

Meeting the education needs of out of home care children: Messages from the Care-system Impacts on Academic Outcomes study

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Overview

- Context for research
- Description of the CIAO study
- Presentation of outcome indicators
- Profile of different groups of children attending school
- Summary of the problem and proposed solution

Educational outcomes are poor

Compared to their peers, out of home care children

- Do academically less well (eg. AIHW, 2007)
- Complete fewer years of schooling (eg. Cashmore & Paxman, 1996; CREATE, 2006; CCYPCG, 2009)
- Have higher absenteeism and truancy rates (CREATE, 2006)

School failure affects future life chances

- YP most at risk are those unemployed and not in full time employment (BSL)
- People who do not complete Year 12 have difficulty in the transition from school to work and face a higher risk of unemployment and socioeconomic disadvantage (BSL)
- 40% of YP who left school before Year 10 were unemployed 12 months later (Foundation for Young Australians)
- People with lower educational attainment rated their own health more poorly, and reported a number of illnesses more often than those with a bachelor degree or higher (AIHW)

School failure impacts wellbeing in the present

School is an important social experience in its own right, and an important part of children's social inclusion, impacting on their quality of life

Education can *transform* lives

- Education can provide a pathway to social inclusion and opportunity
- As providers of OOHC, each agency accepts that it has a responsibility to work harder and smarter in this area
- Current strategic priority for Anglicare Victoria and Wesley Mission Victoria to improve the educational outcomes of children living in out of home care

Education failure a *wicked* problem

- Problem is complex
- To identify a solution need to find out what the underlying problem is and where to make effective interventions

A number of known risks

Risks operating in the birth family

- Economic disadvantage
- Unstimulating home-learning environments
- Education under-valued
- Abuse and neglect and related conditions

Risks operating in the OOHC system

- School discontinuity and school absences
- Low expectations and engagement in education
- Poor co-ordination and communication
- Low participation in extra-curricula activities

School influences

Quality and suitability of the school environment includes

- Availability of targeted and specialised support
- Teacher skills and capacity to manage challenging behaviour
- Flexibility of curriculum and learning options

Aims of the CIAO study

- To provide up-to-date information on education needs and outcomes of OOHC children
- To understand the drivers of poor educational outcomes that are amenable to prevention and treatment
- To lead practice, policy and systems change

A partnership approach

- On any given night Anglicare Victoria and Wesley Mission Victoria support approx. 700 OOHC children
- Both agencies facing the same issues
- Able to undertake a bigger, more comprehensive piece of work than either agency could have done alone
- Increased capacity for advocacy and policy impact

Research method

- Conducted survey of carers and teachers focussing on children aged 4-17 years in non-relative foster care and residential care
- Conducted six in-depth case studies focussing on young people
- Drew on the experience of practitioners in the OOHC field, caregivers and education providers, as well as children and young people receiving OOHC services

CIAO survey sample (N = 199)

- 87.3% of all children/youth receiving foster care or residential care from Anglicare Victoria and Wesley Mission Victoria
- Approximately 7% of the Victorian foster care and residential care population

Sample demographics

	M	SD	%
<i>Child characteristics</i>			
Age (years)			12.0
Child sex (female)	4.2		48.2
Aboriginal and Torres Strait Islander		3.6	
Born in non-English speaking country		4.1	
<i>Placement characteristics</i>			
Foster care placement		74.9	
Residential care placement		18.6	
Lead tenant arrangement		6.5	
Age when placed in OOHC for first time (months)		78.0	32.9
Time in current placement (months)		27.3	32.9
No. main caregivers			6.0
	8.0		
<i>Carer characteristics</i>			
Carer age (years)			46.9
Carer sex (female)	11.9		78.9

Outcome indicators typical of the general population

- $M = 1.5$ school days missed in past month
- 42.3% look forward to going to school most days
- 74.7% read for pleasure a few times a week or more
- 27.9% use electronic media for 2+ hrs per day
- 59.7% participate in organised activities outside school
- Carer support for education (eg. support with homework, discuss school)
- 71.6% have access to internet at home

Outcome indicators uncharacteristic of children generally

- 36.7% had a functional limitation (4.1% in Vic)
- 31.8% use specialised in-school support (9.5% in Vic)
- 10.1% enrolled in non-Govt schools (31% in Vic)
- 23.7% had repeated a grade at school
- 60.% experienced a change of school
- 30.8% had wagged school in the past year
- 14.7% suspended in the past 12 months
- Elevated SDQ scores

Dropped out group ($n = 41$)

- 20.6% ($n = 41$) not attending school
- 45.1% of children aged 15 years and above not attending school
- Mean age = 15.4 years
- Mean time in care = 8.8 months
- 36.6% of carers unable to report the year the young person was last enrolled in school
- 51.2% not attending school due to school refusal
- Case studies provide in-depth information about education pathway from teachers, young people, caseworkers, carers and parents

Children attending school ($n = 141$)

- Cluster analysis used to investigate whether there were statistically discernable groupings in terms of their education characteristics
- Identified three groups labelled damaged ($n = 52$), disengaging ($n = 39$) and doing well ($n = 50$)

Individual characteristics

Damaged	Disengaging	Doing well
<ul style="list-style-type: none">• Mean age = 12• 6% of ethnic origin• High incidence of long-term health conditions (87%)• High incidence of learning difficulties (56%)	<ul style="list-style-type: none">• Mean age = 15• 15% of ethnic origin• Moderate incidence of long-term health condition (18%)• Moderate incidence of learning difficulties (15%)	<ul style="list-style-type: none">• Mean age = 10• None of ethnic origin• Low incidence of long-term health condition (8%)• Low incidence of learning difficulties (4%)

Placement factors

Damaged	Disengaging	Doing well
<ul style="list-style-type: none">• Carers have the lowest expectations for educational achievement• Been with the same carer longer (M = 45 months)• More carers overall (M = 8.3)	<ul style="list-style-type: none">• Carers are younger (M = 45), more likely to be male (21%) and less likely to agree that they can help with homework and help child do well at school• Carers have the least contact with schools	<ul style="list-style-type: none">• Carers have the highest expectations for educational achievement• Carers place high importance on achieving good school grades• More likely to be living with siblings and more likely to be in homes with other children

School factors

Damaged	Disengaging	Doing well
<ul style="list-style-type: none">• High use of specialised education support (67%), mostly for behavioural and emotional problems• Attends primary or special school• Mostly in government schools	<ul style="list-style-type: none">• Moderate incidence of specialised education support (13%)• Use of specialised support for emotional and behavioural problems• More likely to be attending TAFE• More likely to be enrolled in school part-time	<ul style="list-style-type: none">• Low use of specialised educational support (8%)• Attends primary school• More likely to be enrolled in a Catholic school (10%)

Education outcomes/indicators

Damaged	Disengaging	Doing well
<ul style="list-style-type: none">• Not doing well at school; have the lowest grades and overall achievement• More likely to have repeated a grade (37%)• High rate of school suspension (24%)	<ul style="list-style-type: none">• Variation in education achievement• Like school the least and absent from school more• Read for pleasure the least often, watch more TV and socialise out of school more• High rates of school suspension (18%)• Less likely to have homework, have a suitable place to do it and don't get help from carers with it	<ul style="list-style-type: none">• Doing well at school; working hard and achieving the highest grades overall• Low rates of school suspension (only one suspension)• Like school and are likely to have homework

A better understanding of the problem

- Three problem groups; dropped out, damaged and disengaging
- Problems beyond capacity of carers to effectively help and not linked to schools or case planning
- Cognitive deficits as well as emotional and behavioural problems linked to family trauma
- Children already performing less well at school than their peers when they enter care and need remedial help
- Problems engaging with narrow academic program
- Difficulty coping with school social environment

A way of responding

- Involves *therapeutic* treatment, care and education
- ↑ scale and reach of targeted remedial support, flexible learning options and alternative education settings
- ↑ capacity of schools to respond to trauma
- Transition to secondary school important time for prevention and intervention
- Care team approach to education assessment and planning
- Support until YP achieve education qualification or equivalent
- Routine data collection and better research

More about CIAO

Full report available at
www.anglicarevic.org.au