

PATHWAYS TO SCHOOL SUCCESS: EARLY IDENTIFICATION OF LEARNER NEEDS

KEY MESSAGES

Early identification of learner needs is essential to building truly inclusive education systems and ensuring school success for all. When learning or wellbeing needs are identified early, schools can respond promptly and adapt support before problems intensify, improving both student outcomes and overall school engagement and equity. However, many systems face a persistent dilemma: identification methods that rely heavily on formal diagnoses or medical categories can unintentionally stigmatise learners and reinforce inequalities, while the absence of systematic identification leaves vulnerable learners invisible and hence unsupported.

A shift towards holistic, preventative and non-categorical approaches is necessary. Evidence points to four enabling conditions: needs-based identification, multidisciplinary support structures, flexible resourcing independent of medical labels, and ethical data governance.



WHAT IS EARLY IDENTIFICATION OF LEARNER NEEDS?

Early identification of learner needs refers to the systematic process of recognising learning, wellbeing or developmental barriers at an early stage, in order to provide prompt support and avoid issues becoming more serious. It includes the use of classroom-based observation, formative assessment, screening tools and multidisciplinary assessment processes, and should be guided by holistic and inclusive principles rather than narrow diagnostic categories.

WHY DOES EQUITABLE NEEDS IDENTIFICATION MATTER?

The capacity of education systems to identify learner needs early and without stigma is a cornerstone of educational equity and a core condition to ensure better educational outcomes for all learners. When learning, social-emotional, and/or wellbeing needs are recognised in a timely manner, schools are better positioned to respond proactively, adjust teaching strategies, and provide targeted support before difficulties become entrenched. This not only improves individual outcomes, but also strengthens the overall school environment, engagement, and equity.

As emphasised by the European Agency for Special Needs and Inclusive Education (EASNIE), early identification is not merely a technical procedure: it is the mechanism that triggers well-timed, proportionate support, and helps prevent difficulties from escalating into underachievement, disengagement and early school leaving. It also shapes how resources are allocated, how schools respond pedagogically, and ultimately how learners' long-term trajectories develop.

WHAT ARE THE KEY CHALLENGES? A CORE POLICY DILEMMA

Education systems across Europe face a fundamental tension. Systems must identify learner needs so that vulnerable groups become visible to policymakers, enabling appropriate resource allocation and targeted support. Yet identification based on categorical labels can stigmatise learners, reinforce low expectations, and shape educational pathways in ways that limit rather than expand opportunities.

Across Europe, an increasing amount of learners experience barriers linked to intersecting factors such as socio-economic disadvantage, migration and linguistic diversity, disability or neurodevelopmental differences, mental health difficulties, family instability, discrimination and geographic isolation - trends intensified by the COVID-19 pandemic.

At the same time, many identification systems remain anchored in narrow, diagnosis-based approaches and place disproportionate responsibility on teachers, contributing to late identification, misidentification, or non-identification, especially for less visible needs.

These pressures set up the core policy dilemma explored below: systems must make needs visible to mobilise support, without creating labels that stigmatise or constrain learners' pathways.

Table 1. The core policy dilemma: identification vs labelling

NEEDS	RISK
Systems must identify needs so learners are visible and resources can be allocated	Identification based on labels can stigmatise, segregate, and reinforce low expectations
Data is essential for policy monitoring and evaluation	Data collection may conflict with GDPR, enable profiling, or create permanent records
Medical diagnosis can facilitate access to specialised services	Diagnosis-based funding drives "diagnostic inflation" - families seek diagnoses primarily to access resources
Targeted responses help specific groups (migrants, Roma, neurodivergent learners)	Fragmented categories reduce learners to single-axis identities and ignore intersectionality

This paradox manifests acutely in funding mechanisms. When resources depend on medical diagnosis, systems create perverse incentives for categorisation, disadvantaging children whose difficulties do not fit established categories or whose families cannot access diagnostic services, thereby reproducing the very difficulties the system was designed to prevent. Research has documented how diagnosis-based funding particularly disadvantages Roma learners, migrant children, and those from low-income families who lack the cultural capital to navigate complex diagnostic pathways.

HOW CAN EQUITABLE EARLY NEEDS IDENTIFICATION BE IMPLEMENTED?

Effective approaches combine needs-based and holistic identification with strong multidisciplinary support structures, meaningful learner and family participation, and flexible resourcing that enables early intervention without waiting for medical diagnoses. The principles and practical mechanisms below illustrate how education systems can build identification processes that are preventative and inclusive. Four interconnected principles emerge as essential for designing equitable systems:

Non-categorical approaches – from categories to needs

Effective systems shift from classifying learners based on presumed deficits toward identifying specific educational needs and required support measures. The term "learners vulnerable to exclusion" offers broader framing than traditional special educational needs categories, encompassing all learners whose educational experience is impacted by pressures, discriminations and disadvantages regardless of whether they fit established diagnostic frameworks. This represents more than semantic change; it reflects fundamental reorientation from medical models that pathologise difference toward social models that emphasise removing barriers. Portugal's Decree-Law 54/2018 illustrates how systems can retain visibility for planning while shifting from categorical labels to support measures.

In practice: Rather than categorising learners as having "special educational needs," **Portugal's Decree-Law 54/2018** identifies learners as requiring specific "support measures" to access the curriculum. This shift moves from asking "What category does this child belong to?" toward asking "What support enables this child to learn effectively?". Multidisciplinary teams conduct holistic assessments, then recommend differentiated support organised in three tiers: universal measures available to all learners, selective measures for learners requiring targeted intervention, and additional measures for those requiring intensive support. Critically, the framework maintains data collection without imposing limiting categories at classroom level, balancing systemic visibility with individual dignity.

Holistic, whole-child perspectives

Needs identification must extend beyond academic performance to encompass social and emotional development, mental health and wellbeing, sense of belonging, home and socio-economic context, language development for multilingual learners, and neurodevelopmental profiles. Many vulnerabilities remain invisible within traditional assessment processes (i.e. psychological distress, family trauma, experiences of discrimination, neurodivergent characteristics that do not conform to expected patterns) and require sensitive detection through multiple forms of evidence.

In practice: A flexible, needs-responsive funding in **Ireland** ([Together for Better: new funding model](#)) illustrates how funding systems can support a whole-child approach by enabling schools and providers to respond to a broad range of learner needs without requiring a medical diagnosis. By allowing resources to be mobilised flexibly in response to emerging needs, such as language support, wellbeing support or targeted learning interventions, this approach strengthens early intervention and reduces reliance on narrow categorical pathways.

Shared responsibility

Effective identification systems would never expect classroom teachers to bear sole responsibility for detecting diverse needs. Different actors should be engaged and multidisciplinary teams are particularly relevant in this process, including: special educators, school psychologists, social workers, health professionals, counsellors, and where appropriate, family and learner representatives.

In practice: The [Preventive Counselling Assistance Programme](#) in **Slovenia** provides a strong example of coordinated multidisciplinary support that enables early intervention in emotional and behavioural difficulties. By involving schools, social work centres and families, including home-based interventions where needed, the programme strengthens timely, needs-based responses and reduces escalation.

In practice: [Mobile support teams](#) in Zagreb, **Croatia**, illustrate how specialist teams formed by psychologists, special educators and other key professionals can be accessed even by smaller institutions, which often have less staff resources available in-house.

Participatory processes

Participation by learners and families helps build trust, reduce bias, and improve the accuracy of identification by incorporating lived experience. Participatory approaches also protect dignity and prevent the process from becoming solely deficit oriented. These approaches align with Article 12 of the UN Convention on the Rights of the Child and research evidence showing that meaningful participation improves wellbeing and decision-making.

In practice: The ["Children's Voice" project](#) in **Denmark** engages children, parents, teachers and professionals in developing joint learning plans that shift focus from diagnoses to learners' strengths and resources.

In practice: The [Care Team model](#) in European Schools provides a whole-school structure for early identification through confidential reporting and multidisciplinary follow-up, enabling concerns to be raised safely and addressed quickly without stigma.

POLICY RECOMMENDATIONS TO ENABLE EQUITABLE EARLY IDENTIFICATION OF NEEDS

To enable early and equitable identification of learner needs, education systems should strengthen governance, resourcing and professional capacity in ways that ensure learner needs become visible without reinforcing stigma or diagnosis-driven labelling. Policy action is required across national, regional/municipal and school levels to support holistic, preventative and needs-based approaches.

Key recommendations include:

- **Establish clear national frameworks for holistic, non-categorical needs identification**, clarifying roles, responsibilities and referral pathways across education, social and health services.
- **Develop standardised yet flexible identification toolkits**, including observation checklists, wellbeing indicators and multidisciplinary assessment guidance, while allowing adaptation to local contexts.
- **Align funding mechanisms with prevention and early intervention**, ensuring that access to support does not depend on medical diagnosis and that schools can mobilise timely resources based on educational needs.
- **Strengthen multidisciplinary support structures**, including sustainable funding for school psychologists, counsellors, special educators and social workers, and mobile teams to ensure access in rural or small municipalities.
- **Support the transformation of special schools into resource centres**, providing outreach expertise, staff training, shared specialist services and support for individual learning plans within mainstream education.
- **Promote participatory identification processes**, ensuring learners and families are actively involved and that identification focuses on strengths, wellbeing and learning conditions rather than deficit based labelling that risks constraining learners' future pathways.
- **Strengthen ethical data governance**, including clear protocols for data collection and sharing, anonymisation and aggregation for monitoring purposes, and training for educators to avoid bias, profiling or misuse of learner data.
- **Invest in initial teacher education and continuous professional development for teachers and school leaders**, strengthening their capacity to use formative assessment, early observation and inclusive pedagogy to respond to needs before difficulties escalate.

RESOURCES

- ★ **Using inclusive literacy strategies to support all readers** is a practical tutorial offering classroom strategies to identify and support diverse literacy needs early, including differentiation approaches that help prevent learning gaps from widening.
- ★ **Language awareness in schools – Part of strengthening inclusive education** highlights how language awareness helps schools better recognise the needs of multilingual learners and reduce misidentification, particularly for pupils from migrant backgrounds.
- ★ **The importance of early literacy development** is an expert perspective emphasising why early literacy monitoring and support are crucial for long-term educational success, making a strong case for early identification and timely intervention.
- ★ **Different drum: fostering pupil involvement through mentorship** is a practice example showing how mentoring can strengthen learner engagement and help schools detect early signs of disengagement or vulnerability through sustained relationships and targeted support.

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