

# SUPPORTING YOUR CHILD

An illustration of a family of three—a father, a mother, and a young child—huddled together in a circle. The father is on the left, the mother is on the right, and the child is in the center. They are all smiling and looking towards each other. The child is holding a large pink heart. The family is enclosed within a circular frame that has a blue outer ring and a green inner ring. The background is a vibrant orange with stylized green and blue leaves and branches.

A parent's guide for young children  
who need early intervention



# FOREWORD

Dear Parent<sup>1</sup>,

Every child is unique and special in his/her own way. As parents, we strive to provide the best opportunities for our children to grow, develop, and maximise their potential.

You may have picked up this guide because you want to learn more or have concerns about your child's development. You may want more information because:

- You notice your child faces more challenges than his/her peers and are not sure what to do next.
- Your child's teacher recommends referring your child for a developmental assessment with a paediatrician or a support programme.
- Your child's doctor diagnoses your child with a developmental condition and asks you to consider an Early Intervention service.
- You wish to learn ways by which you and your family can support your child.

This guide may answer some of your questions. Developed by a team of fellow caregivers, medical professionals, Allied Health Professionals, Early Intervention professionals, and early childhood educators, this guide supports parents of children who may have Developmental Needs.

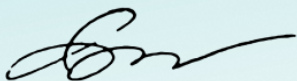
It seeks to support you in understanding:

- Your child's needs
- How to access Early Intervention support for your child
- How to support your child's development and transitions from preschool to primary/special education schools
- How to access resources to support yourself and your family

While this guide is not a substitute for professional advice, I hope it will provide you with more insights and channels to seek support. Please feel free to reach out if you need help and to continue working with your child's doctor and teachers to best support your child in his/her development.

It takes rain and sunshine to make rainbows. I wish you all the very best in your parenting journey.

Yours sincerely,



**Ms Sun Xueling**

Minister of State for Social and Family Development  
Minister of State for Education

<sup>1</sup> A child's caregiver may not necessarily be their parent, but a grandparent, foster parent, aunt/uncle, or older sibling instead. The term parent(s) has been used as an overarching term to represent all caregivers.

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# UNDERSTANDING YOUR CHILD'S DEVELOPMENT



**C**hildren develop at their own pace in various domains. This means that they may develop faster in some areas and slower in others. Regular monitoring of your child's development is important to ensure that he/she is developing well. This chapter will focus on the following:

- *What it means for your child to be developing typically;*
- *What it means if your child has developmental needs (DN);*
- *What are the developmental areas to monitor;*
- *Why regular check-ups are important; and*
- *What you can do if you suspect your child may have DN.*

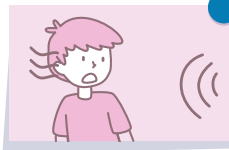
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# UNDERSTANDING CHILD DEVELOPMENT

## DEVELOPMENT IN A CHILD

A child's development spans at least five domains:

### 1 SOCIAL AND EMOTIONAL

**Social interaction skills** refer to a child's ability to initiate and maintain relationships with others.

This includes joining other children in a group, building relationships with other children, and responding appropriately to social cues.

**Social-emotional skills** refer to a child's ability to understand and manage their own emotions and resolve problems.

This includes recognising others' facial expressions and emotions, being able to calm down when feeling upset, thinking of possible solutions, and making good decisions.

### 2 PHYSICAL AND MOTOR

**Gross motor skills** require whole-body movement, involving large muscles in the arms, legs, and torso and their coordination.

This includes running, jumping, cycling, swimming, throwing, catching, and balancing.

**Fine motor skills** involve movement of the small muscles in the hands and wrists.

This includes cutting with a pair of scissors, writing, drawing, fastening buttons, and tying shoelaces.

### 3 LANGUAGE AND COMMUNICATION

**Language** refers to a child's ability to speak with, listen to, and understand others.

This includes understanding gestures and questions that are asked of the child.

**Communication** refers to a child's ability to express thoughts clearly.

This includes responding non-verbally (e.g. using gestures, facial expressions, and eye gaze) and/or verbally (e.g. naming objects and pictures, expressing thoughts in words, and telling a story to others).

### 4 VISION AND HEARING

**Vision or sight** refers to a child's ability to see.

Problems with vision or sight include partial sight and blindness. This includes visual field loss, visual fatigue, difficulties with figure-ground perception, and lack of visual efficiency.

**Hearing** refers to a child's ability to detect, recognise, discriminate, perceive, and/or comprehend auditory information.

Hearing loss varies from mild to profound levels. It can occur in one or both ears.

### 5 COGNITION

**Learning and memory** refer to a child's ability to acquire new knowledge and skills through experiences and remember and make use of acquired information.

This includes understanding and processing new information regarding oneself and the world through play or hands-on experiences, and recognising and recalling objects and events.

**Attention and logical reasoning** refer to a child's ability to pay attention and show concentration, and to demonstrate logical thinking by analysing and using information to make simple plans, solve problems, or make decisions.

This includes demonstrating curiosity, asking questions, being perceptive to and exploring the world around them, focusing on tasks and ignoring distractions, experimenting with objects and situations to understand cause and effect, and making inferences.

Development in these domains typically occurs in a predictable manner during childhood, and most children attain specific developmental skills in a sequence by certain ages.



# UNDERSTANDING THE IMPORTANCE OF CHILDHOOD DEVELOPMENTAL SCREENING

Childhood Developmental Screening (CDS), also known as Well Baby Checks, are conducted to identify children at risk of developmental delay for early intervention.

It is recommended for CDS to be conducted for all children at **seven defined touchpoints**, or timepoints, over the first six years of life, including the first screening done in the hospital at birth. Each visit includes a combination of growth monitoring, physical examination, and developmental checks of social skills, motor skills, and language development. These screenings are typically scheduled

along with the recommended childhood vaccinations under the National Childhood Immunisation Schedule (NCIS). More information can be found [here](#).

**Going for a CDS and speaking with medical professionals may help you feel more assured of your child's development or identify gaps early.**

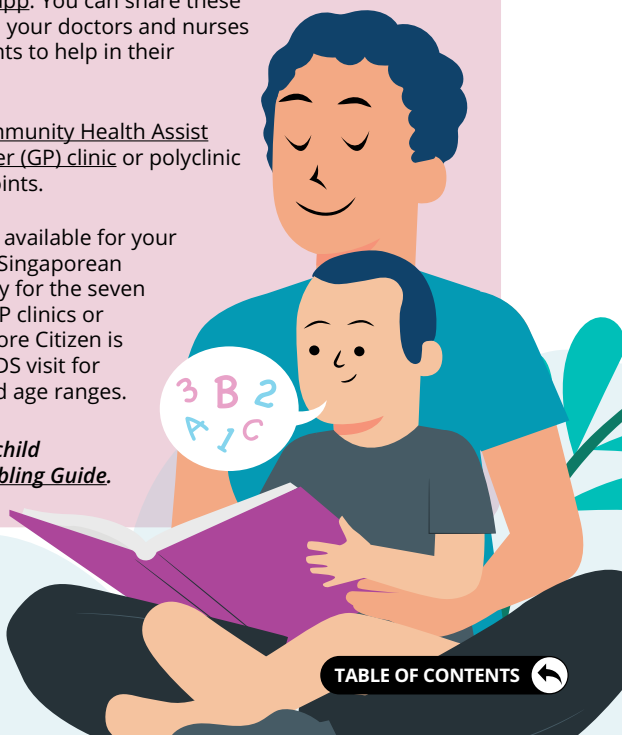
If you have any concerns about your child, you may raise them during these checks. The professionals will provide you with further information to help you as you make decisions on how best to support your child.



## What You Can Do

- Observe your child's development; recommendations can be found at [HealthHub](#) and the [Ministry of Social and Family Development \(MSF\)](#) websites.
- Find out if your child is meeting the target milestones for his/her age via the [Health Booklet](#) and record the observations in their digital health booklet via the [HealthHub app](#). You can share these milestones and growth charts with your doctors and nurses at your child's medical appointments to help in their assessments.
- Take your child to the nearest [Community Health Assist Scheme \(CHAS\) General Practitioner \(GP\) clinic](#) or polyclinic at the recommended CDS touchpoints.
- Find out more about the [subsidies](#) available for your child's CDS appointments. [Eligible](#) Singaporean children will receive the full subsidy for the seven CDS touchpoints, at either CHAS GP clinics or polyclinics. A child who is a Singapore Citizen is eligible for up to one subsidised CDS visit for each milestone within the specified age ranges.

*For further readings and resources on child development, you may refer to the [Enabling Guide](#).*



# UNDERSTANDING DEVELOPMENTAL NEEDS

## EXPLANATION OF DN

Typical development involves a child **meeting developmental milestones** in social-emotional, physical or motor, speech (language and communication), sensory (vision and hearing), and cognitive domains **within an expected age range**.

A child aged up to six years old may have developmental needs (DN) if he/she displays a level of development that is much lower than his/her peers. For instance, your preschooler may be unable to follow instructions no matter how you phrase them when most of his/her peers can. If you have any concerns about your child's development, speak to a medical professional who may advise for your child to be further assessed. It is important to get an assessment/diagnosis as it will help you decide the most suitable early intervention (EI) for your child. An assessment is to be viewed as a start to recognising your child's strengths and qualities, and not the end of the journey.

If your child is assessed to require support to address a DN or gap, he/she may require a low, medium, or high level of EI support. **The difference between your child's development compared**

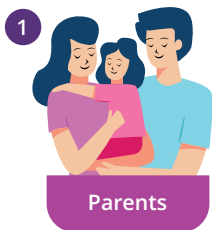
**to typically developing peers indicates the severity of the DN, and in turn the required level of EI support.** Some children only have DN and no other significant medical conditions while other children may have DN with other significant medical conditions such as cerebral palsy, visual impairment, or hearing loss that contribute to the DN. A list of commonly seen developmental issues/conditions can be found in the annex.

When a child has DN, he/she is usually born with those needs. **While this may not be something we expect or have planned for, there are important things that you can do to support your child.** This includes sending your child for assessments early so that necessary intervention can be provided to help him/her improve as soon as possible. The professionals assessing your child can advise if the levels of developmental functioning are within typical limits and/or if further monitoring and intervention is needed. Sometimes, your child's needs might only become clearer as he/she gets older.

Almost all children with DN can improve with appropriate support and EI.

## IDENTIFYING YOUR CHILD'S NEEDS

**There are multiple points of contact for early detection of your child's need**



Your child interacts most closely with you and his/her teachers. Adults play an important role in identifying possible DN that a child may have as they interact and observe the child. When you bring your child to his/her CDS appointment, share with the doctor your and others' observations of your child's development.

*You may refer to the next three sections to observe how these points of contact are able to detect your child's needs.*



# 1 CHILD'S PARENTS: WHAT TO LOOK OUT FOR – OBSERVING YOUR CHILD'S DEVELOPMENTAL MILESTONES.

Your child is developing typically if he/she achieves the developmental milestones for his/her age. You can find out if your child is meeting the target milestones for his/her age via the [Health Booklet](#). If your child displays the following developmental red flags or if you have any concerns about his/her development, you should visit a polyclinic, GP, or paediatrician as early as possible:

## Are you concerned about your child's development?

Take note of your child's development by observing how he/she plays, speaks, learns, and interacts with others. If you notice any of these red flags, or have any concerns about your child's development, speak with his/her doctor immediately.

|                                                         | 6 months                                                                                                                                                                                                          | 9 months                                                                                                                                     | 12 months                                                                                                                                                                       | 18 months                                                                                                                                                                                                            | 24 months                                                                                                                                                                              | 30 months                                                                                                                                                                                                      | 36 months                                                                                                                                                                                      | 48 months                                                                                                                                                                                  |
|---------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| GROSS MOTOR                                             | <ul style="list-style-type: none"> <li>Does not roll in either direction</li> <li>Unable to lift up head and chest when lying face down on a surface</li> <li>Unable to hold head upright when sitting</li> </ul> | <ul style="list-style-type: none"> <li>Unable to sit without support</li> <li>Unable to bear weight on legs with support</li> </ul>          | <ul style="list-style-type: none"> <li>Unable to stand with support</li> <li>Unable to crawl, bear walk, and/or shuffle on bottom to move</li> </ul>                            | <ul style="list-style-type: none"> <li>Unable to walk independently</li> <li>Unable to climb up stairs with support</li> </ul>                                                                                       | <ul style="list-style-type: none"> <li>Unable to run</li> </ul>                                                                                                                        | <ul style="list-style-type: none"> <li>Unable to throw or kick a ball</li> <li>Unable to climb up stairs with both feet on each step while holding a railing</li> <li>Unable to jump off a low step</li> </ul> | <ul style="list-style-type: none"> <li>Falls down a lot</li> <li>Unable to climb stairs with alternating feet</li> </ul>                                                                       | <ul style="list-style-type: none"> <li>Unable to pedal a tricycle</li> <li>Unable to stand on 1 foot for 5 seconds</li> </ul>                                                              |
| Use of one arm/leg more than the other at any age       |                                                                                                                                                                                                                   |                                                                                                                                              |                                                                                                                                                                                 |                                                                                                                                                                                                                      |                                                                                                                                                                                        |                                                                                                                                                                                                                |                                                                                                                                                                                                |                                                                                                                                                                                            |
| FINE MOTOR                                              | <ul style="list-style-type: none"> <li>Does not reach for and hold on to objects</li> <li>Has difficulty getting objects to mouth</li> </ul>                                                                      | <ul style="list-style-type: none"> <li>Unable to transfer objects between hands</li> </ul>                                                   | <ul style="list-style-type: none"> <li>Unable to pick up small objects with thumb and index finger</li> <li>Does not look for an object that has fallen out of sight</li> </ul> | <ul style="list-style-type: none"> <li>Unable to build a tower of 2 blocks</li> </ul>                                                                                                                                | <ul style="list-style-type: none"> <li>Unable to build a tower of 4 blocks</li> <li>Unable to scribble</li> </ul>                                                                      | <ul style="list-style-type: none"> <li>Unable to build a tower of 6 blocks</li> <li>Unable to draw a vertical line</li> <li>Unable to complete simple shape puzzles (e.g. square, circle puzzles)</li> </ul>   | <ul style="list-style-type: none"> <li>Unable to draw a horizontal line</li> <li>Unable to turn pages of a board book 1 page at a time</li> </ul>                                              | <ul style="list-style-type: none"> <li>Unable to draw a circle</li> <li>Unable to use scissors</li> </ul>                                                                                  |
| SPEECH AND LANGUAGE                                     | <ul style="list-style-type: none"> <li>Does not make vowel sounds ("ah", "eh", "oh")</li> <li>Does not startle to sudden sounds</li> </ul>                                                                        | <ul style="list-style-type: none"> <li>Does not turn towards sound at ear level</li> <li>Does not babble ("mama", "dada", "baba")</li> </ul> | <ul style="list-style-type: none"> <li>Does not point to indicate needs</li> </ul>                                                                                              | <ul style="list-style-type: none"> <li>Does not use "mama" "papa" meaningfully</li> <li>Unable to speak any single words</li> <li>Unable to understand simple instructions with gestures ("give", "come")</li> </ul> | <ul style="list-style-type: none"> <li>Unable to speak in 2-word phrases ("drink milk")</li> <li>Unable to follow simple instructions without gestures ("give me the ball")</li> </ul> | <ul style="list-style-type: none"> <li>Not intelligible to familiar carers</li> <li>Does not use pronouns correctly</li> <li>Does not make frequent comments on objects and events of interest</li> </ul>      | <ul style="list-style-type: none"> <li>Unable to speak in 3-word sentences</li> <li>Unclear speech</li> <li>Unable to follow 2-part instructions ("Take the toy and give it to me")</li> </ul> | <ul style="list-style-type: none"> <li>Unable to speak in 4-5 word sentences</li> <li>Unable to retell a favourite story</li> <li>Unable to follow 3-part instructions</li> </ul>          |
| Limited, inconsistent, or absent eye contact at any age |                                                                                                                                                                                                                   |                                                                                                                                              |                                                                                                                                                                                 |                                                                                                                                                                                                                      |                                                                                                                                                                                        |                                                                                                                                                                                                                |                                                                                                                                                                                                |                                                                                                                                                                                            |
| SOCIAL                                                  | <ul style="list-style-type: none"> <li>Does not show affection for caregivers</li> <li>Does not laugh or make squealing sounds</li> </ul>                                                                         | <ul style="list-style-type: none"> <li>Does not respond to his/her name when called</li> <li>Does not recognise familiar people</li> </ul>   | <ul style="list-style-type: none"> <li>Does not use gestures (e.g. waving bye-bye)</li> <li>Plays with parts of toy instead of whole toy (e.g. wheels of car only)</li> </ul>   | <ul style="list-style-type: none"> <li>Does not point to show things to others</li> <li>Does not imitate others</li> <li>Does not notice or mind when caregiver leaves or returns</li> </ul>                         | <ul style="list-style-type: none"> <li>Does not copy actions or words</li> <li>Does not bring objects of personal interest to show caregiver</li> </ul>                                | <ul style="list-style-type: none"> <li>Has no pretend play</li> <li>Has poor eye contact</li> </ul>                                                                                                            | <ul style="list-style-type: none"> <li>Does not play with other children or toys</li> <li>Does not know what others are feeling or thinking by looking at their facial expressions</li> </ul>  | <ul style="list-style-type: none"> <li>Ignores other children or does not respond to people outside the family</li> <li>Not independent in toileting, eating, or basic dressing</li> </ul> |

Source: *Child Development Unit, Khoo Teck Puat – National University Children's Medical Institute, National University Hospital*



## 2 MEDICAL PROFESSIONALS: WHAT TO EXPECT AT A CDS APPOINTMENT WITH YOUR CHILD'S DOCTOR



From birth to six years old, children are seen regularly for vaccinations and CDS appointments at polyclinics, GP clinics, or paediatricians. The doctor may raise concerns about your child's development at these visits.

Most of the recommended touchpoints for a CDS coincide with the childhood

vaccination schedules, making it more convenient for you to make a combined appointment for CDS and vaccinations. Parents should also remember to take their child for the check-ups at the recommended 30-month and 48-month touchpoints, even if there are no vaccinations scheduled.

### Recommended touchpoints for CDS and vaccinations

Please schedule a visit to your GP or polyclinic during the suggested periods.

| Age                   | NCIS Vaccination                       | Recommended CDS Touchpoints       | Age Range for CDS Touchpoint |
|-----------------------|----------------------------------------|-----------------------------------|------------------------------|
| At Birth <sup>2</sup> | BCG (D1)<br>Hep B (D1)                 | -                                 | -                            |
| 4 weeks               | -                                      | 4 weeks                           | [1] 4 - 8 weeks              |
| 2 months              | 6-in-1 (D1) <sup>3</sup>               | -                                 |                              |
| 3 months              | -                                      |                                   |                              |
| 4 months              | 5-in-1 (D2)<br>PCV (D1)                | 3 months or 4 months <sup>4</sup> | [2] 3 - 5 months             |
| 5 months              | -                                      | -                                 |                              |
| 6 months              | 6-in-1 (D3)<br>PCV (D2)                | 6 months                          |                              |
| 12 months             | MMR (D1)<br>Varicella (D1)<br>PCV (B1) | 12 months                         | [3 & 4] 6 - 12 months        |
| 15 months             | MMRV (D2)                              | -                                 |                              |
| 18 months             | 5-in-1 (B1)                            | 18 months                         | [5] 15 - 22 months           |
| 30 months             | -                                      | 30 months                         | [6] 24 - 36 months           |
| 48 months             | -                                      | 48 months                         | [7] 48 - 60 months           |

Source: Ministry of Health - Childhood Development Screening

D1, D2, D3: Dose 1, Dose 2, Dose 3  
B1, B2: Booster 1, Booster 2

<sup>2</sup> Vaccinations typically administered in hospitals

<sup>3</sup> For infants born to **HBsAg positive** mothers, they will receive their second dose of monovalent Hep B vaccine at 1 month, followed by the 5-in-1 vaccine at 3 months of age.

<sup>4</sup> Clinicians may wish to conduct the CDS together with vaccinations at three months old for children starting on 5-in-1 (DTaP/IPV/Hib) schedule, and at 4 months for children starting on the 6-in-1 schedule. The 5-in-1 vaccine includes DTaP/IPV/Hib. The 6-in-1 vaccine comprises DTaP/IPV/Hib and Hep B.





## What You Can Do

**If you are concerned about your child's development** or if you have any queries between CDS touchpoints, you can:

- Use the developmental checklist in your child's Health Booklet and/or in the HealthHub application and observe your child for any signs of DN.
- Speak to your child's educator and/or seek a medical opinion at a polyclinic or a GP clinic as early as possible. Children below one year old should also receive medical attention if you are concerned about their development at any time. Your child's educator or medical professional would be able to advise if a referral to a developmental paediatrician is required.
- Contact National University Hospital (NUH) Child Development Unit (CDU) or KK Women's and Children's Hospital (KKH) Department of Child Development (DCD) directly for an appointment. These clinics are under the national Child Development Programme (CDP) funded by the Ministry of Health (MOH). Please note that you will not receive subsidised services without a polyclinic referral.

## What happens during an appointment at the NUH/KKH clinic or at a private paediatrician's clinic?

### STEP 1

The paediatrician will first ask you a few questions about your child and your family. This includes your child's current developmental ability and when he/she achieved these developmental milestones. The paediatrician will also ask about your family's medical history and the social environment which your child is growing up in. Some queries include whether your child goes to school/childcare or is taken care of at home and the languages that your child is familiar with. The paediatrician will also ask you about factors that affect your child's health e.g. his/her sleep patterns, screen-viewing time, and eating habits.

### STEP 2

Next, the paediatrician will examine your child to see if he/she is well physically. The paediatrician or nurse will also interact with your child to get a sense of your child's developmental abilities and how your child interacts with others and responds to instructions.

### STEP 3

If required, paediatricians will ask for additional assessments, such as hearing/vision screenings, psychological/developmental assessments, and questionnaires, that need to be completed by you and your child's educator to fully understand your child's developmental profile.

### STEP 4

Lastly, the paediatrician will advise you on the intervention services that could support your child and offer to see your child again after further intervention to review how your child is progressing.

Apart from the documents (e.g. birth certificate and Health Booklet) that the clinic requires you to bring along, there is no need to prepare your child for the doctor's visit. The paediatrician will try their best to put your child at ease and make the visit enjoyable for him/her. Any interaction with your child will be conducted in a friendly play environment. Most children enjoy the doctor's visit as they get to play with toys.



### 3 CHILD'S PRESCHOOL TEACHERS: HOW A PRESCHOOL EDUCATOR IDENTIFIES A CHILD'S NEEDS

Sometimes a child's preschool educators may share observed concerns with parents. As your child's educators have experience interacting with children, their observations and feedback are important. If your child is observed to have some developmental needs (DN), your child's preschool may recommend that you bring him/her for an assessment.

For children aged five to six years old who require low levels of early intervention (EI) support, your child's educator may recommend the Development Support and Learning Support (DS-LS) programme, which is an EI programme available in preschools.

If your child needs more support (e.g. has significant delays in language and communication, disruptive behaviour, or causes harm to himself/herself and/or others), the preschool may recommend that you make an appointment at a Child Development Programme (CDP) clinic (i.e. NUH CDU or KKH DCD) to see if an Early Intervention Programme for Infants & Children (EIPIIC) would be helpful for your child. The EI centres have in-house EI educators and Allied Health Professionals (AHPs), and sessions are conducted in smaller class sizes to better meet the needs of your child.



#### Common Misconception



**My child will probably outgrow his/her developmental condition or behavioural issue. I am considering waiting to see how he/she progresses before I decide whether to accept the assessment or intervention that was recommended.**



While some children with mild developmental concerns may eventually reach their developmental milestones without targeted intervention, most need assistance. In most instances, EI can help. Early identification of your child's DN enables you to provide them with appropriate support as soon as possible. Having a head start to intervention would probably improve the developmental trajectory of your child. Help your child to start earlier and grow better!



#### Emotional Check-In

You may experience different reactions upon realising or being told that your child may have developmental concerns. You may feel **anxious** and **worried** about your child's future or even feel **a sense of loss**. You may feel **confused** or **overwhelmed** by the information given by the medical or early childhood professional. Alternatively, you may even feel **relieved** that someone has taken your concerns seriously. **Your loved ones are also processing their feelings and may have different reactions to the news.**

These feelings could last for a while and you may have a combination of different feelings at different times. **It is natural for you and your loved ones to have all these emotions and many parents have the same reactions as you.** Give yourself and your loved ones some time to make sense of the new information you have received about your child. Discuss it, seek to understand their views, and support each other in accepting your child's developmental concerns. You may find it gives you comfort to speak to other parents who have gone through the same process, or to professionals who can understand what they are going through. You may also join support groups to find others who you can talk to.



# A PARENT'S JOURNEY



## The story of Tom's parents and how they overcame their fears about his development

We feel proud of Tom, our 15-year-old child with autism. It was not always like this. We went through a period of dark thoughts and even depression when Tom was first diagnosed. He was our firstborn and symbolised all our hopes and dreams. I still recall the professionals at KKH telling us that Tom would never be typically developing; that was the day our hopes of having a normal child were dashed.

It took a long time for us to adjust to the diagnosis. We were shocked and very sad. I was very worried about my child's future. Would he have a job? Would he get married? Would he survive in our society? I started saving even more. My wife cried many times. Our parents even wondered if it was because we did not take care of our unborn baby during my wife's pregnancy. Logically, we knew that my wife could not have prevented this.

Soon after the diagnosis, Tom attended EIPIC. He received intervention that helped him use different tools to communicate and the EI centre taught us strategies to deal with Tom's behavioural problems. He also received some help for his motor skills. We took all the meetings with the educators and therapists seriously and carried out the strategies as advised. It required a huge shift in our mindset to fully accept our child's disability.

We see our child as a wonderful human being of immeasurable value despite the disability. Instead of ascribing value to how many educational certificates or how many As he has, we see him as a person of value. We appreciate the

beautiful and not-so-beautiful aspects of his personality daily. We find hope and joy in learning about his disability and in every little developmental milestone he crosses, knowing that he is making improvements. Even though he continues to be non-verbal, we have accepted this. We witnessed our little bundle of joy turn into a young teenager over the years and he continues to grow.

Parenting Tom has made us very appreciative of his development. When Tom screams and yells, we know that he is experiencing some discomfort in the sensory realm. We know that we cannot solve all of his problems. But we do what we can, such as helping him regulate. We have developed an attitude of gratitude for the small things in life. Initially, we felt frustrated and occasionally bitter. Now, we have become more tolerant, empathetic, and loving. We know that this is not every parent's response. It was not our natural response either, but a response we actively cultivated.

Our role as parents is not easy. We know we will face even more challenges as Tom grows and matures. We have adjusted our expectations of his independence and achievements. My wife and I have confidence in our attitude and trust that Tom will be taken care of. We have set aside a modest sum for Tom and perhaps his sibling will be there for him, too. We know that the Government is also here to provide some financial support and housing support if it is ever needed. Tom will continue to lead a life as a valuable human being, just with different needs.



# ACCESSING EARLY INTERVENTION SERVICES



**T**he first chapter focused on the typical developmental cycle of a child, potential developmental delays to look out for, and the different channels through which a child with developmental needs (DN) might be identified.

After your discussion with a medical or EI professional, you may be wondering what to do next. **This chapter aims to assist you and your family in navigating the next step of your journey – choosing an appropriate early intervention (EI) service** by addressing the following:

- *What is EI and how it benefits your child;*
- *Recommendations when selecting an EI service, centre, or programme;*
- *Available government-funded EI programmes; and*
- *What you can do to support your child at home.*

**As you seek to decide what is best for your child, it is important to talk to the professionals so that they can provide you with information to support your decision-making.** If things are not working the way you would like, it is alright to change course or take up new options. Seek further advice on supporting your child better and make new decisions. **It is an ongoing discovery process as you learn more about what works best for your child and family.**





## WHAT IS EARLY INTERVENTION

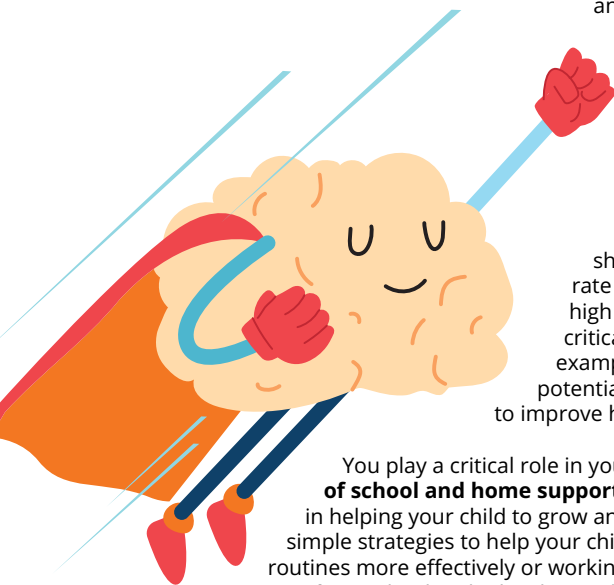
Early Intervention (EI) is the process of providing specialised support and services for infants and young children with developmental needs (DN) and their families in order to promote the child's development.

**It should occur as early as possible after a child's needs have been identified and assessed by medical or EI professionals<sup>5</sup>.**

**EI support is provided based on the child's level of needs through a multidisciplinary approach and aims to help the child in their development of knowledge and skills required for their daily activities.**

Based on a holistic assessment of your child's needs, an EI team will design an Individualised Education Plan (IEP) for your child. This IEP may involve support from an EI team at a specialised centre or in your child's preschool. Various professionals including speech and language therapists, occupational therapists, physiotherapists, and/or psychologists may be involved in your child's development.

The five key domains of a child's development are Social and Emotional, Physical and Motor, Language and Communication, Vision and Hearing, and Cognition.



## BENEFITS OF EI

The early years of a child's development are the most critical years. Studies have shown that brain growth is at its highest rate during early years. EI capitalises on the high pace of brain development during these critical years to help your child develop. For example, neuroplasticity taps on this growth potential to help a child with DN advance quickly to improve his/her developmental trajectory.

You play a critical role in your child's development. A **combination of school and home support** is ideal and would be most beneficial in helping your child to grow and improve. This could involve applying simple strategies to help your child participate in his/her daily living routines more effectively or working closely with your child's school teachers to reinforce what he/she has learned in school. As your child has more opportunities to practise what is taught at EI centres/preschools, he/she can master skills and apply his/her learning across different contexts. This also builds your child's confidence and self-esteem.

<sup>5</sup> EI professionals refer to Learning Support Educators and EI teachers.



# THINGS TO CONSIDER WHEN ASSESSING THE TYPE OF EI SERVICES AND SERVICE PROVIDERS

## KEY CONSIDERATIONS

Each child has his/her own unique combination of strengths and areas of improvement. The best EI service is one that addresses the **specific needs of your child** and could vary in terms of the type and intensity of support that your child requires.

Choosing a suitable EI service<sup>6</sup> is also a family decision. You and your family may want to consider other factors such as your family's needs and circumstances (e.g. the need for childcare services, your family members' schedules), proximity of your home to the centre, and the costs involved. It may be helpful to consider the following areas when choosing an EI service:

### TYPE AND INTENSITY OF EI SUPPORT

If your child has seen a doctor or an EI professional, you will be advised on the level of EI support required for government-funded EI services.

- **Low levels of EI support** – Short term support (e.g. six months or less) that is delivered less frequently (e.g. once a week) for a short duration (e.g. one hour). This would be delivered at your child's preschool (e.g. Development Support – Learning Support (DS-LS) programme and the Development Support-Plus (DS-Plus) programme by a team of EI professionals and/or Allied Health Professionals (AHPs)).
- **Medium levels of EI support** – Longer term support (e.g. one year or longer) that is delivered more frequently (e.g. a few times a week) for a longer duration (e.g. two or more hours) by a team of EI professionals and AHPs. Sessions are held at dedicated EI centres (e.g. Early Intervention Programme for Infants & Children (EIPIIC)).
- **High levels of EI Support** – In this case, the support is delivered on a one-to-one basis over an extended period of time, as compared to low/medium EI support.

There are also private EI providers if you wish to consider their services. Each provider would have their own ways of categorising support levels.

<sup>6</sup> Note that the type of government-funded EI services are recommended following a screening/assessment process that will also involve the parents' inputs.



Some of the questions you can ask potential service providers, to assess their suitability or fit for your child, are listed below:



### Qualifications and experience of the team

- Are the therapists registered under the Allied Health Professions Council (AHPC)<sup>7</sup>?
- Are the psychologists registered with the Singapore Register of Psychologists under the Singapore Psychological Society?
- Do the EI educators have relevant qualifications and training?



### Quality of the programme

- Is the centre's approach to EI recognised based on evidence-informed practices?



### Monitoring approach

- How does the centre monitor your child's progress?
- Does the provider have clear goals for your child?



### Family involvement

- How does the provider involve the family in supporting your child?
- Is caregiver training provided?
- Do you or a caregiver need to accompany your child to each session?



### Child safety

- Are there child-safe practices put in place such as monitoring child-teacher interactions and environmental standards?



### Transport/location

- Is the EI centre/preschool at a convenient location?
- Are you or your family able to transport your child to and from the EI provider?



Learn more about government-funded EI providers and programmes in the next section or at the Enabling Guide website.

<sup>7</sup>The AHPC governs and regulates the professional conduct and ethics of registered AHPs in accordance to the Allied Health Professions Act, 2011.



If your child is receiving EI support at an EI centre (e.g. EIPIC), you may also consider preschool services to address your child's caregiving needs as well as enable your child to benefit from a preschool curriculum and interact with his/her peers. Consider safety factors like whether the preschool provides additional support, and if your child is able to participate meaningfully in the classroom and play activities while deciding on suitable preschool services. You should approach EI or medical professionals to seek advice on whether your child would benefit from this.

The following preschools provide some support for children with developmental needs (DN):

-  **Preschools that offer low level of EI support such as the DS-LS programmes:** Please contact the DS-LS service providers to explore enrolment opportunities.
-  **Inclusive Support Programme (InSP) preschools (Pilot):** Please visit the Early Childhood Development Agency (ECDA) website for more information.
-  **Others:** Please contact SG Enable for more information on other preschool support services for your child.



### Enrolment waiting period

-  Your preference of specific providers, locations, and session timing will influence the waiting period. For government-funded EIPIC and the Early Intervention Programme for Infants and Children - P (EIPIC-P), waitlists could be at least six months from the time of referral. Should you experience a waiting period, you may wish to learn more about how you can support your child during this time.



### Costs

-  What is the monthly programme fee?
-  Are there additional costs involved such as for equipment or for other supporting intervention services?
-  Are there government subsidies available for EI services or related costs (e.g. transport)?
-  Can you tap on the Child Development Co-savings Account? Enquire if it is a Baby Bonus Approved Institution via the EI service provider.



### Transport arrangements

-  Are there 'school' bus transport services for your child to get to the EI centre and back? More information about arranging transport services can be found here.





## What You Can Do

Remember that you are not alone on this journey. These are the steps you can take to support your decision-making:

- Consult your child's paediatrician or doctor to understand your child's needs and find out more about the **level and frequency** of support your child would require.
- Have a conversation with your family members to carefully consider the arrangements your family will need to make to facilitate your child's access to EI services and how that may impact your childcare and caregiving options.
- Join a [caregiver support group](#) to understand the different available options. You can also refer to online resources such as the [Decision-Making Guide For Children With Disability, Autism And Additional Needs](#).
- Speak to [SG Enable](#), a social worker, or the EI service case manager to find out more about the customisable programmes available.
  - Find out more and apply for schemes and services which are relevant and useful for your child.
  - Speak to your child's EI provider or attending hospital to discuss the use of [Assistive Technology \(AT\)](#) for your child, and get an AT assessment done where relevant, to identify the suitable types of AT that he/she can benefit from. You may also make an appointment with therapists from SPD who operate in [Tech Able](#) at the Enabling Village.

There is a team of professionals from different backgrounds who work together to support your child's advancement. Not every type of professional may be required; this will depend on your child's needs.

## 1. EI Educators and Learning Support Educators

### EI EDUCATORS

provide intervention to children who require low to high levels of EI support. EI Educators integrate a range of teaching and learning approaches and identify new approaches to conduct lessons for your child. They may also partner with you and your family to support your child during the programmes and services.

### LEARNING SUPPORT EDUCATORS (LSEds)

support children who require low levels of EI support in preschools. They play a key role in facilitating the appropriate identification and provision of support to your child within the preschool setting to ensure their potential is maximised. LSEds also collaborate closely with you and your child's teachers to support skill maintenance and generalisation in different settings. LSEds are Early Childhood (EC)-trained and have received targeted training to support children in the DS-LS programme.



## 2. AHPs Comprising Audiologists, Occupational Therapists, Physiotherapists, Psychologists, and Speech and Language Therapists

### AUDIOLOGISTS

assess your child's hearing or balance. Audiologists help children manage hearing loss and communicate effectively with others by teaching them lip-reading, recommending hearing devices, or suggesting other services related to hearing and communication.

### PSYCHOLOGISTS

assess and diagnose learning and developmental issues that your child may have and help you with your child's learning, behaviour, and social-emotional wellbeing. They help your child to learn, manage his/her behaviour, and regulate his/her emotions.

### OCCUPATIONAL THERAPISTS

assess and improve your child's ability to engage and perform in everyday activities. They provide support for cognitive, sensory processing, attention, regulation, and selfcare tasks, as well as behavioural, social, fine motor, and play skills. They may also teach you how to adapt your home environment to meet your child's needs and encourage his/her independence.

### PHYSIOTHERAPISTS

assess and help your child to improve physical movement and function through treatments such as physical rehabilitation, therapeutic exercises, and AT such as mobility aids. This includes addressing mobility, balance, strength, and coordination issues.

### SPEECH AND LANGUAGE THERAPISTS

assess, diagnose, and provide support and management for language and communication issues. These therapists also help children with feeding or swallowing difficulties.

## 3. Social Workers

### SOCIAL WORKERS

support you and your family to better understand your child's strengths and areas of need. They also help to build strong partnerships between your home, your child's school, and the community.



# GOVERNMENT-FUNDED EI SERVICES

The Government works with various Social Service Agencies (SSAs) and preschools to provide a continuum of affordable programmes to meet different levels of EI support that preschoolers may need.

The Development Support and Learning Support (DS-LS) programme, Development Support Plus (DS-Plus) programme,

and Inclusive Support Programme (InSP) are provided in many preschools where children can receive support within their natural settings. The Early Intervention Programme for Infants & Children (EIPIIC) and the Early Intervention Programme for Infants and Children - P (EIPIIC-P) are provided at dedicated EI centres.

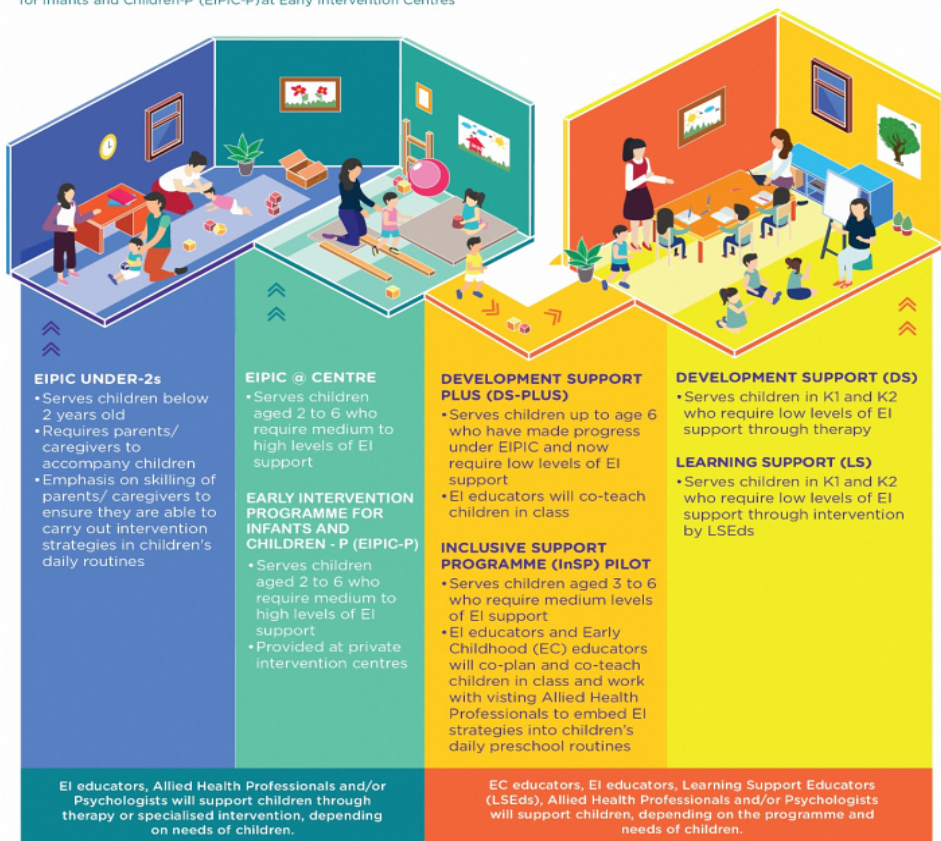
## EARLY INTERVENTION (EI) PROGRAMMES

### EARLY INTERVENTION CENTRE

Children who require **medium to high levels of EI support** may attend the Early Intervention Programme for Infants and Children (EIPIIC) and the Early Intervention Programme for Infants and Children-P (EIPIIC-P) at Early Intervention Centres

### PRESCHOOL

Children who require **low to medium levels of EI support** can receive intervention through EI programmes available in their preschools



## Development Support-Learning Support (DS-LS) Programme

The DS-LS programme is suitable for children in K1 and K2 who require low levels of EI support in areas such as speech and language, social skills, motor skills, behaviour, and literacy. These programmes are designed to help them develop appropriate skills and improve their overall advancement and are provided in the child's preschool setting.

Preschools that offer the DS-LS programme will assess your child's eligibility for the programme. If your child's preschool does not offer the DS-LS programme, you may ask them to contact their respective Therapy Teams.

## Early Intervention Programme for Infants and Children (EIPIC)

Children who require medium to high levels of EI support are referred to EIPIC provided at EI centres. EIPIC provides children with more intensive support than the DS-LS and DS-Plus programmes; intervention to improve the child's functioning is usually not carried out within preschools (except for InSP – see below). Your child must be assessed and recommended by a medical professional for suitability to enrol in EIPIC.

**EIPIC Under-2s** supports children under two years old. It emphasises caregiver training to carry out intervention strategies in your child's daily routines at home. The EIPIC Under-2s programme requires accompaniment. When your child turns two years old, he/she will transition to the EIPIC@Centre programme.

**EIPIC@Centre** supports children from two to six years old. Both therapy and educational intervention services are delivered at EI centres by a team of professionals, typically in small groups. Your child's progress will be assessed regularly and the intervention goals and strategies will be customised to your child's requirements.

## Development Support-Plus (DS-Plus) Programme

The DS-Plus programme enables children who have made sufficient progress during EIPIC to receive continued intervention within their preschool setting. A child that is deemed suitable must be enrolled in both an EI centre and a preschool that accommodates the DS-Plus programme. There is no need to apply for DS-Plus as EI professionals will contact you directly if your child is eligible.

## Inclusive Support Programme (InSP)

The InSP supports children from three to six years old who require medium levels of EI support. This programme will integrate the provision of EI and EC services at preschools. Selected pilot preschools have full-time EI educators and visiting AHPs who work closely with Early Childhood (EC) educators to enable children to participate meaningfully in preschool.

You may refer to the following resources for further reading and information:

-  The Enabling Guide provides more information on government-funded EI services.
-  The Preschool Search Portal provides a list of preschools. For more information about preschools and how to choose a childcare for your child, you may refer to the ECDA website.
-  The referral process infographic outlines how your child may be referred to a particular EI programme.





### Common Misconception

✗ **If I send my child to an EI programme, he/she will definitely be labelled to have special educational needs or a disability. My child will not be able to have a normal and fruitful life in future.**

✓ Seeking out intervention or having a diagnosis does not mean your child will be labelled to have special needs. Intervention helps to ensure that your child receives the support he/she requires. Some of the children who receive support from an EI centre go on to mainstream primary schools while others may be best supported in Special Education (SPED) schools.

Children who attend SPED schools can also lead fulfilling and valuable lives.

✗ **Intervention should be delivered in a one-to-one format to be effective.**

✓ The goal of intervention is to create change and intervention may be conducted within a group setting (e.g. classroom) or in a one-to-one setting. For instance, in local EI centres, a team of EI professionals and AHPs (typically EI teachers, speech therapists, occupational therapists, and psychologists) work together to make recommendations for supporting your child's needs within the routines of the classroom which are then carried out by a class teacher. The approach of embedding interventions within classroom routines helps to provide the consistency needed for your child to work on the identified behaviours and increases the chances of their improvement.

## PREPARING YOUR CHILD FOR AN EI CENTRE

If your child has been referred to an EI centre, prepare your child for the first day at the centre and ease your child into the transition.

- 1 Take your child to the neighbourhood where the centre is located to familiarise him/her with the vicinity.
- 2 Take your child along to explore the different routes to the centre and familiarise him/her with the routes.
- 3 Use stories to explain to your child what he/she can expect in class — the people that they will meet, the activities that they will do, etc.
- 4 Ensure that your child has all the necessary items for class — snacks, water bottle, extra clothes, etc.
- 5 Establish routines to prepare your child for mornings when he/she has an EIPIC class. For example, your child might wake up, eat breakfast, brush teeth, dress up, and leave home. You can also make a visual schedule to explain these.
- 6 Communicate with your child's EIPIC teachers and share any relevant information to help the teacher know how best to work with your child.

You may refer to the following for further information and reading:

- [Families For Life Parenting Resources](#) has resources to prepare your child for preschool.
- [Enabling Guide](#) provides information on the subsidies for government-funded EI programmes.





### What You Can Do

- Sign up for the [Start Right Workshop](#) run by SG Enable to learn more about EI and the community resources available if your child has been referred to EIPIC. Click [here](#) for more information on other programmes.
- Join a [caregiver support group](#) to connect with other parents and families. If your child is enrolled in an EI centre, ask the centre case worker regarding parent support groups and resources.

## TRANSITIONING OUT OF EI SERVICES

If enrolled in government-funded programmes through EIPIC or within the preschools, your child will exit the current EI programme when:

1. Your child reaches primary school age; or
2. Your child improves and transits out of his/her current EI programme to another that better meets his/her needs. The support provided will best match his/her developmental needs.

At the end of the EI programme, the professional working with your child will get in touch to discuss the progress your child made during the intervention.

- A meeting may be held among you, your child's professional, and other key professionals such as his/her teacher or therapist to review your child's intervention goals along with your child's progress.
- You may want to discuss how you can continue to support your child at home, possible follow-up services, as well as monitor your child's progress with the professional.
- You might be advised to share key information with your child's next school to facilitate the transition process.

Please see the section on "[Understanding the different educational settings](#)" for the options available for your child at the school-going age.



### Common Misconception

- Once my child has completed the intervention, he/she does not need regular monitoring of his/her skills and development.**
- ✓ Your child may continue to have specific needs after receiving intervention. It is ideal to continue to monitor your child's progress, observe his/her needs, and help your child maintain the progress that he/she has made through regular practice of the new skills.



# WHAT YOU CAN DO TO SUPPORT YOUR CHILD

## Your role as a parent in supporting your child's intervention:

### Cheerleader and Friend

- Encourage your child and recognise his/her efforts and progress
- Celebrate every effort and improvement
- Take time to empathise and understand your child, who may experience struggles during the journey



### Advocator

- Take your child to services and community spaces
- Share your child's different needs with his/her teachers and the community
- Request for services and support that your child and family need from relevant Agencies



### Companion

- Rest and recharge even as you journey with your child
- Join a **caregiver support group** to find more companions



### Learner

- Seek out information to understand your child's unique needs and available support services
- Find out which service and school best suits your child's learning
- Learn and develop strategies to support your child at home



### Collaborator

- Provide consent to share information about your child's strengths and learning needs with his/her EI centre, preschool, and paediatrician
- Provide feedback on whether the strategies recommended by the professionals are working for your child
- Link up the preschool and the EI/PIC teams to allow them to work together for the development of your child
- Inform the educators and paediatrician about your child's new developments at home



### Teacher

- Observe and build on your child's strengths, interests, and learning styles
- Seize learning opportunities for your child in family routines. More information can be found at [ECHO Frameworks' Parents' Toolkit](#)
- Play with your child as children learn best while playing and having fun
- Help your child get along with others, learn new skills, and take care of his/her own needs
- Affirm and encourage your child for his/her efforts
- Be a role-model for positive behaviour



## Suggestions on how to provide a supportive environment for your child's learning:

### 1. Building a strong bond with your child

**a) A strong parent-child relationship is crucial. When a child feels well-supported and cared for by you, he/she will:**

- i) try new things and learn from his/her experiences.*
- ii) go to you for guidance when he/she faces challenges.*

**b) It is therefore important to create an environment of trust and care to build a strong bond with your child. Some recommendations include:**

*i) Spending quality time with your child.*

- Participate in activities that your child likes such as playing a board game or going to the park.
- Engage your child through play. Playing together can help your child feel loved and secure, which can strengthen the bond between you and your child.
- If you have more than one child, it is important to spend time and engage in activities with each of them individually.

Time spent with your child can sometimes be a learning opportunity, too. For example, when you read a book with your child, it can help him/her develop language skills.

Include your child in daily routines, such as doing household chores together. This provides an opportunity for your child to learn life skills and cultivate a sense of responsibility.

*ii) Building a trusting relationship to help nurture a strong bond.*

- Be there for your child when he/she needs your support or help.
- Understand and respect your child for who he/she is.

**c) For more resources on how to build a strong bond and engage with your child, you may refer to the Enabling Guide.**

### 2. Identifying your child's strengths

**a) Understand what your child does well in and enjoys doing.**

- i) For example, if a child can sing well but dislikes it, then singing is a skill but not an interest.*
- ii) If your child needs more support in reading, writing, and talking, do find ways to help him/her improve these skills. However, you should nurture his/her natural interests and strengths, too.*

**b) Some recommendations to identify and nurture your child's strengths are as follows:**

- i) Observe what activities motivate your child. If your child can verbalise his/her thoughts, ask him/her what he/she likes to do.*

*ii) Look beyond your child's academic strengths and pay attention to his/her non-academic strengths, too.*

*iii) Let your child engage in activities that he/she excels in.*

*iv) Support your child's interests and strengths. For example, if your child loves music, you could send him/her for music lessons.*

*v) Use your child's strengths creatively to approach things he/she is not good at.*

*vi) Praise your child on specific actions when he/she does well. Celebrate your child's achievements to boost his/her confidence.*

**c) Understand why recognising your child's strength is important.**



### 3. Supporting your child through challenging and difficult behaviour

i) *When children exhibit challenging behaviour, they can be tough to manage. However, it is important to remind yourself that behaviour is a form of communication.*

ii) *Often, children display challenging behaviour when:*

-  They struggle to express themselves.
-  They have trouble understanding others.
-  They do not get what they want.
-  They feel a lack of control over the situation (for example, sudden changes in routine and not getting to choose what they want to watch or eat).
-  Their needs are not met.
-  They have difficulty managing strong emotions like sadness or fear.

-  They are tired or hungry.
-  They have some physical or sensory discomfort.
-  They want to avoid a situation they feel is unpleasant.

iii) *Learn to identify triggers to your child's challenging behaviour by paying attention and observing. Take note of details of the situation. Some questions to consider are "Who was around? What was happening before, during, and after the situation?"*

iv) *You can then use this information to find out the cause and effect of your child's challenging behaviour and to spot any emerging patterns relating to your child's behaviour.*

v) *For more resources on how to manage your child's challenging behaviour, you may refer to the [Enabling Guide](#).*



#### Navigating Emotions in Times of Social Disruptions

Pamela, an educational and developmental psychologist, shares how parents can help children navigate behavioural changes as they grow. This includes advice on helping a child with special needs understand his/her complex thoughts and emotions. Click [here](#) to watch the video.



#### Supporting Children's Emotions and Behaviours

Dr Koh Hwan Cui, psychologist at the Department of Child Development in KKH, shares about resources that help children improve school-readiness. This includes anger management and how to cope with COVID-19. Click [here](#) to watch the video.



#### Managing Challenging Behaviours

Dr Tammy Lim, Ms Alison Cheng, and Ms Hepsy Priyadharsini from the NUH CDU explain the reasons for challenging behaviour, how to identify ways to tackle the behaviour, and how to teach replacement behaviours. Click [here](#) to watch the video.



#### Anxiety in Special Needs Children

Dr Sung Min from the Institute of Mental Health (IMH) shares some advice on how you as parents can help your child understand and manage his/her anxiety. The talk includes tools and actions you can take to help tackle this. Click [here](#) to watch the video.





### Common Misconception

✗ **My child is displaying challenging behaviour to gain attention or be difficult.**

✓ **Behaviour is a form of communication.** Children show challenging behaviour for various reasons. There are children who engage in such behaviour to get what they want, while there are others who may have specific difficulties regulating their emotions or articulating their thoughts and feelings. Some may have sensory discomfort, peculiar habits, fears, or unmet needs and they might be engaging in challenging or difficult behaviour to express themselves. **It may take some time to really understand what is causing the challenging behaviour that your child is displaying, but it is important to be patient and try to figure out what they are saying.**

## 4. Creating a conducive environment to foster your child's learning at home

- a) EI does not take place only in EI centres or in the classroom. It also needs to be practiced at home and incorporated into natural routines. Set up a dedicated learning space to make it easier for children to focus on you and the task at hand.
- b) Ensure that the space is welcoming for your child with adequate lighting and comfortable furniture.
- c) Have all necessary learning materials in the learning space and keep them organised.
- d) Keep the learning space clutter-free with minimal noise and visual distractions.
- e) Create schedules to give your child a clear idea of the sequence and expectations of the day. Depending on your child's level, schedules can be in the form of pictures or written out. Put the schedule in an obvious place to remind your child of the tasks to complete.
- f) Older children can be encouraged to personalise their learning space by adding decorations or artwork that might give them a sense of ownership and help them stay motivated.
- g) Establish routines for daily activities such as mealtime and bedtime. With routines, children will learn what they need to do and when they need to do it and they provide a predictable platform for your child to develop and learn the skills they need to live, learn, and play well.
- h) Develop healthy habits, care, and sleep habits key to a child's growth and development.
- i) For more strategies to help your child follow routines and inculcate good habits in your child, you may refer to the [Enabling Guide](#).



### Staying Sane Through Routines with Dr Lim Hong Huay

Dr Lim is a caregiver to her children, two of whom have special needs. She is also a paediatrician and epidemiologist. She shares about how routines help her maintain control over her and her kids' schedules, as well as improve moods, mind, body, and health. Her advice is particularly pertinent for Home-Based Learning/Home-schooling settings. Click [here](#) to watch the video.



# TRANSITION FROM EI TO SCHOOL-AGED PROVISIONS





**A**s your child completes his/her early intervention (EI) programme and/or preschool education, you need to consider school and school-based support that is best able to support his/her ongoing development. In Singapore, the Compulsory Education (CE) Act implemented in 2003 makes primary level schooling compulsory for all children who are Singapore Citizens residing in Singapore and are of schooling age (above 6 years old and under 15 years old). It is also compulsory for children born after 1 January 2012 with Special Educational Needs<sup>8</sup> to attend primary level education in Government-funded Special Education schools or mainstream primary schools unless exempted from doing so.

**It is important to understand your child's needs to make the best decision regarding his/her educational pathway and support that is most appropriate for him/her.** In this section, you will find out more about:

- *Things to consider when choosing a suitable educational pathway for your child;*
- *The different educational pathways available; and*
- *How you can support your child through this transition from EIPIC and/or preschool to the next education setting by building a strong ecosystem of support.*

<sup>8</sup> A child is categorised to have Special Educational Needs when he/she receives an official diagnosis of a disability, requires different and/or additional resources beyond what is conventionally available, and as compared to same-aged children, he/she shows either more difficulty in learning, or difficulty using educational facilities, or some areas of impairment, in terms of social, academic, physical, or sensory functioning.



# THINGS TO CONSIDER WHEN CHOOSING A SUITABLE EDUCATIONAL PATHWAY

## POSSIBLE EDUCATIONAL PATHWAYS

The next major milestone in your child's life comes when he/she transits from preschool to schooling age. The options available are:

1

### Mainstream Primary Schools

These are suitable for children who have cognitive abilities and adaptive skills to access the national curriculum and mainstream learning environment.

2

### Special Education (SPED) Schools

These may be recommended if your child requires a customised curriculum where more intensive and specialised support is provided to help your child develop foundational literacy and numeracy skills, as well as adaptive skills to manage daily living and learning in small group settings.

### Deferment

This may be recommended if medical or early intervention (EI) professionals have assessed that your child may not be ready to transit to formal schooling due to his/her medical conditions, Special Educational Needs (SEN), delayed progression, or other circumstances. You can apply to defer his/her commencement of Primary 1 or Junior 1. Your application must be supported by a qualified health professional.



**As you decide on a suitable educational pathway for your child, it is important to understand, accept, and support the learning needs of your child, as well as recognise, value, and grow his/her strengths.** Multiple educational pathways are available to enable children with different strengths and needs to be supported at the level that is most suitable for them at each life stage for their optimal development.

**The choice of educational pathway should be decided based on your child's current developmental level, profile of strengths and needs, as well as school readiness.**

Your child can then be provided with the appropriate type and level of resources and support for them to flourish and develop their abilities to the best of their potential.

## HOLISTIC ASSESSMENTS FOR SCHOOL TRANSITIONS

Your child's psychologists and other medical or Allied Health Professionals (AHPs) may recommend a School Placement Assessment or a School Readiness Assessment to find out the most appropriate educational setting for your child after preschool/Early Intervention Programme for Infants & Children (EIPIC). The assessment provides information on your child's cognitive ability, adaptive functioning skills such as communication, socialisation, and self-care, as well as academic skills like literacy and numeracy.

These assessments are usually conducted during the year that your child is due to register for Primary 1 or Junior 1.





### Common Misconception

**✗ If I send my child for an assessment to assist in school transitions, such as the School Placement Assessment or School Readiness Assessment, my child will have to go to a SPED school.**

**✓ Parents make the final decision on the choice of schools for their child.** Through the assessment, professionals will provide you with a better understanding of your child's needs and recommend the type and level of support, as well as the most appropriate educational setting that your child will benefit from. The assessment serves as a guide for you to decide on which educational setting is best for your child's learning and well-being.

**✗ Even if professionals recommend that my child is best placed in a SPED school based on the transition assessment, it is still better for me to enrol my child in a mainstream primary school as he/she might develop while there.**

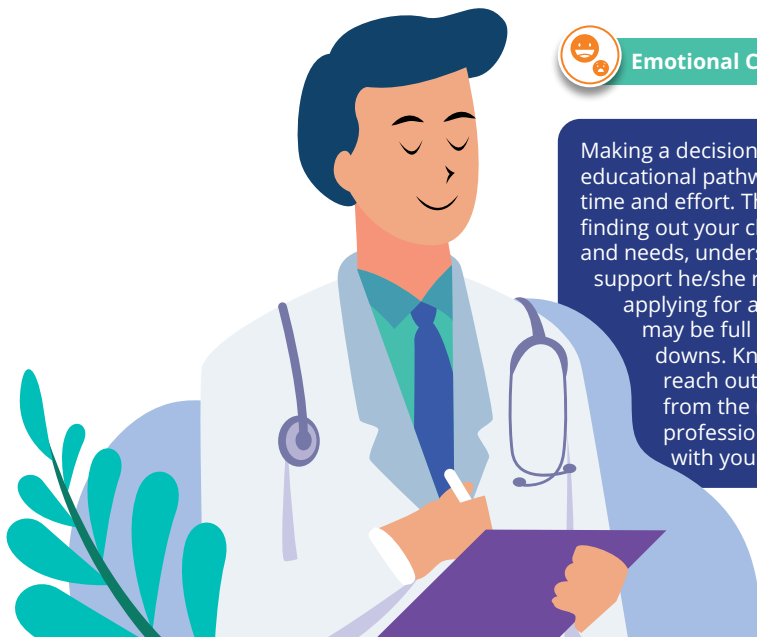
**✓** Should the professionals working with your child assess and find that his/her needs are better supported in a SPED school with a customised programme, it is advisable that your child enrolls in the recommended school. The demands, as well as level of support and resources available in a mainstream primary school, may not benefit your child or be able to adequately address your child's needs. Going to a SPED school, with the appropriate support and customised programmes for your child, will more likely enable your child to learn at a pace suitable for him/her, which will be favourable for his/her development in the longer-term.

**The results of the assessment will help you to make an informed decision about which educational pathway is best for your child.** The EI professionals working with your child will share suggestions about school transitions with you and encourage you to bring your child for an assessment.



### Emotional Check-In

Making a decision on your child's educational pathway takes time and effort. The journey of finding out your child's strengths and needs, understanding the support he/she requires, and applying for a suitable school may be full of ups and downs. Know that you can reach out for support from the medical and EI professionals working with your child.



# When should you start thinking about the transition to school-aged provisions?

Consider these tips for your child, yourself, and your family in considering options as you prepare your child to transit to formal schooling.

## K1

### What you can do for your child

- Find out where your child is in terms of their cognitive abilities and adaptive skills and be patient and aware of what he/she is able to do
- Take time to gather important information about your child's possible schooling options and available provisions
- Talk to your child's teacher, EI professional, or AHP about his/her needs, possible transition programmes, and assessments.
- Consider deferment, if necessary

*\* Take note, if your child has deferred P1 enrolment, the same process applies, but 1 year later.*

## K2\*

- Start the application process early. It is important to note that the application for SPED schools can take up to a year.
- Send your child for the necessary assessments to ascertain their abilities and skills
- Gather necessary reports and take note of application dates
- Visit the school if possible
- Talk to your child about going to school; address concerns and devise a strategy
- Empower your child to try his/her best in school

### What you can do for yourself

- Talk to other parents about your situation
- Think about your own expectations and beliefs; recalibrate them, if necessary
- Read about accommodations and instructions/modifications
- Find out what support is available for your child's primary school years

- Be open
- Ask questions
- Speak to your EI provider or paediatrician at KKH/NUH to find out more about parent forums organised by Ministry of Education (MOE), KKH, and NUH on SPED schools
- Join a caregiver support group to gather advice and resources on next steps

### What you can do with your spouse/family

- Talk to your family about the possible options
- Synchronise your expectations, values, and beliefs
- Share what you find

- Invite your spouse to join in and participate in learning and decision making
- Explain and establish boundaries with grandparents
- Allow time to settle into new routines





### A Letter to My Younger Self

Terence Lew shares what he would tell his younger self if he could. It is an inspiring video that shows how he has been able to overcome the odds despite his disability. Click [here](#) to watch the video.



### Raising a Child with Autism Spectrum Disorder

Noah was diagnosed with Autism Spectrum Disorder at the age of three years. He grew up to be a scholarship recipient whilst studying at the National University of Singapore. Click [here](#) to read about his mother, Madam Florence Goh's, personal experiences in raising a child with ASD.



### Further Reading and Information

- The [Enabling Guide's life stage page](#) provides information about the various stages and transitions your child will go through, as well as the various options available you may wish to consider for your child.
- The [Enabling Guide service directory](#) helps you to locate a suitable service provider for your child.
- [Schoolbag Newsletter](#) has information about programmes and support in mainstream and SPED schools.
- The [Rainbow Centre Early Intervention Programme's Parent Guide to Post-EIP Transition](#) provides information on the different stages of the transition process, as well as tips and resources to help you prepare for it.

## UNDERSTANDING THE DIFFERENT EDUCATIONAL SETTINGS

### MAINSTREAM PRIMARY SCHOOLS

#### All Mainstream Schools

**Mainstream primary schools are suitable for children who have the cognitive abilities and adaptive skills to access the national curriculum and mainstream learning environment.** Mainstream primary schools can support students with Special Educational Needs (SEN) including mild Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder (ADHD), dyslexia, hearing loss, and visual impairment.

There is a range of **school-based support** available in mainstream

**primary schools.** Teachers have a basic understanding and strategies to support students with SEN in their classes. Schools also have Teachers trained in Special Needs (TSNs) and specialised personnel such as Allied Educators (Learning and Behavioural Support), intervention and support programmes, and other provisions for children who may require additional help. You may refer to [MOE's SchoolFinder](#) to obtain information which can help you decide on schools which can best support your child with SEN. **If your child requires additional support, this should be communicated to the school upon registration so that appropriate support can be provided.**





## Featured Stories

### PREPARING YOUR CHILD FOR A MAINSTREAM SCHOOL

You may have worries when your child with SEN is in a mainstream school. Questions such as “Can they cope?” and “Will they fit in?” may run through your mind. Principal Educational Psychologist, Associate Professor (Dr) Mariam Aljunied, shares what children with SEN can expect at mainstream schools and how parents can make the adjustment process as smooth as possible. Click [here](#) to read what Professor Mariam has to share.



#### Designated Mainstream Schools

**There are designated mainstream schools which provide specialised support for children with moderate to profound hearing loss or visual impairment.**

To find out more about such schools' environment, culture and programmes, you may visit the schools' websites, attend their open houses, or visit [Schoolbag](#) to find out more about programmes and support in mainstream schools.

### LOOKING BACK AT MY STUDENT LIFE

Tan Siew Ling, who is fully deafblind, shares her experiences with schooling. She talks about the resources that helped her with her disability and how education has become more inclusive for children like her. Click [here](#) to read her story.

### EVERY CHILD HAS THE POTENTIAL TO LEARN AND SUCCEED

As a parent of a child with dyslexia, Flora recalls the turning point at which she discovered her child's strong passion and aptitude for art. Together with his school, she supported his artistic pursuits as he went on to achieve numerous accolades and awards in recognition of his talent. Click [here](#) to read her story and how she helped him flourish.

### HELPING STUDENTS WITH SPECIAL NEEDS IN MAINSTREAM SCHOOLS

Mr Mohammad Azhari Bin Basiran, an Allied Educator (Learning and Behaviour Support) at Rosyth School shares his experience and perspective on supporting students with SEN in mainstream schools. Click [here](#) to read about his experience.

### NAVIGATING THE CAREGIVING JOURNEY

Glen, a parent of a child with autism, shares the challenges he and his family faced in understanding and supporting his child's needs. Despite the struggles in his caregiving journey, he remains positive and dedicated to her learning and growth. Click [here](#) to read about his experience and the hopes he has for his child.



Find out more about how to support your child through the transition from preschool to primary school [here](#).

Other things to consider include:

- The distance of the school from home; and
- Your child's interests and the co-curricular activities in the school.

You can contact the school directly after

your child is enrolled in the school to discuss the plan to introduce your child to the school's environment, programmes, and relevant school personnel, if necessary.

### Application Process

The MOE Primary 1 (P1) registration exercise typically takes place from July to August annually. Parents will be notified of the registration outcome through SMS on the results announcement day. Learn more about P1 registration [here](#).



### What You Can Do

You may wish to consider these recommendations when choosing a school:

- Prepare your child for transition to school-aged provisions and consult your child's doctor and/or EI professionals, his/her current preschool, and potential receiving schools. Talk to these key personnel to find out about your child's needs and required support.
- Find out more about the schools' culture and programmes. Consider where your child's needs and preferences will be best **matched and supported**.
- Let your child be involved in this exploratory process. Attend schools' open houses with your child or visit schools' websites and speak to staff members to find out more. If possible, arrange for your child to visit the school that you have in mind to see if he/she is comfortable with the environment. If your child likes the new school, the school visit will encourage your child and give them something to look forward to.
- If possible, attend open houses with your spouse or visit the school's website and speak to a staff member to find out more.
- You may refer to MOE's guide on "[How to choose a primary school](#)" and "[Which school for my child? A Parent's Guide for Children with Special Educational Needs](#)" to identify a school that best supports your child with SEN.
- If you are considering sending your child to a Special Education (SPED) school, you may refer to MOE's guide "[Special Education for Exceptional Lives: An Information Guide to Special Education Schools in Singapore](#)" and [MOE website on SPED schools](#) to find out more.

## SPECIAL EDUCATION SCHOOLS

**If your child requires a higher level of educational support, he/she might benefit from a customised curriculum and additional support in developing his/her foundational literacy and numeracy skill, as well as adaptive skills** (e.g. communication skills, skills to manage daily living demands, skills to socialise with others, and manage their emotions). All special education (SPED) schools provide

intensive and customised curriculum for children with moderate to severe Special Education Needs (SEN).

You may submit the SPED applications form with required documents to your first-choice SPED school. Like mainstream primary schools, the different application deadlines are the year before your child starts at SPED schools. A copy of the [SPED application form](#) and its accompanying [user guide](#), as well as the [SPED application dates](#), can be found at [MOE's website](#).





## What You Can Do

You may wish to consider these recommendations on the application process:

- You can indicate up to **three choices of special education schools** in the application form. The key considerations would be the assessment and recommendations for educational placement made by qualified professionals, the suitability of the school's programme for your child's needs, and home-school distance.
- Note that different schools may have different timelines for applying.
- Attach all required documents carefully. Applications can be processed only if **all** the required documents are submitted.
- You will receive the outcome for the application **within three to six months** from the date of submitting the application. You may also contact the SPED school you apply to for an update of your application status if you do not hear from them within a month of submitting the application.
- Register your child at the school **within two weeks** from the day you receive the offer letter.
- For more information on the application process, click [here](#).



## Further Reading and Information

- [Frequently Asked Questions](#)
- [SchoolFinder](#) | MOE
- [SEN Resources](#)
- For more information on support available in schools, you may refer to the [Enabling Guide](#).

## DEFERMENT

Deferment of your child's entry into the next stage of education (i.e after preschool/ [Early Intervention Programme for Infants & Children programme \(EIPIC\)](#)). **Deferment is only recommended under special circumstances** (when your child requires additional time to develop the skills needed to be ready for formal schooling) by a qualified health and/or early intervention (EI) professional. Each request for deferment will be carefully considered by MOE and must be supported by a qualified health professional. You may refer to MOE's [deferment application form](#) for more information.

*Once an assessment and recommendation is obtained from EIPIC, a medical memo from a medical professional is not required for the application.*

### What you need to know if your child has been recommended deferment

- In line with the Compulsory Education Act, any child deferred from the next stage of schooling would need to attend a preschool or EI centre throughout the deferment period (unless an exemption has been given by MOE for structured home-schooling).
- During the deferment period, it is recommended that your child receives targeted support and opportunities to prepare him/her with the necessary knowledge and skills for school.
- You should continue to monitor and review your child's progress and consult a professional to recommend appropriate educational placement before the end of the deferment year.





## Featured Stories

### ***FIND A SCHOOL FOR YOUR CHILD WITH SEN***

20% of all children with SEN attend one of the government-funded special educational schools. The Principal Educational Psychologist at MOE, Dr Chong Suet Ling, elaborates on the changes to special education curriculum and how to choose a special education school for your child. Click [here](#) to read Dr Chong's advice.

### ***CONNECTING HOME AND SCHOOL THROUGH INDIVIDUALISED EDUCATION PLAN WITH MY CHILD'S SPED SCHOOL EDUCATORS***

Click [here](#) to read about how you and your child's school can collaborate to develop a customised Individualised Education Plan to support your child's need at their school.

### ***YOU'RE NOT ALONE***

A mother with a teenage son, who has autism, shares the lessons she learnt from raising her special child. Click [here](#) to read her letter to fellow parents.



### ***JOURNEY TOGETHER: BUILDING FRIENDSHIPS - EDEN SCHOOL AND PRINCESS ELIZABETH PRIMARY SCHOOL***

Friendship is born out of having shared activities and common interests. For Jaylen Lai and Prapvina Bathmanathan, it was playing badminton that allowed their friendship to bloom. Click [here](#) to find out how Jaylen, a child with autism and student at Eden School, met Prapvina as part of the Play Inclusive programme at Princess Elizabeth Primary School.

### ***EDUCATING A CHILD WITH SPECIAL NEEDS***

A mother's love for her son with autism paved the way for a remarkable journey of education and self-discovery, including choosing a suitable school for him. Click [here](#) to read Brenda's story.



# WHAT YOU CAN DO TO FACILITATE YOUR CHILD'S TRANSITION

To ensure a smooth transition for your child from preschool/Early Intervention Programme for Infants & Children (EIPIC) to either a mainstream primary or a Special Education (SPED) school, you can work together with professionals, the school, and your child as he/she settles in and adapts to the changes.



## Emotional Check-In

### Transition is challenging for both you and your child

- Your hopes, dreams, and expectations from your child may need to be adjusted along the way as you observe his/her strengths and needs.
- As your child transits to the next school (which might or might not meet your desires), you may feel sad or anxious.
- Find ways to support yourself. It is especially important to take special care of your own emotional, mental, and physical health to ensure the best outcome for yourself, your child, and your family throughout this transition period.

#### Resources for developmental needs and disability specific support groups are listed below:

- [Enabling Guide — Support Groups](#)
- [Caring.SG resources](#) (for members only, sign-up is free)

#### Do also explore the various school/Social Service Agency (SSA)-based parent support groups.

- As you watch your child progress to the next school, remember to celebrate every little improvement your child makes along the journey. These moments of victory give you courage for the future.
- Involve significant adults in the family (e.g. grandparents) though the exploratory process whenever possible. The more they understand and support your decision and plans, the easier it will be to support your child to the next stage of his/her life as a cohesive family.



## PREPARE YOUR CHILD'S PROSPECTIVE SCHOOL

Your child needs all your support to prepare for and transition smoothly from one educational setting to the next. **You are the main pillar of support and point of contact for your children.** It is critical for you to connect with and provide information to your child's next school **before** your child enters the new environment.



### What You Can Do

- **Initiate contact** with your child's receiving school and arrange to meet the staff at the point of admission to discuss your child's needs.
- **Share information** such as reports (e.g. assessments by professionals, transition reports) and educational plans from your child's early intervention (EI) centre, preschool, or any materials and devices that your child uses with the receiving school. This information helps the receiving school gain a better understanding of your child and to plan and provide the necessary support for your child so that he/she can begin with a strong foundation and integrate into school smoothly.
  - a. If your child is enrolling into a mainstream primary school and he/she has needs that you would like your child's educator to know about, you can inform the school in advance (e.g. October the year before school entry).
  - b. If your child is enrolling into Special Education (SPED) schools, you should provide this key information about your child in the SPED School Application Form.
- **Communicate** with your child's school. The school will provide updates on your child. At the same time, parents are encouraged to share openly and communicate regularly with the school and teachers to support your child together. You may also connect your child's EI educators and/or preschool educators with the receiving school to discuss support plans.



## PREPARE YOUR CHILD

As this will be a new environment for your child, you should spend some time talking to your child to introduce the environment and explain some of the changes he/she may experience.



### What You Can Do

- **Build independence:** Most early intervention (EI) programmes will have a school readiness programme before the end of your child's K2 year. Private programmes are available, too. Check how you can help to reinforce these skills at home and in the community with your childcare educator, Learning Support Educator (LSEd), Allied Health Professional (AHP) or EI educator.
- **Build social and emotional readiness:** Discuss with your child's EI provider on his/her social and emotional development. You can start this discussion by asking the EI provider about strategies to support your child in communicating his/her needs and guarding against bullying. You can also have a discussion with teachers in the receiving school on buddy systems for your child to help ease into the new school life (e.g. some schools assign students in higher levels in the school to be buddies to students in lower levels).
- **Explain classroom expectations and school rules explicitly:** You can prepare your child to enter the new school by explaining some of the school rules, values, and expected behaviours in a school setting (e.g. how he/she needs to stay seated at his/her desk during lessons or how to follow his/her classmates to walk to the canteen to buy food during recess). Be ready to repeat these expectations to your child patiently.
- **Help to build a healthy work and rest routine:** Ensure your child has enough sleep. A healthy diet is also important to ensure your child is fit and ready to engage in a wide range of activities in school.
- **Monitor:** Observe and take note if there are any changes in your child's behavior, sleep patterns, appetite, etc. when they start at the new school. Some children may experience some of these changes as they adjust to the new school and observing your child can give you an idea of how he/she is coping with the transition.



For more tips on preparing your child for primary school, you may refer to MOE's resource kits to help parents prepare their children for primary school:

- Parent Kit: Transition from Preschool to Primary School
- Preparing Your Child For A New School: A Resource Kit for Parents of Children with Additional Needs
- Starting Your Primary 1 Journey

While preparing for this transition, you may wish to consider the following:

- Intervention and student care options when your child enters primary school, along with deciding between educational pathways.
- Continue to develop your child's strengths, interests, and hobbies.



### Reinforcing School Readiness at Home

Annette is a full-time caregiver to her three boys, all of whom have been diagnosed with autism. She shares about how to encourage good learning habits at home and the resources she uses to prepare her boys for primary school. Click [here](#) to watch the interview.



## PREPARE YOURSELF AND YOUR FAMILY

After speaking to your child and their prospective school, it is also important to prepare yourself and your family members for this transition.



### What You Can Do

- Give yourself and your child some time to adjust.** It takes at least three months for a child with developmental needs to settle into a new environment well. The adjustment period is similar for you and your family.
- Prepare for routines to change.** Your household routines and schedules may need to be adjusted as your child goes to a new school. Families who have managed these changes find that setting up a timetable to support the child and the family can be useful. Speak to your child to explain the changes and what they can expect.
- Build in buffer periods.** If your child seems anxious during this transition, you can support him/her by giving him/her extra time to adapt to the new school routine. E.g. you can take your child to school earlier in the morning to let him/her familiarise him/herself with the environment. Or, you can speak to your child to explain that feeling anxious about change is normal and assure him/her of your support as well as the school's support through each step of the journey. You may need to adjust your personal and work schedules in instances that your child needs more support either at school or at home. Speak to your spouse and/or other family members about how you might schedule time to spend with your child.
- Familiarise your child with school routines.** You can introduce a schedule of activities and basic rules that mirror the school environment. In addition, it will be helpful to teach and practise carrying out tasks that your child would carry out on his/her own in the next school (e.g. picking up and packing his/her belongings).





# SUPPORTING YOURSELF AND YOUR FAMILY





**T**he previous chapters focused on your child and his/her development, as well as how you can help support your child's progress and transition. In this chapter, we shift the focus to you—the primary caregiver.

Your role may seem both empowering and daunting as you strive to do your best for your child. **To be able to take care of your children and family, you will first need to take good care of yourself. Know that there is support available for you and reaching out for help is okay.**

This chapter provides some resources on how you can:

- *Equip yourself as a caregiver;*
- *Tap on support as a caregiver;*
- *Build a strong family support system; and*
- *Plan for the future.*



# HOW YOU CAN EQUIP YOURSELF AS A CAREGIVER

As you gain knowledge and skills, you will find yourself gaining confidence to better support your child and your family. Building relationships with other caregivers who understand what you are going through can also support you in your caregiving journey.

There are several things you can do to get started:



## **Check out available training courses and community events:**

- a. Caregivers Training Grant (AIC) provides an annual subsidy to let caregivers attend approved courses covering a variety of topics such as day-to-day care and psychosocial support to let you better care for your loved ones.
- b. Skills Future Singapore has a range of caregiving courses that will let you make use of your SkillsFuture credit to acquire new skills and enhance existing ones.
- c. Enabling guide has an event page that consolidates community events that are suitable for persons with disabilities and their caregivers.
- d. Caring SG's CAREconnect activities build on caregiving knowledge and skills, improve family bonding and strengthen families' connection with neighbourhoods and community partners.
- e. Parenting Support Providers deliver parenting-related training and support which you may find helpful.



## **Find a suitable caregiver support group or request for a buddy from CaringSG**

- a. Enabling Guide has compiled a list of support groups based on disability types that allow you to join a platform that will support you in your caregiving journey.
- b. CaringSG provides support and access to suitable parent support groups. You can also request for a buddy when you join as a member in CaringSG.
- c. Ask your early intervention (EI) centre/EI provider if they are able to offer support group services.



## **Visit the following websites to get useful resources**

- a. Enabling guide is a portal with organised resources and information for caregivers.
- b. Families For Life Parenting Resources provides parenting resources and describes available schemes that you can tap on.
- c. HealthHub contains resources, information, and recommendations on how to lead a healthy and active lifestyle.
- d. CaringSG member resource page provides links to a list of resources, interest-based activities, and inclusive community spaces to help you find activities to bond with your child and nurture your child's interests and talents.



# SUBSIDIES YOU CAN TAP ON AS A CAREGIVER

The associated costs of caregiving can add up over time. To help defray and manage the incurred costs, there are various schemes available for you and your family to tap on. More details of these schemes are listed below.

## AVAILABLE SUBSIDIES FOR GOVERNMENT-FUNDED EARLY INTERVENTION PROGRAMMES

Eligible families are automatically considered for means-tested subsidies for the [Early Intervention Programme for Infants & Children \(EIPIC\)](#), [Development Support-Plus \(DS-Plus\)](#) and [Development Support-Learning Support \(DS-LS\)](#) programmes, based on per capita household income. After subsidies, fees for children who are Singapore Citizens range from \$5 to \$430 per month. Contact your

early intervention (EI) service provider for more information on these subsidies.

EI service providers also extend additional financial support to families who may require more help. For example, you can request for a review of your subsidies if your family has multiple children requiring EI services or multiple dependants who require long-term care.

### How are subsidies determined?

Higher subsidies will be given through means-testing:

*For example, if you have a four-member family with a combined household income of \$8,000 (i.e. a per capita household income of \$2,000), EIPIC out-of-pocket cost after subsidies for your child would be \$130 per month.*



You may refer to SG Enable's website on the relevant EI programmes for further information about fees for the relevant programmes.

## OTHER EI PROGRAMME-RELATED SUBSIDIES

Beyond EI programme subsidies from the Government for funded programmes, caregivers could also tap on the following:

- The [VVO Transport Subsidy \(VWOTS\) Scheme](#) supports eligible Singapore Citizens and Permanent Residents with disabilities who need dedicated transport provided by the Social Service Agencies (SSAs) to access the EI centres, SPED schools, Day Activity Centres (DACs), Sheltered Workshops (SWs), and Special Student Care Centres (SSCCs).

- The [Assistive Technology Fund \(ATF\)](#) is also available to encourage the early adoption of Assistive Technology (AT), which could help with your child's learning and development.

- **AT consists of devices and software designed to empower a person in his/her everyday life by increasing his/her abilities to perform day-to-day functions.** Examples of AT include hearing aids, wheelchairs, communication boards, speech output software, and many more.



## FINANCIAL SUPPORT FOR CAREGIVERS

Financial support schemes and grants are available to help defray the costs of caregiving and day-to-day care.

### **Caregiving:**

- i. The Home Caregiving Grant (HCG) is a \$200 monthly cash payout to support your loved one with at least permanent moderate disability.
- ii. Caregivers Training Grant.
- iii. Foreign Domestic Worker (FDW) Levy Concession for Persons with Disabilities lets families pay the FDW levy at a concessionary rate.

 **Tax rebates:** Handicapped Child Relief is given to you to recognise your efforts in supporting your child.

 **ComCare:** Offers short, medium, and long-term support for your family.

For lower income families, KidSTART is available to enable children to have a good start in life. Check with your child's preschool for more information about how KidSTART may support you in your journey to help your child.

The Developmental Disabilities Registry (DDR) identity card aims to identify persons with developmental disabilities who are lost and receive the appropriate assistance. The card also offers a benefits scheme that provides cardholders with discounted rates for services and access to various facilities offered by participating companies.

For more information on the above finance assistance and support available for you, your child, and your family, please refer to the Enabling Guide.

Should your family require more holistic support above and beyond financial assistance, you may approach the Family Service Centre (FSC) nearest to you for more assistance. To locate your nearest FSC, visit the MSF Directory. You may also refer to SupportGoWhere which helps you to check which support schemes may be relevant for you.

## GETTING YOUR FAMILY INVOLVED

In the caregiving journey, the support of family members can go a long way to enable you to take better care for your child and yourself.

**As parents, you can establish routines to give structure to the day for your child, yourself, and your family and reduce unpredictability and stress.** Some useful resources on setting routines for your child and the family can be found here.

Just as every child is unique, so is each family—there will be a lot of trial-and-error in establishing what works best for your family.

**It takes time for family dynamics to evolve.** There may be times when you feel like giving up, but you can, with support, pick yourself up again. Use every experience to deepen your understanding of what works best for your child, yourself, and your family. Adjust and try again! **When you feel like giving up, take a break and ask for help.**



“  
The journey may be long,  
but it can be sunny if you  
let the sunshine in.  
”

**Dr Lim Hong Huay**

Paediatrician, Rophi Clinic &  
Board Chair, CaringSG



#### Common Misconception

✗ **My family cannot help in any way as they are not fully informed or educated about my child's developmental issues.**

✓ Although your family may not be educated about your child's needs, they can help in practical caregiving tasks. These include carrying out simple strategies such as those shared by your child's therapists.

✗ **My spouse does not care about our child because my spouse does not help our child as much as I do.**

✓ Your spouse may be experiencing confusion or depression while coming to terms with your child's needs. Your spouse may feel helpless and think that you are more competent to help your child. Give your spouse time to accept the situation and seek further help from counsellors if needed. Keep doing the small things that give you joy as a couple and family. Complement your spouse in his/her interactions and bonding time with your child to help him/her feel confident to do more.



**Strengthening teamwork with your spouse.** You may or may not have a spouse who is involved in caring for your child. If you have a spouse who is involved, your spouse may have his/her own beliefs, expectations, dreams, hopes, and parenting style. Both of you may also have different strengths and challenges, coping mechanisms, communication style, and problem-solving approaches. Most significantly, your spouse will have his/her own journey of making sense of your child's needs, which may or may not be similar to yours. Here are some steps you can take to work out your differences as parents.

- Seek first to understand:
  - Where there are commonalities, you can align yourselves for strength and courage.

- Where there are differences, you can accept and respect your differences, even if it is difficult.
- Where there are challenges, you can help each other and be patient with each other.
- You may agree to disagree on some points. However, you can still jointly work out and arrive at a consensus on your roles and responsibilities to care for your child.
- Do continue to meet your spouse's emotional needs as it will build your spouse's confidence and help strengthen your partnership.

**Enlisting the help of family members.** In Singaporean families, extended family members such as grandparents, uncles, and aunts play a big role in family dynamics. These influences



can be positive or negative. Like your spouse, family members often have their own sets of beliefs about your child with developmental needs (DN).

- If you consider them to be positive influences or sources of support, enlist their help early. The level and types of support (financial, practical, or emotional) would depend on the extended family members' ability and your comfort level with regards to receiving help.
- However, if the influence is negative, unhelpful, and you find that it wears you down emotionally, you can draw healthy boundaries. You can keep conversations about your child to a minimum for the sake of yourself, your child, and your family.
- Family members may mean well, but they may not experience what you

experience first-hand. Thus, their understanding may be limited. You may need to inform, explain, and educate members in your extended family so that they understand better.

 **Supporting siblings and helping them understand.** Your child with DN may have typically developing siblings (older or younger) with his/her own needs. Sometimes, the siblings of a child with DN may grieve the loss of dreams and hopes for a normal family life and normal siblings. Some siblings may feel less loved and neglected, or they may feel jealous and resentful. Others feel sorry for their sibling with DN and may try to be a good child as they observe how stressed you are in caring for him/her. When you have some time in the midst of taking care of your child with DN, you can do the following:



- Create one-on-one time with each child even in routine activities like walking a child to school or bringing one child with you to the supermarket.
- Explain your circumstances to your child's siblings and why you may sometimes not have the time to spend with them.
- Reassure them of your love for them and encourage them to come and talk to you whenever they feel bad.
- For siblings who are willing and able to help care for your child with DN, allow them to participate and help out by giving them tasks that are feasible and appropriate for their age.
- Encourage siblings to join sibling support groups so that they may find company in others with the same experiences. The [Enabling Guide](#) has a list of informal support groups which siblings can join to share their feelings and experience with a community of fellow caregivers.
- Explain why there may be different expectations and ground rules within the family.
- Understand and accept that there will be normal sibling rivalry and usual kids' squabbles. This is part-and-parcel of growing up amongst siblings.

For more information on how to support your typically developing child, click [here](#).

**Sustaining your family life.** A child with DN may tend to overwhelm family life. There will be several adjustments and even permanent changes to family routines and practices.

- As far as possible, build regular and sustainable family routines that meet the needs of your child with DN.
- With creative planning, family activities can be fun and inclusive.

**Building your ecosystem of support.**

It takes a village to raise a child, especially one with DN. No caregiver should stand alone. Gather the support around you, your child, and your family as early as possible.

- You may join [caregiver support groups](#) to get emotional support and practical tips and strategies from caregivers who are going through the same things.

For more parenting-related resources, click [here](#).

Sometimes things may not go as planned and you may need to reach out for more support. Counselling is one way you can speak to someone about what you are going through, and it is also an avenue to help strengthen family bonds.

- Many couples find marriage counselling helpful in overcoming marital and family conflict as well as improving communication with each other.
- Family counselling can help to:
  - Facilitate the resolution of conflicts that families have found difficult to manage effectively on their own.
  - Cope with the impact of divorce or separation.



- Cope with serious illness or challenges.
- Allow a family to understand, assist, and support someone with a psychological health issue.

If you need someone to talk to, you may refer to a list of caregiver counselling services available in the [Enabling Guide](#).

If you or your family members are struggling with serious mental health issues, such as depression or anxiety, please seek assistance from a psychologist or psychiatrist at a polyclinic or hospital.



### What You Can Do

#### Handling People's Reactions

People will react and respond differently to your child's needs. Some people may be very open and supportive while some may respond negatively. If you prepare for all sorts of reactions, you will be able to respond the way you want to.

When someone makes a helpful or positive comment, it is good to respond in a way that opens up the conversation. However, if someone makes an unhelpful or even hurtful comment, even if they do not mean to, it is normal to feel upset. There is no right way to respond. Here are some strategies on how to handle these comments:

-  Pick your battles
-  Use the opportunity to educate
-  Use a standard response
-  Choose not to respond
-  Take a moment before responding
-  Talk to someone supportive

For more information about these strategies, visit the [Families For Life Parenting Resources](#).

#### Getting Your Family Involved

-  Family is an essential part of caregiving. It may be helpful to clarify the expectations of family members and their roles in supporting your child.
-  Should there be tensions within the family or if you feel very overwhelmed, you can consider discussing your concerns with a professional. A psychologist, counsellor, or social worker can help you gain a better understanding of your feelings and actions, provide a different perspective on your situation, and work with you to support you through the journey.



# HOW YOU CAN TAKE CARE OF YOURSELF

## **Know, accept, and care for yourself.**

As a caregiver, you may find it difficult to find time to take a break. However, it is crucial that you do, as looking after your own emotional, psychological, and physical wellbeing is important to keep you going in the long-run for both yourself and your child. **Care for yourself even as you give love and energy to your child. Do**

**remember that you have needs as well. Caring for yourself is not selfish. If you are unconvinced, remember that you can care better for your child if you are in a good state yourself.** It is important to set aside time to recharge your physical, mental, and emotional battery. Some self-care recommendations can be found below:

- 🌟 Care for your health by getting enough rest, regular meals, and exercise.
- 🌟 Make sure you have leisure time and do things you enjoy. As a parent to a child with developmental needs (DN), you will likely spend much energy and time caring for your child and making sure he/she has the best support and opportunities. It is crucial to find ways to recharge, relax, and experience joy throughout the day. If you do not have much time, you can engage in shorter activities.
- 🌟 Stay connected with your friends and join a support group.
- 🌟 Set aside time and space to reflect every now and then. Self-reflection can help you slow down and be present, even if only for 5 to 10 minutes a day.
- 🌟 Recognise that as a parent of a child with DN, you will make decisions and mistakes but you will learn along the way.
- 🌟 Managing stressful times:
  - Understand your own triggers and be mindful of your personal beliefs, expectations, needs, and sources of support and stress. Make necessary adjustments and adopt realistic expectations of yourself.
  - Ask for professional help with your emotions, especially if you are not able to cope or feel burnout.
  - Designate a private place in your home or elsewhere as your own “emotional recharge” corner.
  - When you feel down, it is ok to rest, refresh, and then get up and try again when you are ready.

Source: [Self-Care Tips, Agency for Integrated Care \(aic.sg\)](#), 2020.



## Emotional Check-In

At some point of your caregiving journey, you may feel confused about the amount of information people are giving you. You may not be sure about what to do next. Should you start feeling stressed or find yourself experiencing burnout, talk to someone or

get connected with caregivers and professionals who are able to support and journey with you. Take good care of yourself as far as possible. This period can be daunting and confusing and having the right support can play a big part in your well-being.



# PLANNING FOR A SUSTAINABLE LIFELONG JOURNEY

**Your child will go through various milestones such as transition to schooling years and employment.** Some children require longer term support and care beyond the milestone of completing their formal education. **For these children, it is also important to think about concurrently putting in place other key building blocks for their future.** This includes the following:

## Financial Planning

- Embark on planning your family finances as early as possible if you think your child will need longer term care. Consider putting measures in place to ensure that your child continues to receive financial provisions and insurance. Also find out more about the tax reliefs you are eligible for. It would be helpful to understand and tap on the financial schemes available for you and your child.

- For longer term financial planning, consider your child's care plan and the lifestyle you would like to continue to sustain in the years to come.
- You may wish to seek professional advice and recommendations from [Special Needs Trust Co.](#) to find out which options are most suitable for you and your child.
- You may also wish to explore the free programmes offered by the [Institute for Financial Literacy](#) to learn more about financial planning and money management.

## Long-term caregiving for your child

- Consider planning on how to make decisions for your child after he/she turns 21. You may refer to this page on [deputyship](#) for more information.
- Explore writing a will and [Lasting Power of Attorney \(LPA\)](#) to ensure that your child is taken care of in the long term.



## What You Can Do

-  Consult your financial advisor to find out more and apply for relevant insurance policies for you and your child.
-  Consult with lawyers familiar with legal care planning to find out more about writing a will with special provisions for your child and what to plan for, e.g. LPA and deputyship.



## Further Reading and Information

-  The [Enabling Guide](#) lays out the **key milestones** your child will go through and the various considerations at each milestone, including schooling options.
-  [SG Enable's Navigation Map](#) helps direct you to the parties who will be able to assist and support you, based on your area of need (for a set of common scenarios that caregivers may encounter).
-  [CareShield Life](#) is a long-term care insurance which provides financial protection against long-term care costs of Singaporeans in the event of severe disability.
-  The [Enabling Guide](#) lists financial assistance and support available for you to plan for the future.



## EXAMPLES OF DEVELOPMENTAL ISSUES

### 1. Speech and Language Delay

Speech and language delay in preschoolers refers to difficulties in the acquisition and use of the spoken language. The difficulties have to be apparent in the child's first language; if these difficulties are seen in a language the child is not familiar with, it could simply be due to a lack of exposure to the language. Speech and language delay might involve any one or a combination of the following:

- Difficulties understanding language is manifested as difficulties following instructions or problems comprehending questions.
- Difficulties using language shows up as difficulties expressing oneself due to a limited vocabulary to share ideas or to answer questions.
- Speech delays could be due to pronunciation difficulties, resulting in unclear speech and difficulties being understood, or a lack of fluency in speech (e.g. stuttering).

#### More resources can be found below:

- [\*HealthHub: When do toddlers start talking\*](#)
- [\*NUH: Speech and Language Difficulties\*](#)
- [\*NUH: Speech Sound \(Articulation\) Disorders\*](#)
- [\*NUH: Stuttering\*](#)

### 2. Global Developmental Delay

Global Developmental Delay (GDD) is diagnosed when a child, typically under the age of five years, fails to meet expected developmental milestones in two or more developmental domains. The delays should be persistent (at least for six months) and significant. The developmental domains include: social /personal skills, gross and fine motor skills, speech/language, cognition, and activities of daily living. Environmental factors which may change over time and intervention may also influence the developmental trajectory and later outcomes. A GDD diagnosis is typically reviewed and reassessed by a medical professional when a child approaches the school-going age.

#### More resource(s) can be found below:

- [\*Enabling Guide: Developmental Delays\*](#)

### 3. Autism

Autism is a spectrum condition, which means that the effects of autism and level of difficulties vary from individual to individual. Autism affects brain development, impacts how children communicate with and relate to others, and how they experience the world around them. The core features of autism are:

- Persistent difficulties in reciprocal social communication and social interaction; and
- Restricted, repetitive patterns of behaviour, interests, or activities.

Features of autism can be observed in infancy and toddlerhood, but for some children, these features only become obvious when they are older.

#### More resources can be found below:

- [\*ARC: What is Autism?\*](#)
- [\*HealthHub: Autism Spectrum Disorder\*](#)
- [\*NUH: Autism Spectrum Disorder\*](#)

### 4. Learning Difficulties

Learning difficulties refer to delays in academic skills such as reading and writing. Children may have learning difficulties if the delays persist despite adequate developmental skills and intellectual ability, adequate teaching, and reasonable effort from the child.

#### More resources can be found below:

- [\*DAS: Dyslexia\*](#)
- [\*NUH: Reading Difficulty\*](#)

### 5. Sensory Impairment

The two main types of sensory impairment are visual impairment and hearing loss. Children with such sensory impairment have either partial or complete loss of sight or hearing. Issues with vision and hearing are typically detected during nationally recommended developmental screenings at polyclinics, General Practitioners (GPs), or paediatricians and thereafter addressed.

#### More resources can be found below:

- [\*Enabling Guide: Sensory Disability\*](#)
- [\*SAVH: What is Low Vision\*](#)
- [\*SADeaf: About Deafness\*](#)



## 6. Cerebral Palsy

Cerebral palsy refers to a group of disorders that affects physical movement and posture. It is caused by illness or injury to the brain before or during birth, or early in life. Cerebral palsy may be accompanied by challenges in sensation, perception, cognition, communication, and behaviour, as well as by seizures, bladder and bowel problems, and by secondary muscle or skeletal problems.

### More resources can be found below:

- [\*CPAS: Understanding Cerebral Palsy\*](#)

## 7. Difficulties with Motor Skills

Children may experience difficulties with gross motor skills, fine motor skills, or both. Gross motor skills are needed for activities such as running, jumping, cycling, and swimming. Fine motor skills are needed for activities such as writing, drawing, using a scissors, and fastening buttons and shoelaces. Some children might also seem clumsy and have difficulties with motor coordination.

### More resources can be found below:

- [\*NUH: Handwriting Difficulty\*](#)
- [\*Health Exchange: Coordination & Balance\*](#)

## 8. Down Syndrome

Down Syndrome is a genetic condition that is related to various degrees of intellectual impairment and physical and developmental issues. Individuals with Down Syndrome have an extra chromosome and characteristic physical and facial features. Some individuals with Down Syndrome may also have health issues like heart problems and vision impairment or hearing loss. Tests for Down Syndrome can be done during pregnancy.

### More resources can be found below:

- [\*DSAS: About Down Syndrome\*](#)

## 9. Emotional Problems

Emotional problems may look like irritability (being upset or frustrated easily), tearfulness, anxiety, or lack of interest in play activities to the extent that they affect your child's daily life. It may be difficult to differentiate normal emotions (e.g. common fears) from significant emotional problems, such as persistent difficulties separating from caregivers and fear of going to school (for various reasons) over a prolonged period of time.

### More resources can be found below:

- [\*NUH: Managing Anxiety in Children\*](#)

## 10. Disruptive Behaviours

Disruptive behaviours are primarily behaviours that are expressed outwardly and/or towards others. These can include hyperactivity, impulsive behaviour, tantrums, defiance, and non-compliance towards authority figures such as educators and parents, as well as aggressive behaviour towards peers and adults.

### More resources can be found below:

- [\*IMH: What are disruptive behaviours\*](#)

## 11. Intellectual Disability

Intellectual disability refers to limitations of cognitive functioning and adaptive functioning (which includes the ability to carry out everyday activities such as self-care, avoiding danger, communication, and interacting with others). Intellectual disability is often identified in individuals with other diagnoses such as autism, cerebral palsy, and Down Syndrome. The levels of ability, needs, and the support required to function in everyday life are dependent on the degree of intellectual disability. Intellectual disability is assessed in older children when IQ testing can be conducted.

### More resources can be found below:

- [\*NUH: Intellectual Disability\*](#)

## 12. Attention-Deficit/Hyperactivity Issues

Attention-deficit/hyperactivity issues are a neurodevelopmental condition, characterised by symptoms of inattention, hyperactivity, and impulsivity. It may sometimes be apparent during the preschool years, especially if the child is hyperactive. They often become more obvious during schooling years. There are different types of issues:

- *Primarily inattentive issues include distractibility and an inability to focus on things that are not of particular interest to the child for an expected period of time.*
- *Primary hyperactivity-impulsivity issues include being hyperactive i.e. constantly moving around, being impulsive by rushing through things, or having difficulty waiting.*
- *Combined presentation includes both inattention and hyperactivity-impulsivity.*

### More resources can be found below:

- [\*HealthHub: Attention Deficit Hyperactivity Disorder\*](#)
- [\*Spark \(ADHD\)\*](#)
- [\*NUH: Attention Deficit Hyperactivity Disorder\*](#)



## CHAPTER 4 ANNEX

For more videos and stories on the caregiving journey, you may refer to the [Enabling Guide](#).

### Signs of Burnout

You may be experiencing burnout if you experience one or more of these signs:

- Anxiety, depression, irritability, and impatience
- Constantly feeling exhausted
- Neglecting your responsibilities and needs
- Falling sick more often
- Loss of interest in activities you once enjoyed
- Changes in sleep patterns
- Changes in appetite and/or weight
- Feeling overwhelmed, helpless, or hopeless
- Withdrawal from friends, family, and other loved ones
- Feel like your life revolves around caregiving
- Constantly worrying even when help is available
- Wishing to hurt yourself or the person you are caring for

### Respite Care

Take time away from caregiving – even if for a short period.

1. You may also consider a live-in caregiver. The [Foreign Domestic Worker Levy Concession \(FDWLC\)](#) and [Home Caregiving Grant \(HCG\)](#) are financial schemes available to support you
2. [The Caregivers Pod](#) at the Enabling Village is available to provide caregivers a multi-functional space to enjoy rest while their care recipients are engaged in activities
3. Respite care options such as professional home-care services offered by the [Handicaps Welfare Association](#) are available





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