), the results of this research indicate that only a third of ECEC institutions in Croatia implement structured, comprehensive programmes for the prevention of children's RSE. The evaluation of the effectiveness of the program in ECEC institutions in Croatia is most often carried out using 3 or more evaluation methods, which in most cases are not aimed at the prevention of specific RSE of children, so we cannot even talk about precisely defined indicators of the success and effectiveness of interventions (Španja, 2019). Research (Tatalović Vorkapić et al., 2012; Webster-Stratton et al., 2008) have shown that the positive effect on child development is most visible in programmes in which preschool teachers are additionally educated for its implementation, and such practice in the form of conducting external and internal education of preschool teachers for the application of specific forms of prevention of children's RSE is carried out by more than 50% of institutions in Croatia.

## Conclusion

The goal of this research is to determine and analyse the ways in which ECEC institutions in Croatia provide support to families and children in order to prevent unfavourable developmental outcomes of children at RSE. The research results indicate the existence of an uneven practice of providing support to families and children at RSE. Although a third of ECEC institutions offer various support measures to families and children at RSE, there are still institutions that do not offer any support measures. From all of the above, we can conclude that the systematic support of ECEC institutions for children at RSE, which is reflected in the offer of various types of prevention programmes by educated preschool teachers, with the involvement of parents/guardians of children in the Croatian context, has not yet fully taken root.

That is why it seems justified to invest efforts that will reflect the theoretical model of mapping support measures in the preventive practices of the ECEC institutions in Croatia. This is the first and important step in improving the possibility of developing the structural and process factors of the quality of ECEC institutions, which are a prerequisite for an adequate response of the ECEC system to RSE and the prevention of possible unfavourable development outcomes related to them.

## Aknowledgment

This research was financed by the funds of the Croatian Science Foundation through the Project IP-2019-04-2011.

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