

Finding a way forward

Cathy Stirling

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Prioritising Educational Outcomes for Young People living in Residential Care

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“I know I’m stupid, I just wish they wouldn’t point it out all the time”
(young person living in residential care)

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Method

19 individual interviews with:
OOHC leadership team, program staff,
young people and relevant staff working
with the Department of Education

Two focus groups with residential care
staff

Education - the
biggest predictor of
good outcomes for
all young people

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What do we know
about young people
living in residential
care and their
education?

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Most young people living in residential care present to school with a variety of problems including:

cognitive impairments speech and language delay, memory difficulties, distorted and disorganised thinking patterns and information processing as well as concentration disorders (OCSC, 2007; Twardosz and Lutzker, 2010; Teicher, et al., 2003; Shonkoff and Phillips, 2001).

emotional problems (e.g. disassociation and hyper-arousal) and attachment disorders (Pecora et al., 2005).

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This means young people may have :

- problems concentrating and grasping concepts,
- a lack of emotional and impulse control,
- highly disruptive behaviours including aggressive and angry outbursts,
- social skill deficits,
- be withdrawn,
- low confidence,
- lacking interest and disengagement (Cole et al., 2005).

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Educational Outcomes for young people living in residential care

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less likely to attend school (APPG Inquiry, 2012; Wulczyn, Kogan and Harden, 2003). Studies indicate that children entering care have often already missed a substantial number of school days, and this continues in care (Smithgall, Jarpe-Ratner and Wlaker, 2010; Zorc and O'Reilly, 2008; APPG Inquiry, 2012).

overrepresented in special education (Stone, 2007; Trout et al., 2008)

likely to experience multiple changes in schools, generally coinciding with placement changes in OOHC (McDowall 2011; Yu, Day and Williams, 2002a).

twice as likely to repeat a grade (Avery, 2001).

significantly more likely to be disengaged from school (Wise et al., 2010).

likely to experience significantly higher levels of school suspension and school expulsion (Arcia, 2006; McDowall, 2011). This is important because being suspended or expelled from school more than doubles the risk of leaving school early (Center for Promise, 2015).

significantly more likely to have poor grades (AIHW, 2007; 2011; 2015; Townsend, 2011).

significantly more likely to drop out of school early (Wolanin, 2005; McDowall, 2011)

much less likely to attend tertiary education (Pecora et al., 2006; Courtney et al, 2011).

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Some problems are so complex
you have to be highly intelligent
and well informed just to be
undecided about them. L. J. Peter

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Why young people are not engaging:

1. complex trauma and OOHC status
2. the residential care and rigid school environment
3. a lack of social connections

The residential care
setting:
Motivating young people to
attend school

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“You have to have a really strong willpower to, like, be your own individual in this house. If you don’t have the will power like you’ll just suck into what they’re [other young people in the house] doing and you will drop out of school”.

(young person living in residential care)

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“They’re often not in a place to go to school. They’re not ready for school” . (Residential care worker)

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“There are so many times where I’ve just been, I just want to drop out of school and they’d [residential care worker] be, like, if you’re stressed just drop out then... like, when I’m upset and I’m thinking ‘Oh my god, I don’t want to go to school’, I want someone to be, like, ‘No, you can do it’, not someone to be, like, ‘Oh yeah just dropout, like, it’s fine’ (young person in residential care, Uniting)

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“I don’t think they [residential care workers] should be as lenient on kids and just let them do whatever during the day. Like, if you don’t go to school you should get a punishment – not a punishment, but take away a privilege. They don’t know that it’s going to affect them in the long run, not going to school, because no one tells them.”

(young person living in residential care)

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“The workers use to let me just stay in bed every day and sleep the days away. I did this for years. I did not go to school. I never got out of bed until 4pm. Now I get up early because I don’t want to waste my days and I want to do something with my life. I don’t think the workers should have let me stay in bed all day.” (young person living in residential care)

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“...they’re so bored because they’re not engaged at school and we have a thing that if they’re not at school then we don’t do anything with them... that doesn’t help... they’re so bored out of their brains that they just go out.”(youth worker)

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By failing to prepare you
are preparing for failure.

Benjamin Franklin

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Preparation needs to start
in the residential care
setting

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Relationship with School

“It’s a very rocky relationship, very rocky “

(Young person living in residential care)

Patterns of Behaviour

“The student needs to come with an open mind and be willing to give it a go. It is changing mindset, it really is” (Deputy Principal)

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“I didn’t want to be there in general because, yeah, I was always getting in trouble and suspended so it didn’t work for me”
(young person living in residential care)

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“....what schools don't get is that not everyone comes from the same background, not everyone learns in the same way. But, like, no, everyone's equal, everyone has to get the same equal education but not everyone's equal...kids with learning disabilities, like, they are supported, but kids in care, they're not supported at all in school. Like, there is nothing in place to actually help them go to school....it's difficult at school. Like you have to have a thick skin as well to be able to put up with everything “.

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Relationship with peers

“I didn’t like the kids” (young person living in residential care)

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“we have one young person who attends school without showering, without even brushing her hair. This young person has completely given up on her appearance, that contributes to bullying. The fact is she has been bullied in the past and now it is like she has just accepted that this is the way it is going to be...” (residential care worker)

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Why put in any effort if
you don't expect to benefit
from that effort?

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Long (1998; p31) argues that young people “trapped in cycles of failure” need a change in mindset to “believe they can change their future”.

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Growth Mindset Strategies

1. Help young people hear their fixed mindset “voice”.
 - It might sound like “no one will like you at school”, “you’re stupid”, or “you will fail”
1. To recognise they have a choice.
 - How you interpret challenges, setbacks, criticism, is your choice.
 - The more effort you put in the more likely you are going to succeed.
1. Talk back to their “voice” with a growth mindset.
 - I may not be able to do it now, but I think I can learn to do it with time and effort.
 - Reinterpret failure – when your fixed mindset says you just failed – speak back by saying I haven’t succeeded YET. Always add yet to things you can’t do.
 - Most people fail before they succeed (use an example a young person can relate to).
1. Take growth mindset action.
 - Practice acting on the growth mindset. For example, when your fixed mindset says you can’t make friends speak back and say I’m going to give it a try as I’m sure I will have success if I try and get support from people around me.

Mindset Workshop

1. Explain to young people how new connections are formed in the brain during learning.
 - Neuroscience research shows that the brain is always changing and developing and we can change our own ability to learn.
 - Young people who are not doing well at school academically or socially can be helped to catch up with their peers and to reach their potential (Aber et al., 2012; Campbell and Burchina, 2008).
 - Give young people the power of believing that they can change and improve.
 - When young people realise they can change they have the chance of reaching their potential.
 - Tell young people in care that there is strong evidence that complex trauma symptoms can be overcome.
1. Ask the young person to give you three reasons why it is important for people to recognise that they can change their lives.
2. Ask the young person to think about a time they managed to become better at something they used to not be good at.
3. Ask the young person to do a role play with you where they need to explain to another child who is struggling either academically or with friends how they can change.

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What is uniting doing:

- educational officer
- trauma informed framework
- education guidelines
- monitoring attendance and grades
- a framework to guide youth workers
- advocacy and policy development

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Framework for engaging young people in education

Red Flags
Take active steps to prevent me from disengaging from education

- Missed substantial amount of school—I need help to reconnect. Absences for any reason can lead to a heightened risk that I will disengage.
- Moved schools—it will take me 4-6 months to adjust to a different curriculum, different expectations, new friends & new teachers.
- Externalised trauma symptoms—I'm at risk of being suspended.
- Suspended—I'm now twice as likely to drop out of school early.
- 5+ adverse childhood experiences—I will need access to specialised services.
- Poor grades—I'm unlikely to ask for help.

Complex trauma
Make sure my history of child abuse and neglect does not exclude me from my right to an education

- OOHC Status—help me tell my OOHC story and feel ok about where I live.
- Trauma symptoms—provide me with strategies for managing my complex behaviours.
- Educate my teacher---to use a trauma informed lens. Let her know that her support is fundamental to my success - that I find it difficult to ask for help and that I need her to look out for me and not wait until I fail.

Thank you

cstirling@uniting.org

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