



Myers-JDC-Brookdale Institute
Center for Research on Disabilities
and Employment of Special Populations



State of Israel
Ministry of Immigrant Absorption

Preschool Children with Special Needs in Immigrant Families: Barriers to Service Utilization and Proposed Solutions

Yoav Loeff ♦ Dori Rivkin ♦ Ellen Milshtein

The study was initiated by the Ministry of Immigrant Absorption and funded with the assistance of the Ministry and the Mandell Berman Fund for Research on Children with Disabilities

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Executive Summary

The Social Service Department at the Ministry of Immigrant Absorption commissioned this study from the Myers-JDC-Brookdale Institute due to its concern that children with special needs whose parents immigrated to Israel may not be getting the full range of services enjoyed by the children of non-immigrant Israelis. This concern is consistent with research from abroad about immigrant populations and their difficulties utilizing services.

The study goal was to examine whether significant barriers are indeed preventing immigrant families from utilizing services for children with special needs effectively and to describe any such barriers. Another goal was to indicate possible responses and solutions that could help remove these barriers.

The study was limited to families with preschool children (birth to 6 years), because this is a critical stage for identifying special needs and starting treatment. For the purposes of this study, we define children of immigrants as children who immigrated themselves as well as children born in Israel to parents who immigrated since 1990 (or prior to that year in the case of immigrants from Ethiopia, in keeping with Ministry of Immigrant Absorption policy).

To allow for a full examination of the topic, the study was qualitative and consisted of in-depth interviews with dozens of professionals as well as with immigrant parents of children with special needs. It focused on the predominant immigrant populations – those from the former Soviet Union (FSU) and from Ethiopia.

Significant Barriers to Service Utilization

The study identified multiple barriers that are preventing or limiting immigrant families from utilizing services for their children with special needs. The barriers identified had to do with the characteristics of the immigrant families: Difficulties in integrating into Israeli society, limited command of Hebrew, and culturally different ideas about child development and about the services available. Other noteworthy characteristics of this population include a high rate of single-parent families, economic distress and living in peripheral areas of Israel. Some of these barriers affect the whole immigrant population and some are specific to immigrants from the FSU or from Ethiopia.

General Barriers

- ◆ Particularly evident are the difficulties that immigrant families have in obtaining information about their rights and the services available for their children, and in exercising their rights once they have the information. This stems from language difficulties, cultural gaps, and difficulties in finding their way in the Israeli bureaucracy. There is a severe lack of culturally and linguistically sensitive counseling and information services, notably translation and intercultural mediation services for the parents. For the immigrants from Ethiopia, there are not enough such services, while for those from the FSU and elsewhere, they barely exist at

all. This situation leads to misunderstandings and lack of trust between the parents and professionals, and consequently, to limited utilization of the services that are designed to benefit the children.

- ◆ Services do not designate staff members to work specifically with immigrant families who have children with special needs.
- ◆ There is a lack of translation services and diagnostic tests adapted to the culture and language of the children, which makes it very hard to effectively and accurately assess first-generation immigrant children, as well as the Israeli-born children of immigrants who were exposed to the Hebrew language and Israeli culture at a later age.
- ◆ There is no procedure to enable families that plan to immigrate to arrange for educational services prior to their arrival in Israel. Once they arrive, the children need to go through the Israeli diagnostic process, which may take a long time and cause a delay in placing them in a preschool or school that meets their needs.
- ◆ The lack of statistical data about children with special needs in immigrant families makes it hard to develop appropriate services for this population.

Barriers Mainly Affecting Children of FSU Immigrants

- ◆ Children are often exposed to the Hebrew language at a late age, since they are often cared for by their grandmothers or attend Russian language preschools. The late exposure to Hebrew (this includes Israel-born children of immigrants) sometimes leads to difficulties integrating into the regular education system.
- ◆ Some of the immigrants from the FSU are extremely wary of assessments, therapy and talking about emotions, and there is a distinct stigma regarding some forms of disability and services. One of the reasons, apparently, is the vast difference between the services offered in Israel and those that the immigrants were familiar with in their country of origin.
- ◆ Some families tend towards a strict education and have extremely high expectations of achievement. On the other hand, physical and emotional neglect are evident among some of the families who have to contend with social and economic difficulties.
- ◆ As noted, many of the children are cared for by their grandmothers and the services sometimes have difficulties communicating with them due to language difficulties and differing perceptions about child-raising.

Barriers Mainly Affecting Children of Immigrants from Ethiopia

- ◆ The immigrants frequently have different ideas about child development and the reasons for illnesses and disorders from those commonly held in Western and Israeli society. Many professionals have difficulty coping with these different perceptions.
- ◆ Many children have difficulties acquiring Hebrew and literacy and fine motor skills, which could perhaps be explained by a lack of stimulation in these areas during early childhood.
- ◆ Many of the immigrants are wary of therapy, diagnostic testing, and special-education frameworks and there is stigma about physical disability.

- ◆ Many of the families have difficulty utilizing the services because of problems with transportation and economic hardship. Different concepts about time and punctuality also make it hard for many of the immigrant families to arrive in time for appointments for treatment.

The lasting effects of these barriers are particularly evident among immigrants from Ethiopia and they sometimes endure for years after the parents' immigration to Israel.

Recommendations of the Parents and Professionals

The recommendations of the parents and professionals interviewed in the study are divided into two groups: Recommendations about existing services that have already been successfully tried, sometimes on a limited, local scale; and recommendations for services that do not yet exist.

Recommendations for the Expansion of Existing Services

- ◆ Translation and intercultural mediation between the families and the service providers for the Ethiopian immigrants (in the case of immigrants from other countries, the recommendation is to create the services)
- ◆ Translation of information material about special needs of children and the appropriate services and distribution to the families
- ◆ Ongoing support from a mentor/counselor/intercultural mediator
- ◆ Support, counseling and mentoring by immigrant families who are no longer newcomers or by non-immigrant Israelis
- ◆ Additional resources for mother and child healthcare centers (Tipat Chalav) in order to expand the instruction, support and counseling services provided to immigrant families with young children (this has proved successful in the PACT program for immigrants from Ethiopia)
- ◆ Making medical services linguistically and culturally accessible
- ◆ Cultural adaptation of services in order to promote optimal utilization – e.g., more flexible scheduling for the Ethiopian immigrants in order to increase attendance of their children in treatment.

Recommended New Services

- ◆ Case managers, who speak the same language as the families and are conversant with their culture and with Israeli culture, to work with immigrant families who have children with special needs
- ◆ Within various systems (e.g., education, health), appointing a person responsible for the children of immigrants, whose role would include adapting the services to meet their needs
- ◆ Central culturally and linguistically sensitive information services

- ◆ Development and implementation of culturally and linguistically sensitive diagnostic tests for the children of immigrants and children who are not conversant with Hebrew and Israeli culture
- ◆ Making diagnostic and therapeutic services accessible in places familiar to the community, such as community centers and mother and child healthcare centers, in order to encourage the use of diagnostic testing and treatment
- ◆ Training service providers to enhance their understanding of the culture of the immigrant populations and their diverse needs, with an emphasis on providing information to parents whose children are referred to diagnostic testing or treatment for the first time
- ◆ Improving the process of placing children with special needs in preschools and schools prior to, and shortly after, immigration to Israel
- ◆ Providing counseling to immigrant families from the FSU about reducing the pressure to achieve and exposing the children to Hebrew, as well as guidance for grandmothers
- ◆ Training of Ethiopian-Israeli professionals who will be able to provide services to immigrant families in their language and according to their culture.
- ◆ Cooperation with the leadership of the Ethiopian community to increase awareness of disabilities and treatment.

The study revealed a clear need for a systematic collection of statistical data about the children of immigrants, the extent and distribution of their special needs, their utilization of the services, and the demographic characteristics of their families. Such information would facilitate ongoing monitoring of the changes in needs and, accordingly, the planning of services to provide the optimum response.

The findings have been presented to service providers from government ministries and organizations specializing in this field and are serving as basis for developing policy and services for preschool children with special needs in immigrant families.

Acknowledgments

We wish to thank everyone who assisted us with the planning and conducting the study and with the preparation of this report:

Members of the steering committee, for helping us to plan the study and to understand the complexity of the issue, and for connecting us to the respondents: Sarah Cohen, Rachel Gindin and Hana Kupfer from the Ministry of Immigrant Absorption; Yona Ferber from the Ministry of Health; Michal Golan from the Ministry of Social Affairs and Social Services; Amram Aklom, Michal Cohen-Hattab and Rivka Shai from JDC-Ashalim; Lana Eisenstadt and Tami Krispin from the Keshet Center for Special Families; and Nikolay Tabah and Milana Yaari from Shatil.

Our thanks to the officials at the government ministries for their assistance when we first broached this subject, and for helping us contact respondents: at the Ministry of Health: Prof. Itamar Grotto, Mira Honovitz, Dr. Lisa Rubin, Elana Stolerman, Dr. Adina Yosef, and members of the national and district public health inspectorate; at the Ministry of Education: Chaya Harel, Raya Levy-Goodman, Smadar Melichi, Dr. Leah Shaked, Maya Sharir, and Dr. Dalia Tal; at the Ministry of Social Affairs and Social Services: Lili Abiri, Dr. Shlomo Elyashar, Itzik Elyashar, Vered Carmon, Daphne Moshayov, and Amira Schnitzer.

We are grateful to Eugenia Israeli, Lea Lugassi, Ofir Pinto, and Rivka Prior from the National Insurance Institute, Vered Altschuler-Ezrahi, and Tania Yosfin from the Keshet Center, Ricky Aridan, Batya Hodatov and Hana Primak of Ashalim, Dr. Hagai Agmon-Snir, director of the Jerusalem Intercultural Center, Dr. Sharon Ayalon, CEO of All Rights, Gal Efinjer of Beit Lauren, Dr. Hila Green of the Modi'in municipality, Dr. Talya Israeli and Liora Valinsky of Maccabi Healthcare Services, Moshe Neriah Hovav of the Acre municipality, Milka Mozes-Shavit of Bizchut, Dr. Sharona Meital of the School Psychological Services, Megiddo Regional Council, Eli Rivlin of House of Wheels and Dr. Michal Schuster.

Thanks to the numerous preschool teachers and educational counselors, staff members at special needs daycare centers and child development institutes, nurses at mother and child healthcare centers (Tipat Chalav) and intercultural mediators for the Ethiopian-Israeli community from localities all over Israel who shared much of their experience and knowledge with us. We regret that we cannot thank each of them by name.

Special thanks to the immigrant parents for being kind enough to contribute to the study and sharing their experience with the system of services for children with special needs with us. Thanks to many others who introduced us to the professionals and parents whom we interviewed.

Thanks to Noga Sagiv-Daniel, Denise Naon, and Judith King of the Myers-JDC-Brookdale Institute, for their important contribution to the study, to Raya Cohen, who edited the report, to

Naomi Halsted, who translated the executive summary, and to Leslie Klineman, who prepared it for publication.

Thanks to the Mandell Berman Fund for Research on Children with Disabilities, who helped fund the study.

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