

Practices of doing difference in relation to families

Reflections on the collaboration of early education and early intervention

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1 Introduction

The current discourses on early education in individual countries are interwoven with international agendas and in this context influenced by two overarching trends. On the one hand, the increased output orientation and standardisation in education in line with the OECD's Large-Scale Assessment Studies is intensively debated (Pereyra et al. 2011). On the other hand, a growing relevance of high-quality education oriented towards equity and inclusion can be observed in the discourses, referring to the 2030 Agenda (United Nations 2015, 2017). Both trends coincide with higher degrees of enrollment in institutional (all-day) types of early education. These international impulses are each discursively processed at national level in specific ways and change meanings in relation to the varying traditions and regulative frames. In the case of Germany, both impulses come up against a field in early education that is still structurally characterised by an overarching insufficient availability of childcare, especially for young children up to the age of three, as well as a clear shortage of qualified staff in the field of early education (Fachkräftebarometer 2021; Baader et al. 2019). The coverage rate of care and education for young children in Germany has been rather low in international comparison for a long time, with types of half-day care dominating, and is still inconsistent in many regions. Critically discussed in that context are first of all the inequality-reinforcing effectiveness of habitus-related practices of families when enrolling their children and of kindergartens when allocating the (often rare) places for young children (Hogrebe et al. 2021). At the same time the staff's field of work in kindergartens have become much more complex and multi-layered in the last decade, e.g., in terms of documentation of children's development and interprofessional collaboration (Kuhn 2013: 17; Cloos 2017).

Overall, in Germany the increasing institutionalisation of (early) childhood is intensively discussed and often described as the central challenge for early education

(Tervooren 2021) while inclusion-related quality requirements for early education are hardly taken up in that frame (Seitz et al. 2012; Seitz et al. 2021). Similarly, indicated changes for the system of early intervention, which was established to support families and children in case of developmental problems or a diagnosed “disability” of young children are rarely discussed, even though early intervention has predominantly worked in the home of families and outreach with children and their parents (Sohns 2010). The increasing early enrollment of young children in (inclusive) kindergartens, thus, obviously affects the structure and practice of early intervention— for the relationship between professionals and families as well as for the collaboration and networking with early education institutions like kindergarten (Seitz 2012; Seitz/Hamacher 2021). In summary, relations between kindergartens and families on the one hand and early intervention centres and families on the other hand, are deeply influenced by the fact that more children enter kindergarten earlier in their lifetime. Inversely, the described developments are accompanied by far-reaching consequences for the positioning of families in policies and in the educational practice.

In the following, we will take up the related research desideratum by looking at specific processes of attributing (special) needs to young children under the condition of collaboration of (inclusive) kindergartens and early intervention centres and discussing them in the light of the relationship between early education and families. For this purpose, we first summarise the state of the art of research on the role of families in relation to kindergartens as well as in relation to early intervention from the perspective of educational (in)equity and inclusion in order to make our analyses more understandable by means of empirical examples. In the conclusion, this is made clear with regard to the production of inequality-relevant difference.

2 Families and children’s enrollment in early education and early intervention

Early education in Germany is deeply shaped by federalism. Regulations and laws are decentralised which leads to considerably varying frame conditions and a heterogeneous implementation of the required education partnership between kindergartens and families in the different regions (Knör 2022). In contrast to many other countries, early education in Germany is part of the child and youth welfare services and not of the school system. For this reason, the relationship between families and kindergartens is discussed here in a specific way and has been the subject of various debates during the last decades (Friedrich 2011).

In the political debates at the international level, the enrollment of young children in kindergartens is predominantly associated with the reconciliation of parents’ employment as well as with the promotion of children considered “disadvan-

taged” and their targeted support, which brings up high requirements on the professionalism of educators (Garvis et al. 2021). Policy discourse often emphasizes that children from families with a low socioeconomic status benefit in particular ways from high-quality early education (Siraj-Blatchford et al. 2002). In Germany, the increasing early enrollment of young children is also associated with changed family situations in terms of dual-income. In addition, there is a noticeable number of references to the disappointing results of the large-scale-assessment studies (PISA) and the related idea of early and effective acquisition of competencies in the frame of institutional education (critically: Seitz/Finnern 2015). In particular, supporting children from families with assumed family-related problems is often highlighted (Knör 2022; Seitz et al. 2012), and an expanded access to families is legitimised, among other things, by the regularly proven strong correlations between social situatedness and children’s educational success in the German education system (Dittton 2013). In consequence, and according to the educational programmatic imperatives about “education from the very beginning”, policy debates often address kindergartens for being responsible for the early reduction of social and educational inequalities (critically: Krönig 2018). In this context, the recent development of transforming kindergartens to family centres is closely associated with the early identification and reachability of “at-risk families” in a targeted manner (Knör 2022). Under the claim of being open to families in the social and cultural environment, those family centres include support services for children as well as counselling and educational services for families (Engelhardt 2016: 10; Diller 2010: 144). In this way, normative demands in the context of early education are linked with compensatory offers in the sense of social pedagogical paradigms and the whole families are focused on as pedagogical addressees in early education (Geib et al. 2020).

The early intervention system which can be seen as a parallel system is rarely brought into focus in this context, despite the fact that the majority of children that benefit of early intervention live in economic poverty and get diagnosed in a rather diffuse way as “at risk of disability” (Weiß 2010). Since most of the very young children remained in the families until the age of three or four, when the early intervention system had been implemented in the 1970s, early intervention was dominated until 2013 by types of outpatient offers for young children aged zero to six, indicated by pediatricians and taking place either in the families’ homes or in early intervention centers. The system was conceived as an interdisciplinary field aimed at compensation and inclusion (integration, to use the old term). At the regulatory level, both interventions for the medical rehabilitation of a diagnosed child and related services are thus grouped under the heading of early intervention, which provides an interdisciplinary coordinated system of medical, medical-therapeutic, psychological and special educational services (such as diagnosis, early identification, therapy, support, parental counselling and networking). Early intervention has therefore long been seen as a bridge between families with very young children who are con-

sidered to have special needs and regular or special types of kindergartens, although in Germany, in contrast to other European countries, early intervention services end when children enter school (Wohlfart 2021; Drabble 2013; Carpenter et al. 2009).

In the discourse on early education in kindergartens, influenced by inclusive early education research, a right-based approach is widely accepted, concretised in concepts that build on participation seen as a social practice (Prengel 2014; Seitz et al. 2021). In contrast, the scientific discourse around early intervention is recognizably shaped by the mandate to provide individualized support and training to young children who are considered at risk of disability (SGB IX), in order to ensure their future participation and to generate the acceptance of a “disabled” child in its “specificity” in the family (Blackburn 2019). The direct involvement of families and caregivers in the support process is therefore often mentioned as a unique feature of early intervention compared to kindergarten (Weiß 2019: 24). While this was initially dominated by the notion of parents as co-therapists who are coached by early intervention staff on how to teach their child to develop and learn according to norms, this has shifted over the last two decades or so to a view of families as experts on their child and partners with professionals (Odom/Wolery 2001) – but often still associated with a shared focus on children’s school readiness. In that early intervention discourse, the early enrolment of young children in kindergarten is partly addressed as a risk, in the sense that the importance of the family orientation postulate is diminished (Sarimski 2013). This suggests that the relationship to the family in early intervention has long been substantially different from how it has been conceived in early education. Taken together, it can be said that the positioning of families in the early intervention discourse is significantly different from that in the early education discourse, which has implications for the following findings and reflections on the collaboration of both systems.

3 Inclusive education, early education and early intervention

In addition to the quantitative expansion of childcare for young children, a specific challenge of the elementary sector is the current quality of inclusive early education (Seitz et al. 2012; Seitz et al. 2021). Framework conditions for inclusive education in kindergartens in Germany (above all group size and childcare ratios) differ considerably between regions in Germany (Autorengruppe Bildungsbericht 2020). Another characteristic is a significant increase in the number of children whose development is assessed as potentially at risk and who receive early intervention support (ibid.: 88; Bollig 2013).

This is accompanied by the aforementioned structural changes along the interface of two pedagogical fields – early education and early intervention. Since 2010, services of early intervention can be used in kindergartens and thus shift more

strongly into early education facilities (framework agreement North Rhine-Westphalia (NRW), § 131 SGB IX). This is initially a clear impulse for change in the early intervention system, which until then, as an interdisciplinary service, focused on the family and was primarily active in outreach work, especially with young children who were mostly not yet enrolled in institutional care and education (Sohns 2010). The resulting high barriers of bringing early intervention by specialized institutions to young children and their families has long been under (self-)critical discussion in the field of early intervention (Richter-Kornweitz/Weiß 2014). An early entry of young children into institutional care thus challenges the early intervention system on the one hand to self-assure with regard to the claim of interdisciplinarity and addressing families across the entire social spectrum, and on the other hand to conceptually coordinate its own educational framework with kindergartens (Hamacher 2020). This also implies new collaboration requirements with early intervention for the kindergarten institution, as well as for reflection and readjustment of the cooperation with families (Geib et al. 2020; Hamacher 2020). However, research findings indicate that early intervention in kindergartens is still often characterized by separative and individual therapeutic measures (Wölfl et al. 2017: 36 f.) and that feedback from early intervention specialists to everyday kindergarten life is rare (Seelhorst et al. 2012; Seitz/Korff 2008; Seitz/Hamacher 2019). In addition, inclusion research shows that models for implementing child-centered support in everyday kindergarten life and avoiding the exclusion of individual children prove to be a crucial hinge (Feuser 1984; Seitz/Korff 2008: 28; Seitz et al. 2021), as this influences children's perception of diversity and their social behavior (Joyce-Finnern 2017).

Overall, it can be stated that the embedding of inclusion-related professional action in multi-professional organizational cultures as well as the subject-related knowledge discourses, which still diverge considerably between kindergarten and early education centres (Hamacher 2020), are not yet related to the postulate of close cooperation between different professions and organizations within the framework of inclusive early education (Sulzer/Wagner 2011).

As we show in more detail in our study on cooperation between early education and early intervention (Seitz/Hamacher 2022) in North Rhine-Westphalia, cooperative practices in inclusive early education do not necessarily lead to a fruitful combination of different perspectives and thus "automatically" to an increase in the quality of inclusive education (Hamacher 2020). One of the reasons for this is that the missions of early intervention and early education cannot easily be brought together without contradictions, and that this has consequences for participation and inclusion, but above all for the (re)production of inequity in practices of collaboration. This is exemplified by the fact that in the organisational knowledge discourses of kindergartens and Early Intervention Centres, different understandings of participation are used, which, in summary, are more clearly associated with co-determination and agency of children in kindergartens, while in Early Intervention Cen-

tres this is more strongly associated with future-oriented social participation and is thereby thought of in presuppositional terms (Seitz/Hamacher 2022).

In view of the structural fact that the granting of early intervention, and thus the attribution of an individual need for support, is dependent on the consent of the parents, it becomes apparent here that the cooperation between kindergarten, early intervention and the family is fraught with conflict. This is because, as a result of the early entry of children, and at the same time the increasing task of documenting children's development, the responsibility of educational professionals with regard to the assessment of children's development increases and requires communication with families. In addition, the cooperation of kindergartens with families now comes into communication with the structures and practices of cooperation with families on the part of early intervention. Specifically, educators often find themselves in the situation of convincing families of young children to enter into a diagnostic process, which, according to the law, must result in a documented diagnosis of "impending disability" (SGB IX; Section 46) in order to be able to apply for early intervention (Hamacher 2020) and to coordinate the necessary support with early intervention centers and specialists.

It has been shown that in case-related cooperation between early childhood education and early intervention, it is primarily inequality-relevant constructions of difference that are used with regard to the children's family circumstances as soon as there is a structural dependency on the creation of a "risk" (Hamacher 2020). Due to the high developmental differences, especially in young children, fragile diagnoses of developmental deficits are used, which are often linked to hegemonic notions of normality (Seitz/Hamacher 2021; see also: McLaughlin et al. 2016: 14), but then lead to pathologization.

Overall, the concept of "educational partnership" has long been an elementary component of both early education (Fröhlich-Gildhoff 2013) and early intervention (Sohns 2010), but when it comes to inclusion-oriented cooperation between early education and early intervention in the sense of interprofessional networking, it is clear that many practice-relevant issues and embedded ambivalences and practice-relevant questions remain largely unresolved.

4 Positioning of families in early education and early intervention

The dual structure of the tasks of enabling parents to work and acting as a compensator when family education is deemed "inadequate" runs through the historical development of daycare centers (Thon et al. 2018). The focus has always been on targeting children in so-called "disadvantaged" living conditions – combined with the aim of reducing inequality through early education. Compensatory functions of early education were therefore at the center of controversial discussions, especially in the

1990s, and are still brought into the debate today with reference to the above-mentioned output orientation (see also critically: Seitz/Hamacher 2021). Among other things, the criticism refers to the deficit view that is directed at families (Betz et al. 2019) and can thus be distinguished from notions of normality. This is because compensation is often justified in contrast to what is defined as a “good” family and developmental environment for children, from which a deficit is assumed (Zehbe/Cloos 2021; Joos et al. 2018; Knör 2022). Regardless of this, approaches to compensatory education via preventive instruments, which were thought to have been overcome, are flourishing again in the context of the empirical findings on a particularly close link between socio-economic status and educational success in the German education system (Ditton 2013).

Preventive and early measures with regard to educational and developmental trajectories initially appear to be a compellingly logical strategy (critically: Seitz/Hamacher 2019). However, the offers and reactions based on this are often activated in particular in relation to families that are seen as being at risk for an “optimal” development of a child. Characteristics such as a low level of education of parents, a low socioeconomic status or unplanned parenthood are often identified as risk factors (critically: Bollig 2013; Hamacher 2020). The construct of a childhood at risk that has been created in this way is contrasted with the concept of a “normal” childhood. A large number of studies point out that certain life situations, such as economic poverty for children, are definitely associated with concrete negative consequences (Groos/Jehles 2015; Andresen/Hurrelmann 2007). Therefore, such dynamics do not seem surprising at first glance, but children are often assigned a child-related (special educational) need for support even before they start school due to an ascriptively attributed risk, which as a negative labelling is momentous for their later educational career (Seitz/Finnern 2015; Grüter/Kottmann 2018).

As mentioned above, in the field of early intervention parents and caregivers are explicitly called upon to contribute to the promotion of their children (Sohns 2010) and concrete support services not only refer to the child and its development, but are also directed towards counselling parents on parent-child interaction. The family is thus identified as an essential resource for child development. Parental concerns are therefore of high importance in the context of early intervention (Lütolf et al. 2019: 28 f.; Klein 2019). Taking together the considerations made so far, it becomes apparent that the activation of cooperative relationships between early education and early intervention centres and the relocation of early intervention practice to kindergartens is highly significant for the cooperation with families and their positioning. This is taken up further in the following and discussed with research findings from a completed study.

5 The positioning of families in collaboration of early education and early intervention

The substantive aim of our study “Collaboration of Early Education and Early Intervention” (2016–2019), the results of which we refer to, was to gain closer knowledge about how collaboration of Early Education and Early Intervention can contribute to strengthening children’s participation when they are explicitly asked to collaborate (in more detail Seitz/Hamacher 2019; Hamacher 2020; Hamacher/Seitz 2020; Seitz/Hamacher 2022). In the present contribution we focus on selected findings regarding the positioning of families within the collaboration.

5.1 Research design

To address the research question, the regulatory, conceptual and practical levels were interlinked to allow a deeper understanding of conceptions, regulations and action guiding orientations regarding interprofessional collaboration of early education and early intervention. On the basis of quantitatively evaluated online questionnaires (see in detail Seitz/Hamacher 2019), qualitative data was collected by means of group discussions and focused observations. The data was analysed using Documentary Method (Bohnsack et al. 2010; Nohl 2017; Bohnsack 2017) which draws on the sociology of knowledge in the tradition of Karl Mannheim (1979 [1931]) and asks in a praxeological understanding which action-guiding orientations are documented in what is said (Bohnsack 2017), or what underlies it. In this way, implicit structures of meaning (orientation frameworks) can be reconstructed. Additionally, interviews with parents were conducted, categorised with content analysis (Mayring 2010) and analysed specifically in order to relate them to the previously evaluated data. The study covered seven regions in North Rhine-Westphalia (NRW). The focus in this article is on the practical level of action within the collaboration with regard to the positioning of families. We illustrate our considerations exemplarily by means of reconstructions of dense sequences of a group discussion and an interview with a parent.

5.2 The family in the focus of case constitutions

In a group discussion in the outskirts of a large city in North Rhine Westfalia, two professionals from the early intervention centre are present, as well as two pedagogical professionals and the head of the kindergarten. Just before, the actors have been talking about the common interface of working with families. The following sequence gives an example of how the accessibility of families in the cooperation is raised and addressed by a specialist from the kindergarten (group discussion 5, paragraph 4, 2018):

"For the collaboration with the parents (short pause), I think it has pros and cons. In a kindergarten it's OK to have conversations without the (short pause) feeling that a superior institution wants to impose something on me or tell me that my child has something. On the other hand, there are also parents who need exactly that in order to understand that their children need more. [...] Depending on which families we have, we watch them accordingly. In this case, for example, we notice that the access to Early Intervention is very difficult for them [...]. There are families whom you need to say "OK, we'd rather do it at the Early Intervention centre", because you might reach the parents better, because the kindergarten might be a nice place to play, but might not be taken as seriously as another institution."

In this sequence of the group discussion, it becomes clear that one experience dominates: There are various parents who can either facilitate or complicate cooperation between early education and early intervention. This is preceded by the assumption that the kindergarten is perceived by parents as a familiar place. On the one hand, this has a positive connotation, since conversations with families can take place at eye level in the kindergarten, and on the other hand, it is implicitly designed as problematic if certain families seem to be difficult to address via professionals. Since there is an assumption that the kindergarten is taken less "seriously" by families, the involvement of early intervention is relied upon if families only unwillingly connect to the early intervention logic. The fact that professionals perceive and identify an additional need – in the sense of an need for early intervention – of a child is outlined as a challenging situation for the collaboration with families, which can be better dealt with being supported by the early intervention professionals. This experience is generated at the beginning of the group discussion in narrative mode and is deepened again later. The actors from the kindergarten present here consistently perceive the early intervention centre as a cooperation partner whose status can facilitate accessibility in the sense of the parents' consent to the activation of additional support. This is based on the assumption that Early Intervention is attributed a higher level of professionalism also by the parents, and that they thus support the educators in their negotiations with the parents.

The kindergarten as a "familiar place" is thus assumed as ambivalent, because the required informal partnership between parents and professionals seems to be accompanied by a loss of the latter's expert status, as it were, and this makes the negotiation about a perceived deviance in the child's development more difficult. At the same time, practices of doing difference become visible both between children and between Early Education and Early Intervention, because the child has to be clearly declared as one who "has something" and "needs more" and thus explicitly establishes a difference from the norm, although this is not described in more detail, but remains diffuse. There is a productive twist to the contexts, because the

attributed higher expert status of the Early Intervention staff is used efficiently to align the perspective of the families with that of the professionals. Overall, in the group discussions (more precisely Hamacher 2020), families are strikingly often attributed a fundamentally sceptical attitude towards Early Intervention, which may underlie the experiences of the professionals.

In many group discussions, the regulatory dependency on the consent of families is presented as a problem to be tackled jointly, as cooperation between the kindergarten and early intervention center can be made more difficult or prevented by the parents. Families become particularly relevant for starting interprofessional collaboration when their actions are classified as an act of “undoing difference”, in that they oppose the “right thing” – namely early intervention – and thus appear unreachable for the professionals (Hamacher 2020). Parental resistance to the declaration of the child as having “something” must therefore ultimately be resolved through various cooperative efforts in order to obtain the consent of the families in the alliance (Seitz/Hamacher 2021). In this way, the actions of the professionals are guided by the logic of differential action based on the developmental norm of the child and their family.

With another sequence from an individual interview with a mother, we show below how the collaboration with professionals is reflected from the families’ point of view and then interweave the respective analyses (Interview 2, parent, 2018):

“Because I actually go through the world with my eyes open [...] Well, when you are a parent yourself, your view is actually like that. [...] I actually try to take these blinders off regardless of my motherhood and just see “Hey, he just needs help and it won’t disappear on its own and that’s it”. At the first moment you think, “Yeah, what have you done now? What was your education like?” Sure. So the perception of the kindergarten was also the one we have. And it was good that it was addressed very early. [...] And we are simply people who are very open and deal with it very openly and don’t directly say “it’s not true”.

The sequence illustrates a mother’s perspective on both, working with early intervention professionals and on the process of identifying a specific early intervention need for her child. In this context, the mother refers to the distinction between parents who are easy to reach and those who are not – as in the previous excerpt from the group discussion. This is illustrated by the example of “openness”, which in this sequence ensures smooth communication with professionals and stands for the family’s accessibility. This form of positioning makes it clear that the mother assigns herself to the former and thus to the accessible parenthood. This refers to the mother’s own field of vision, which from her point of view is linked to “motherhood” and thus naturalized. According to her, one of the criteria of accessible parent is the openness that is emphasized, which first of all marks the willingness to agree to an

impulse on the part of the professionals in order to be able to develop concordant perspectives on the same phenomenon.

If this sequence is related to the course of the group discussion just reconstructed, it becomes clear that an intervention in family systems can only have its implied effect if the professionals are granted expert status and at the same time cooperation at “eye level” is possible. In this context, “opening up” could mean that the parents allow themselves to be normalized because their own perspective can obviously be influenced by that of the professionals. The fact that one’s own educational practices are questioned here in retrospect also implies that one feels called upon as a parent to be a “good” parent, to recognize and use opportunities for early support and to compensate for the “deficits” postulated here, and could therefore also be understood as an act of subjectivising normality (Foucault 1977).

Early intervention, which is attempted to be enforced in this way, thus calls on experts, parents and educators to make decisions while neglecting the children’s right to have a say. Addressing the mother as the responsible person evokes her consent to submit to the logic of support. If one assumes that parents fear a stigmatisation of the child outside the “norm” through social practices of doing difference and interpret observations by professionals as indications that aim at norms, the demarcation to the “non-normal” is marked and maintained by both parents and professionals. If, on the other hand, parents do not agree to these, this is often interpreted by the professionals as an individual sensitivity of them and the Early Intervention procedure is described as an important network in the sense of child protection.

Parents thus appear to be under pressure to successfully influence their child’s educational success through their actions and decisions (Betz et al. 2019). The increasing standardization of child development in related policies (ibid.) can thus be read as a powerful call to identify, describe, and remedy even diffusely perceived developmental deficits at an early stage, for example through early intervention. This implies on the one hand the assumption of the effectiveness of such measures in the sense of an adaptation to the norm, but on the other hand the essentialization of difference through an unambiguous diagnosis to be accepted by consensus. The guidelines can thus be read as an indication of increasing normative practices.

6 Discussion

In the context of the justification and conception of diagnostic procedures in childhood, systemic ways of thinking about children and their development have come to the fore in recent decades. With particular reference to the International Classification of Functioning, Disability and Health of Children and Adolescents (World Health Organization 2007), these are often used as arguments to justify diagnostic tools and associated educational interventions (Pretis 2016). In this context, refer-

ence is made both to the educational sector and to a child's family environment. This can aim to contextualize the child's actions and activate potential in the child's environment (Geib 2020). However, as our study illustrates, this perspective can also take an unintended turn in the context of cooperation between early education and early intervention, because in the specific individual cases, problems of the family are constituted along ideas of normality, which are ultimately interpreted as problems of the child, so that cooperation can be legitimized along the perceived problematic situation of a child and their family.

Following our analyses (see also Hamacher 2020; Seitz/Hamacher 2022) interventions only follow the compilation of deficit-oriented characteristics of children's developmental processes and that measures are carried out accordingly. This can be explained by the fact that Early Intervention is only approved, even in the context of inclusive settings, if the child is made into a child "of risk" who differs from the norm (critically: Hamacher 2020). The professionals addressed in the investigated project are thus also called upon to act according to the logic of early warning systems in alliance with the mandates of early intervention and consequently find themselves in a field of tension. On the one hand, it seems necessary to develop diversity-sensitive and participation-promoting structures and practices in collaboration and, on the other hand, to ensure early intervention for individual children through corresponding practices of doing difference. Simultaneous demands of "early identification" and the implementation of an inclusive practice thus have an impact on professionals and on the cooperation with families via different mediating instances.

Contentwise and summarizing our study shows that in many cases the socioeconomic and ethnic background of children is read as predictor of developmental risk in the frame of collaboration. Family-related risks are constructed through the collaboration of Early Education and Early Intervention and fostered by technological concepts of normalcy as guiding principles. Family-related risk constructions go hand in hand with hegemonic practices and the collaboration of Early Day Care and Early Intervention becomes a space where families are asked for subjectivation as different and for disciplining.

The increasing implementation of Early Intervention in kindergartens in Germany could thus lead to more practices of legitimating specific interventions based on inequity-related constructions of family risks and child-related identifications of "difference" linked to them (Hamacher/Seitz 2019), which implies corresponding critical observations. Achieving the acceptance of difference in the sense of a "disability" on the part of the addressees and their families is a central special educational concern that ensures the subdiscipline as specific. It also seems to prevail in the cooperation between early education and early intervention reflected here. In the cooperation with families addressed as "problematic", resistance is apparently often interpreted as an insufficient processing of a "disability" of one's own child

and negotiated accordingly with power between professionals and parents (Amirpur 2021).

A next step for research could therefore be to analyse in more detail the role of institutions in the production of “disabled” children and the families of “disabled” children with respect to educational inequity. Furthermore, with a view to the changing interface between kindergartens and early intervention centres, it could be asked how settings, attitudes and oriental frames of early intervention influence the early education system and how settings of special education are reinstitutionalised in mainstream kindergartens. As could be shown, the implementation of early intervention in early education is structurally dependent on practices of doing difference in terms of dichotomous classifications (disabled/non-disabled), as this is the only way to generate resources.

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