Experiences of Education for Children in Care

Part 4: Summary of Key Findings

July 2019

VOICES of Children

EVIDENCE CENTRE
TE POKAPŪ TAUNAKITANGA

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The Voices of Children and Young People team at Oranga Tamariki supports the organisation to understand children and young people's experiences, needs and aspirations. The team helps to ensure children and young people's voices are heard throughout Oranga Tamariki. It also assists Oranga Tamariki to engage effectively and safely with children and young people of different ages, stages, communication abilities and cultures.

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Some of the results in this report are not official statistics, they have been created for research purposes from the Integrated Data Infrastructure (IDI) managed by Statistics New Zealand.

Access to the anonymised data used in this study was provided by Statistics NZ in accordance with security and confidentiality provisions of the Statistics Act 1975. Only people authorised by the Statistics Act 1975 are allowed to see data about a particular person, household, business or organisation and the results in this Excel workbook have been confidentialised to protect these groups from identification.

Careful consideration has been given to the privacy, security and confidentiality issues associated with using administrative and survey data in the IDI. Further detail can be found in the Privacy impact assessment for the Integrated Data Infrastructure available from www.stats.govt.nz.

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PURPOSE

The Oranga Tamariki Voices of Children and Young People team led a project designed to better understand care-experienced children and young people's experiences of education and the influences on their experiences. The project intended to inform policy and practice change within Oranga Tamariki as well as support and inform the Ministry of Education.

This report summarises the key findings from three research reports (listed below) that were produced as part of the project.

- *Experiences of Education: Voices of children in care and key adults in their lives* (Voices of Children, 2019), produced by Oranga Tamariki. This report shared findings from primary research including interviews with 23 children aged 7 to 15 years who had been in care for at least two years; and 13 caregivers, 10 social workers and 12 educators (including a balance of teachers from primary, intermediate and secondary schools, and Resource Teachers Learning and Behaviour staff). In this summary report, this work is referred to as the 'primary research'.

- *Experiences of Education: Educational engagement, achievement, and outcomes of children in care: Review of government data* (Evidence Centre, 2019), conducted by Oranga Tamariki. This review of government data summarises data on the educational engagement and achievements of care-experienced children, and explores how these achievements relate to longer-term outcomes. The report compared three cohorts:

  1. children with no care experience;
  2. children in care on 30 June 2017; and
  3. children who had lived in care for two or more years over their lifetime (not necessarily continuous) as at 30 June 2017.

  The third cohort is aligned with the cohort that participated in the primary research described above, having two years or more care experience across their lifetime (not necessarily continuous).

  In this summary report, the review of government data is referred to as the 'review of government data'.

- *Educational experiences of care-experienced children and young people: A literature scan* (Allen and Clarke, 2018) was conducted by *Allen + Clarke*. This review is primarily focused on literature from the United States of America, Canada, and the United Kingdom, providing evidence about the educational experiences and achievements of care-experienced children and young people in those jurisdictions. In this summary report, this review is referred to as the 'literature scan'.

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METHODOLOGY

This summary report follows the structure of the literature scan. The key findings from the literature scan were identified for each section and subsection, and these were compared with key findings from the primary research and government data reports. Where possible, illustrative extracts from the primary research interviews with care-experienced children have been included.

Unless otherwise stated, data comparisons between non-care-experienced children and care-experienced children use the data for the third cohort described above: children with two years or more care experience across their lifetime.

A deeper understanding of the educational experiences of children in care is available by consulting the full reports.[1]

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[1] As at May 2019, the three individual reports are not publicly available. However, these can be accessed through the Voices of Children and Young People Team at Oranga Tamariki.

EDUCATIONAL ENGAGEMENT, ACHIEVEMENTS AND EXPERIENCES OF CARE-EXPERIENCED CHILDREN AND YOUNG PEOPLE

The term 'engagement' is used in the three reports described above to discuss disciplinary actions that prevent children from attending school (stand-downs, suspension, and exclusions) and truancy (where the child is absent from school without good reason).

In the review of government data, 'engagement' also includes enrolment in alternative education rather than a mainstream education provider, which has been used as an indicator of disengagement.

Educational engagement and achievement of care-experienced children and young people

Disciplinary action highlights problems faced by care-experienced children

Higher rates of disciplinary referrals, suspensions and expulsions for care-experienced children and young people compared with their peers were found by Ferguson and Wolkow (2012) and reported in the literature scan. Fergusson and Wolkow suggest that this may be related to the high rates of behavioural problems sometimes associated with care-experienced children and young people. The review of government data supports this finding noting that "children in care appear to be more likely to have been stood down[2] in the past year (9% versus 1% of those with no care experience)," (Evidence Centre, 2019, p. 7). The difference is most pronounced in the data relating to boys who were stood down in the past year (10% of those with two years or more care experience, compared to 2% of those with no care experience).

The review of government data also shows that disciplinary actions and truancy tended to increase with age amongst care-experienced children, whereas the data relating to children without care experience was relatively constant across the age cohorts.

Exploring the government data by ethnicity shows little difference in the experience of disciplinary actions for children with two years or more care experience. However, children with two or more years of care experience who are identified as 'Pacific' are shown to have

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[2] 'Stand-downs are defined as the child or young person being formally removed from school for a specified period.

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more frequent unexplained absences, with low to moderate truancy attributed to 9% of this cohort, compared with 4% or 5% for other ethnic groups with the same care experience.

The primary research findings also support the point made by Fergusson and Wolkow (2012), that care-experienced children experience higher rates of disciplinary referrals, suspensions and expulsions than their peers with no care experience. For example, a primary school educator emphasised the importance of behavioural issues being resolved prior to the child finishing primary school because in their view primary schools have better supports for care-experienced children.[3] The educator's view (expressed in the extract below) that intermediate schools are "less tolerant" and that secondary schools are even "worse", aligns with the finding from the review of government data, that the incidence of disciplinary actions and truancy appear to increase with age.

> *I watch kids leave here to go to intermediate and I freak out for the ones that I haven't managed to successfully help or change because I know the minute they get to intermediate, they're less tolerant. … it's stand down, stand down, stand down, exclusion. High School's worse. I know that if we don't try and help that child while they are at their prime years of schools, [age] 5 to 10, it's not going to. I guarantee you if someone could sit there and do a survey, I guarantee you 80% of those children not being in school anymore. It's really sad. [Educator]*

The primary research notes that some children in care have difficulties with personal relationships, which may include a lack of strategies for dealing with bullying and teasing; not being able to form friendships; or forming friendships that encourage them to break school rules. The report notes that these issues may result in children behaving in ways that lead to exclusion. An extract from an interview with a care-experienced child illustrates this point.

> *This boy is really mean to me. Heaps of people are really mean to me and I am just one of those people who can't put up with it. I just get really angry coz things do hurt me and I just get really angry when I ask them to stop and if they don't stop, I get into fighting and stuff like that. I can't handle things like that, and I hurt people because it hurts me about what they say to me.*
>
> *Well I tried to stab someone. He was just like in my face and annoying me. The teacher didn't care what he said but as soon as I like threatened him, I got into trouble more. So, I got sent home, then had a meeting and then got kicked out for three months. [Māori female, age 14]*

Aligned with the point from Fergusson and Wolkow (2012), suggesting an association between higher levels of disciplinary action and higher rates of behavioural problems, the primary research also notes that children in care may experience disorders such as foetal alcohol spectrum disorder (FASD) and attention deficit hyperactivity disorder (ADHD) – both of which may be associated with behavioural issues.

In the extract below, a social worker observes that issues with a specific child's behaviour appear to be increasing as the social and academic gaps widen between the child and her

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[3] An educator noted that the RTLB service and the Intensive Wraparound Service do not transcend primary school.

peers. The problem of increased frequency of behavioural issues suggests a pathway toward disciplinary action against the child. In this example, the social worker expresses the desire to 'help', and suggests a way to potentially re-route the pathway: developing peer friendships with children who are cognitively aligned with the child.

> *The worry for these children with FASD is they are growing and developing so much more slowly than their peer group yet they are kept with their peer groups through their educational life. If they are making friendships, they are two or three years younger than themselves where they are more cognitively situated socially. Some of these children would be benefited to be held back a year or two years at school to give them a chance to catch up from the social perspective. … And the academic stuff as well. With this girl, this teacher, her comments are that every year you can see a widening gap between her and what she is achieving academically versus her classmates. The more that becomes obvious, we can't help wondering if that is feeding into her behaviour, because that is starting to escalate. We are having to look at why is this happening, and it could well be an element of being confronted by the fact that she is not doing so well as her peers and she doesn't have any friends her age. [Social worker]*

Academic achievement can be more difficult for care-experienced children

In a systematic review of literature from the USA, Australia, UK and other European countries on care-experienced young people aged 17, all 32 included studies reported significantly lower school success and graduation for care-experienced individuals compared with their peers (Gypen, Vanderfaeillie, De Maeyer, Belenger, & Van Holen, 2017). This gap in achievement is found across countries and time and is relatively large. Another systematic review[4] (Luke & O'Higgins, 2018) found eight studies that reported a gap in educational achievement (and engagement) between care-experienced children and their peers. This gap persisted across different outcome measures including cognitive abilities, achievement, literacy, and numeracy (as well as attendance and exclusions), and throughout the child's time within the education system, or 'education journey'.

The review of government data also identified a considerable difference in academic achievement when children without care experience were compared against children with two or more years of care experience. The review found that 13% of 18 to 19-year olds with two years or more care experience had achieved NCEA level 3 or NZQA 4.[5] This compares with 45% of their peers with no care experience. Contrastingly, 42% of 18 to 19-year olds with two or more years care experience had not achieved any level of NCEA, compared to 16% of their peers with no care experience.

In the primary research, questions about achievement tended to generate responses that considered achievement more broadly than in the sense of academic qualifications. For example, the report lists several ways in addition to passing exams that care-experienced children might be considered to be 'achieving', including attending school, fewer behavioural

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[4] 28 studies from the USA, UK, Australia, and Canada assessed the impact that the experience of being in care has on educational outcomes for children and young people under the age of 18.
[5] NZQA 4 is understood to include non-university certificates or diplomas.

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issues, communicating, the child feeling motivated and wanting to learn, and participating in group activities or teams.

The primary research report also commented that sometimes children downplayed or minimised their personal achievements, as illustrated in the following extract.

> Interviewer: So how do you know, what else are you good at, anything at school that you can think of?
>
> Child: Running. Nothing.
>
> Interviewer: You're good at nothing?
>
> Child: Oh, I am good at playing rugby.
>
> Interviewer: If I asked your teacher, what would they say?
>
> Child: Running, math [Māori male, age 11]

Further, the primary research report noted that (presumably adult) participants had mixed views on the relationship between home life stability and achievement at school. In this regard, while some participants considered achievement at school to be unlikely if the home environment is unstable; the contrasting view was that school can be a place to achieve when the home life is unstable. One educator put considerable emphasis on the need for a stable home environment, reporting their observation that a stable home life is a prerequisite to academic success.

> Generally, they will be where they need to be, if they're in a stable home environment. The moment they're not and they're moved around a little bit, their academic levels deteriorate, and they drop. That's because their self-esteem drops and then all of sudden, they are not sure. A lot of those kids that move from home to home, caregiver to caregiver, we have some kids here, they could be an eight-year-old and we're their ninth school and things like that because they're moved around all the time. That's so hard, that's awful, so they just don't care. Again, depending on the child, I would say kids in care, generally their achievement levels are lower than ones not in care, if that makes sense." [Educator]

In contrast, from the viewpoint of one social worker, schools with a principal who goes beyond their normal duties of care can provide what the social worker describes as a "safe place" for children when their homelife is providing neither stability nor educational aspirations.

> I have a few kids on my caseload at the moment that are doing amazingly well academically at school. Because of all the things that are happening at home to me it is their safe place. They are doing so well and excelling academically. It is not coming from home. I think it is coming from a really caring principal and taking one step further and looking out for kids. They call us if there are any problems." [Social worker]

Educational experiences of care-experienced children and young people

Frequent changes of school can negatively impact the education journey

The literature scan included studies in which care-experienced young people considered their experience of education would have been better if they had not endured so many changes of school. Young people reported that frequent school moves sometimes led to knowledge gaps. For example, the order in which the curriculum is taught can differ from school to school, which can cause a problem for children who change schools during the academic year (Clemens, Helm, Myers, Thomas, & Tis, 2017; Tilbury, Creed, Buys, Osmond, & Crawford, 2014). Another study highlighted that changes in school disrupt the development of relationships with trusted, school-based advocates and mentors who, under other circumstances, might have guided choices and decisions regarding the educational journey (Quest, Fullerton, Geenen, & Powers, 2012).

The review of government data reported that:

- 21% of children with two or more years of care experience had changed schools three times or more, compared with 3% of their peers who are not care-experienced;[6]

- children aged 5 – 17 years with two or more years of care experience are five to six times more likely to have changed schools three times or more than their peers with no care experience; and

- considering the data for all children in care as at 30 June 2017, regardless of the total time in care over the lifetime, the difference is even greater: care-experienced children are seven to ten times more likely than their peers with no care experience to have changed schools three times or more.

These data collectively suggest that changes in school may be more frequent in the first two years of living in care, with somewhat fewer changes in school occurring over time.

Problems associated with changing schools were described by more than half of the primary research participants, who raised the matter without prompting by the interviewer. The primary research report noted that changes in school are often necessitated by a change in care arrangements. When a child described why she would prefer to stay at one school, she echoed the findings reported in the literature scan:

> *It would be better if we had just stayed at the same schools because when you leave schools you end up learning different things. You are working on something and you have that all in your mind, then you go to another school and they probably teach you something you already know. [African female, age 11]*

Other children described the highly transient nature of their educational journey, describing their moves from school to school, sometimes in relation to changes in their home environment, as illustrated in the extract below.

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[6] These data have been adjusted to exclude moves from primary, to intermediate, to secondary school.

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I have had four school changes. My first school was [A] then I went to this school in [Place] called [B] and then I went [C] and I then [D]. This was because first I was with my mum and dad then we moved to a different house – so went to different school. After that I got taken and went to [B]. Then I got taken again and then I went to [C] and stayed with caregivers, went to [D], moved everywhere, stayed with these other caregivers … went from there, came to [care home] … had a little visit, made friends, left, came back….[Māori male, age 14]

Adult participants of the primary research placed a greater focus on processes that can help in the transition from school to school. This included the desirability of the child visiting the school prior to starting, and/or the social worker visiting the new school to advise of any special requirements and transferring paperwork from the previous school to the new school prior to the start date.

Adults were also concerned about the social implications and trust issues for the child. For example, an educator observed:

If you drop out and go from school to school, you don't make long-term friends. If you have to make new friends all the time that will impact on you as a person with levels of trust. If you go past three months with a person you start getting worried because they might learn the real you. [Educator]

Teacher-pupil relationships are important to care-experienced children

The literature scan highlighted research that suggests the teacher-pupil relationship to be protective for the care-experienced child, with higher quality relationships being associated with lower school drop-out and higher academic achievement (Benbenishty, Siegel, & Astor, 2018). That finding supported an earlier study (Celeste, 2011) which showed a healthy teacher-pupil relationship to be central to children's perceptions about school with the teacher being a motivator, facilitator, a carer, and a provider. However, it can be difficult for care-experienced children to develop relationships of this quality (Driscoll, 2013), due to a history of loss and rejection that may be compounded by transience and a breakdown of care relationships.

The primary research report included an illustrative example of a quality relationship between a care-experienced child and her teachers and dean.

If you struggle with something a bit, the teacher will come and help you out and make sure you understand what you're doing. … The teachers are like really accessible, so if you're not in class and you need to ask them a question or talk to them about something, you can flick them an e-mail or, even at lunchtime, you can go and see them. They're always there to talk to, if you have any questions or you need support for something. …Yeah, the teachers are just really friendly, and my dean is really friendly too. She's helped me a lot with my being sick and all that. She's helped me a lot too. [NZ European female, age 14]

Another social worker commented that some teachers have preconceived ideas about care-experienced children, such as assumptions about academic potential and trust issues, and

wider assumptions about Oranga Tamariki. These assumptions were considered to potentially create a barrier to classroom learning for care-experienced children.

> *I think for me just when you're talking about the teachers, the possibilities of the teachers having a preconceived idea about what the child is or could be or what it brings, I think it's more around the teachers' preconceived ideas around the Ministry and the trust in the relationships that they have and the experiences they've had, positively and negatively. Often, you hear about the negative stuff so the child's already compromised by the relationships and the reputation of the Ministry in a sense. [Social worker]*

In the primary research, a social worker and an educator each held the view that not all teachers have been trained to work effectively with children experiencing FASD and/or ADHD. The social worker noted that it is necessary to interpret the behaviours of such children in appropriate ways, using different approaches to deal with those behaviours, rather than assuming that the child is being disobedient.

Care-experienced children need protection from stigmatisation

The literature scan highlighted the problem of the stigmatisation of children while they are living in care. One study reported that children may censor the information about themselves that they share with others in order to protect themselves from further trauma (Finkelstein, Wamsley, & Miranda, 2002). Another study (Mannay et al., 2017) noted that being identified as different to fellow pupils appears to become more of a problem as the child gets older. They note that care-experienced children particularly dislike being withdrawn from class to attend care-related meetings, and having such meetings conducted at the school, during school time. The main reason for their dislike is that these events signify their difference, opening the possibility for stigmatisation should the difference be recognised by their peers.

Stigma was not limited to peer relationships. Sometimes educators were also considered to behave in stigmatising ways toward children living in care. This included teachers having lower academic expectations than they have of children who are not living in care (Elliott, 2002; Mannay et al., 2017; Sladović Franz & Branica, 2013) and caregivers and social workers having low expectations (Mannay et al., 2017).

The primary research reported examples of children choosing to limit the information they share about themselves. In the extract below, a girl describes her practice of withholding information, also explaining that she does this to protect herself from unwelcome questions.

> *I don't even tell people at school that I live at [care home] cos I hate it when they ask questions. If they know then they can ask questions. They ask questions like "why are you in care, blah, blah, blah?" and they go on "where do you live, did your parents not feed you, did your parents hit you?" [African female, age 11]*

This practice of withholding information is not universal. Another child was unconcerned about his peers knowing that he lives in care; at least in part because this experience is common at his school.

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Interviewer: You don't feel embarrassed when your social worker turns up at school?

Child: No. Lots of people have them arriving. I know I am not the only one that gets it. [Māori/Tongan male age 14]

This boy's experience stands out in the primary research because the more common experience reported was for care-experienced children to feel anxious about the possibilities of stigmatisation, should their peers find out about their home environment. Aligned with the literature scan, the report noted that the child's care status can be revealed through social worker visits to the school. In the extract below a caregiver supports the children in her care to request that social worker visits be out of school hours, noting that this would reduce confusion, especially for younger children.

Getting pulled out of class to see an OT social worker – excuse me – they hate that, especially the older ones. Then the younger one's tell us, 'oh my social worker came to see me today' and they get confused 'cause they don't even understand what it's all about and then we get notified a week later why they went there … and we are like "we told you not to go to school – come to the home to talk to them in front of us so that we all get the same message and we all understand what you are actually telling the children – especially the younger ones." [Caregiver]

Eliminating visible differences, such as making sure the child was fully equipped (uniform, equipment, etc.) from the first day at a school was considered in the primary research to be protective of stigmatisation and bullying, because it helped the child to blend in and not be perceived as different.

It's about getting things right from day one. It's about making sure that that child goes to school with the right uniform, the right equipment so, straightaway, they don't appear to be the odd one out. [Social worker]

Additionally, an educator identified others 'basics' that the child needs, from clothing to computer access, commenting that their school attempts to look after care-experienced children.

I mean, we're all here for the same thing; we all want them to have the best experience that they can. That means not being cold and it means a working computer and getting to school on time and all of those basics. They should have the same as everyone else. It's not their fault … We do make a real effort to look after them. [Educator]

One way that stigmatisation manifests is through stigma-based bullying.[7] The bullying that care-experienced children described in the primary research involved harassment and teasing by their peers about things concerning their home life, such as continued probing for private information, and it was suggested that care-experienced children may be teased about the absence of everyday items such as having an adequate school uniform, sports and PE gear,

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[77] For more information about the effects of stigma-based bullying, see (for example) https://www.sciencedaily.com/releases/2018/03/180308105144.htm

and the right books and materials etc. The primary research report indicates that the major response to bullying is to report the incident to a member of staff. Interview extracts reveal, however, that this response appears to be insufficient and/or ineffective in the view of the child who is being bullied. The following extracts highlight the frustration of children experiencing bullying when the coping and management techniques advocated by the school appear to fail.

> *When I went and told the teachers they told me to go and talk to the person who bullied me and see if I could speak to them. What was the point in me telling the teacher? [Māori female, age 15; and Māori female, age 12]*

> *I walk off and tell the teacher but most of the time the teacher does nothing about it. They say "ahh it's ok, just forget about it". It's really annoying so I just guess I just forget about it. My carers know and I am pretty sure they talk to the school. I tell the school, but I am not sure what they do about it after that. [African female, age 11]*

During her interview, one girl responded to the interviewer's hypothetical scenario, where she had the opportunity to tell the Prime Minister what should be done to make her school better, by asking the Prime Minister to resolve her experience of being harassed at school.

> *Tell people to leave me alone and not get smart and that if people get smart to me I will get smart back and if people leave me alone then I am happy by myself and working. [Māori female, aged 14]*

One girl talked positively about her school's policy and processes toward bullying, but this was an exception within the report.

> *The school, it doesn't put up with violence or any bad behaviour. … It doesn't put up with bullying. I like the school because it has clear, firm boundaries, rules and expectations. [NZ European female, age 14]*

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INFLUENCES ON EDUCATIONAL ENGAGEMENT, ACHIEVEMENTS AND EXPERIENCES

Influences on educational engagement and achievement

Caregivers, teachers, and social workers need to support and encourage education, and acknowledge academic progress and success

The literature scan reports that factors present prior to the child entering care may in part explain the educational achievement gap between care-experienced children and their peers. These factors include special education needs, maltreatment, and the effects of socioeconomic deprivation (O'Higgins, Sebba, & Gardner, 2017). An earlier study reported that young adults who had been in care as children seldom mentioned the care environment as being one which was supported and encouraged education (Cameron, 2007). More commonly, care-experienced children's academic capability was questioned by caregivers, resulting in a high need for self-reliance and autonomy in order to achieve academically.

The primary research described a social worker's view that some teachers have preconceived ideas about children who are in care, including negative assumptions about their academic ability (see above, in the section about teacher-pupil relationships). Elsewhere in the primary research report, a social worker commented that some caregivers do not sufficiently emphasise the importance of education.

> If it doesn't seem important to them, they are not going to push it onto the child. If you aren't passionate about the kids, their learning and needs, and don't enforce to the children as some rule or routine then they are not going to do it as they don't like doing homework. [Social worker]

On the other hand, a caregiver described their proactive engagement with a school as they attempted to help a child to get 'ready' for secondary school, noting that it had taken some effort on their part to get the school to agree to "do anything different".

> He is in Year 8 and at high school next year and he is so not ready. If he goes into high school like he is, he is going to be a statistic. But the school is not willing to do anything different, so I went into bat for him and they finally agreed. The approach is he spends three days at school but one day one-on-one with my daughter to catch up. … We are running an experiment … to see the difference it makes when a kid is fed correctly, clothed and gets to school on time and feels safe. Even after

two weeks he feels better about it. He is going to school. … I have only had one complaint and that was on his first day and I haven't had any since. His teachers are noticing a big difference and it is just that one-on-one approach and he is learning a lot. Oranga Tamariki should think about that for special cases. Think outside the box." [Caregiver]

Similarly, another caregiver suggested that their school is underestimating the capabilities of the children in their care and could do more to extend the children's learning.

The kids come home from school but then they either bring homework that is below par for what they could be achieving, as far as we are concerned, or they don't bring home homework at all….if the teacher did not have time to allocate homework… they sometimes just say 'oh read a book'… or 'go to this website because I did not have time to print it out'. That's not good enough so we need help to offer the right support to our kids at home. We are picking up a lot of slack from the schools. We are sitting down and saying to the kids 'have you read this book already' and the kids are saying 'the teacher read it once, but I don't understand it'. The teacher reads and everyone has to listen… she does not know that they understand. So, we pick up all this slack from school and there are only two of us for seven children. [Caregiver]

The literature scan identified several studies and narrative reviews that suggest care-experienced children recognise the importance of key adults (such as caregivers, teachers, and social workers) encouraging and supporting their education, and celebrating their successes (Brady & Gilligan, 2018; Ferguson & Wolkow, 2012; Harland, 2014; Sladović Franz & Branica, 2013).

Above, in the section about the teacher-pupil relationship (see page 13), the positive experience of a female care-experienced secondary school student was described, where she was able to contact her teachers via email and in person to clarify things when she was struggling. Another example from the primary research describes a caregiver who fostered a love of reading in the children in her care, as described by those children.

We didn't read before we came here. We didn't have books but now we read all the time. Aunty has taught us that it's good to read and now we really like it. [Māori female, age 15 and Māori female, age 12]

A caregiver described the response of the child in their care when a parent-teacher interview was attended, which the child interpreted as an important indicator of support for her educational journey.

One of the things that [we] make sure we do is that we attend the parent interviews. When we had our niece, she was blown away. She cried cos none of her family had ever done it. It was the first time someone had been and so that is something that we think is important, that we attend those, and we see how the kids are going. [Caregiver]

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Learning support is especially beneficial for children with learning difficulties

The literature scan identified two studies which reported that life experiences prior to being placed in care may account for some of the academic achievement gap. A recently published systematic review, which examined 28 articles, concluded that there is limited evidence that being in care is a causal factor for poor educational outcomes (Luke & O'Higgins, 2018). The systematic review supports the findings from earlier research, which noted that care-experienced children have high rates of special education needs, which were noted to impact academic achievement (Berridge, 2012).

The primary research noted that many children in care have individual learning needs and can benefit from learning support, and that where these needs are not recognised and/or not met, the child's ability to progress in line with their peers is impaired. Conditions which pre-date the child's entry into care (such as FASD and ADHD) were noted for their prevalence amongst care-experienced children, and it was noted that teachers would benefit from specialised training about teaching children with such disorders. Some of the children who participated in the primary research acknowledged the assistance they receive through learning support, recognising the difference these people make to their school experience.

> *I had a teacher aide helping me, so she was on my side helping me … she sits next to me and she helps me with my work … When I am angry at school, I usually tell my teacher aide and she helps me through it. [Māori female, age 14]*

One social worker challenged the assumption that all children should do their school work at their desk, in a classroom, instead, calling for 'out of the box' thinking to help children master their school work.

> *They need to give her work and send her to the library, to sit in a quiet corner with a teacher aide to help her, rather than in a classroom. Can we think outside the box, rather than 'you must sit in a classroom with 20 other children' or whatever and learn this way? [Social worker]*

Engaging in extra-curricular activities requires resources and caregiver capacity

The literature scan identified two studies that included an exploration of the role of extra-curricular activities in the lives of care-experienced children. The children from one study noted that involvement in extra-curricular sport was a useful way to develop social networks (Quarmby, 2014). This point was also raised by the children in another study (Neal, 2017), who viewed such activities as important for developing an external support system while pursuing something positive, away from the challenges of home life.

The primary research report noted that extra-curricular activities can give care-experienced children opportunities for non-academic engagement with their peers, which was considered a useful way to develop a sense of belonging and feelings of achievement. The report notes, however, that participation depends on caregiver capacity and support, as well as the need for the social worker to facilitate timely access to the necessary resources. One child whose needs were being met in this regard spoke appreciatively of the support he was receiving.

Our caregivers help us with everything… like we need anything… they provide it… like rugby… he provides me with rugby gear, like if you need boots, they will get them for me. [Māori male, age 14]

A caregiver's example, below, illustrates the extent to which extra-curricular activities require capacity from the caregiver as well as resources accessed via the social worker. In this example, caregiver time and attention are coupled with resources accessed via the social worker, together enabling three care-experienced children to attend weekly swimming lessons.

One of the things that I said to him recently or two terms ago is that I was concerned about the kids, at their lack of water knowledge, safety and ability. I asked him, could I get them into swimming lessons. They're footing the bill for that and so each Saturday, the three go. They're having lessons. [Caregiver]

But the experiences described above are not universal. In the following example, the caregiver was unable to access resources that would have facilitated an activity without placing a financial burden on the caregiver.

I had to fight tooth and nail to get them to fund a family reunion we had to take the kids to which I thought was beneficial. I had to pay for it. Not everyone can afford it. It was a camp over in [place]. [Caregiver]

Influences on educational experiences

School needs to be a place where children want to be

The literature scan highlighted aspects of the school environment that impact how children feel about being at school. One study (Tilbury et al., 2014) found that having a helpful social worker and having a caregiver who helps with their studies supported children to feel positive about school. Children felt better about being at school when the school had flexible, supportive processes and structures, and when the school provided information sessions about potential pathways for future education and life beyond secondary school. Further, children from that study who were positive about school often had clear ideas about their educational pathways into the future.

On the other hand, children from the same study who felt negatively toward their school focused on issues with disciplinary actions or difficulties with academic requirements or relationships. They considered their sense of connection to and engagement with their school to be impacted by changing schools, with consequent impacts on their friendships and social networks, and issues around the curriculum.

From the primary research, children spoke positively about their schools when they were describing ways in which teachers and support staff made them feel valued, such as by praising their efforts, or recognising a need (academic or social) and attending to it.

Interviewer: What was it about the college that you thought, I want to go there?

Child: It was like, a really nice, small school, and it's like really beautiful.

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Interviewer: Oh, is it? What does beautiful mean? Is it beautiful to look at? … What makes it beautiful?

Child: So, there's lots of nice teachers there

Interviewer: So, the nice teachers there, what do they do that makes them nice?

Child: They're not really as grumpy, and teachers that can like sit down and help me with my school work. [Māori female, age 15]

Children spoke negatively about school when they considered school processes and policies were not attentive to their needs, particularly their desire to have an effective response to bullying, as described above in the section about protecting children from stigmatisation (see page 10).

Some of the educators who participated in the primary research work at schools where there is a pastoral support worker. Educators spoke of the importance of having pastoral support. Pastoral support not only benefitted the care-experienced child: the teacher was also supported. As one educator noted, the pastoral support worker is pivotal, providing liaison between organisations and with the child and their caregiver, freeing up the teacher to focus on the whole class. In some schools, the pastoral support worker provided one-to-one support for the child when behavioural issues arose within the classroom. In the primary research report, one young person mentioned talking to their pastoral support worker about bullying.

The educational aspirations of care-experienced children can be impacted by key adult's attitudes to education

The literature scan described several studies that collectively presented a mix of experiences regarding educational aspirations. Brady and Gilligan's (2018) narrative review of the literature found that caregiver and teacher expectations of the child as well as their encouragement and support was vital to the success of care-experienced children and young people. However, a study with 67 care-experienced children and young people (Mannay et al., 2017), found that most of the young people reported caregivers, social workers and teachers to often have low expectations for their achievement and career pathways. Those study findings were aligned with an earlier study that included 80 care-experienced school-leavers (Cameron, 2007), which also reported caregivers questioning the academic capability of the young people in their care. A further study, with 57 care-experienced young people attending tertiary study, identified two key characteristics common to these participants (Neal, 2017). Firstly, these young people wanted to disprove the labels and stigma that had been applied to them as children. Secondly, they wanted to break the intergenerational cycle of disadvantage.

The primary research found that the aspirations of care-experienced children are impacted by the attitude to education of key adults in their lives. However, the primary research also reported that caregivers, educators and social workers felt that care-experienced children tend to have low aspirations. To illustrate the point, one social worker described a conversation with a care-experienced child in which the child appears to have goals that are beneath the potential that the social worker has identified.

I sat down with a 17-year-old who was like, "I want to go and work in a factory." I was like, "Well, that's great. That's cool if that's what you want to do. If you could, what's your biggest dream?" They couldn't even

> *identify that, so I think, longer term, kids need to be encouraged to have*
> *big dreams, even if they've been in care." [Social worker]*

Coupled with the views of caregivers, educators and social workers that care-experienced children tend to have low aspirations is the point that care-experienced children who participated in the primary research did not typically view caregivers and social workers as contributing to their education. Further, care-experienced children considered that educators who do support their learning are those who are available, answering their questions, and tailoring school work to their individual needs.

One social worker considered that the development of a love of learning is the function of primary school, making this stage of the education journey essential for self-esteem and aspirations, commenting "there's no stopping them".

> *If you can instil in a child, that whole love of learning at the beginning,*
> *they can go wherever they want to go. It doesn't mean that every child*
> *goes to university but it means that they've got the ability and the belief*
> *in themselves, that they can go to a job and they can learn how to do it*
> *or they can learn a skill later or they can do anything. I think that's what*
> *primary school's about, it's about learning to learn and college, to me, is*
> *about what you're learning. That's how I see it. If you can get that love of*
> *learning right at the beginning, there's no stopping them, no matter who*
> *they are or what level they'll ever get to. [Social worker]*

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IMPACTS OF EDUCATIONAL ENGAGEMENT, ACHIEVEMENTS AND EXPERIENCES ON OUTCOMES

Poorer life outcomes tend to be sustained into adulthood for care-experienced people

A systematic review of 32 studies included in the literature scan reported the association between low educational achievement amongst care-experienced people and low employment rates, unstable employment patterns, and low income (Gypen et al., 2017). The effect is understood to last at least into the person's 30s. Another systematic review (21 studies), found that care-experienced people tended to have lower income and employment rates than their peers, even when they had the same level of educational achievement(Geiger & Beltran, 2017).

The review of government data explored the relationship between educational achievement and life outcomes for people over the age of 16 years who had ever lived in care,[8] focusing on three indicators: participation in employment or training,[9] long-term benefit dependency,[10] and regular offending.[11] These data were clear that care-experienced individuals had worse outcomes across all three indicators compared to their NCEA Level 2 achieving peers with no care-experience. However, care experienced children who achieved NCEA level 2 were less likely to experience long term benefit dependency than care experienced children who did not achieve NCEA level 2 (26%/8%).

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[8] This differs from elsewhere in this paper, where the data ordinarily focuses on people with two years or more across the life-course of being in care.
[9] Defined as at least one quarter of the year in employment, education or training at age 20.
[10] Defined as more than 20 quarters (of a year) on a benefit to age 25.
[11] Defined as more than two high seriousness offences, or more than five low seriousness offences (as defined by the Ministry of Justice Offending Model) after turning 21 years of age.

HOW GOVERNMENT AGENCIES CAN IMPROVE THE EDUCATIONAL ENGAGEMENT, ACHIEVEMENTS AND EXPERIENCES OF CARE-EXPERIENCED CHILDREN AND YOUNG PEOPLE

Interventions to improve educational engagement and achievements

Strengths-focused policies and processes are needed

The literature scan has shown that care-experienced children and young people are a heterogeneous group, each individually possessing different strengths and needs. The literature suggests that they require tailored support and resources to promote their educational achievement and success. The literature also concludes that interventions involving policy and processes should focus on promoting the strengths of children and young people, and one enhancing the supports and resources provided by schools and systems. This includes enhancing communication and information-sharing between agencies; and providing training on the needs and strengths of care-experienced children and young people to those involved in their care and education.

Adequate training is essential to successful delivery of interventions

The literature scan noted that many individual programmes have been developed to provide targeted support to care-experienced children and young people. These include New Zealand-based programmes targeting vulnerable children in general, including the Strengthening Families programme, the Intensive Wraparound Service, and Social Workers in Schools. In general, these programmes have been found to be successful at improving educational and wellbeing outcomes for children and young people (although the New Zealand-based evaluations have not separately assessed effectiveness for care-experienced children and young people in particular).

Factors common to successful interventions include adequate training for individuals delivering the programme, adherence to the planned intervention, flexibility to meet individual needs, and programmes that involve tutoring and relationship-building. There is some indication that young people prefer such programmes to be delivered in a home setting by their caregiver.

Improving educational experiences

Timely sharing of appropriate information about learning and behavioural needs may enhance educational experiences

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The literature scan noted that creating a positive school environment is key for keeping care-experienced children and young people positively engaged in education. In the context of frequent moves from one school to another, having a process which enables rapid and thorough information sharing has been found to contribute to school being a positive experience for children who are living in care. This is because when teachers have full information about the unique needs of the child, this promotes a positive relationship between the teacher and pupil (Benbenishty et al., 2018).

Prioritising school stability is central to maintaining a positive school environment. Care-experienced young people participating on focus groups considered that more attention should be paid to the wishes of the child when decisions are being made about school changes, (Clemens et al., 2017).

The primary research highlighted the desire for and benefits of timely transfer of information when children move to a new school.

> *There is a time delay. When they first start in school it needs to be a good transition. If it goes right, then it's a good building block. If it doesn't then it takes a long time to get it back. We often have parents and social workers not tell us the full extent of the child's issues. There needs to be strong transitions into school especially when they have been bounced around. It's not the children's fault. [Educator]*

> *It took eight months to get to the bottom of the needs of [child's name], it took a long time to work out if information had been transferred to the local office and then to get the information given to us. [Educator]*

A collaborative, communicative relationship is needed between the school and the caregiver

The literature scan identified that positive relationships are vital to positive school experiences. Relationships between care-experienced children and adults such as school staff and other care professionals can be improved by the adults raising their expectations for care-experienced children and young people, providing more motivation and encouragement to engage in education and avoiding labelling (Mannay et al., 2017). The literature also suggests that greater focus on relationship-building and communication between individuals and agencies involved in the child's care is central to creating a sense of shared responsibility for academic progress and engagement (Finkelstein et al., 2002). The authors suggest that this could be achieved by co-locating care staff in schools, keeping better records of educational progress, and providing regular updates to caregivers.

An example from the primary research illustrates caregiver frustration when communication from school to home is considered inadequate.

> *Something will happen [at lunch time] and the children will come back [home] and say, 'at morning tea, I was in the sick bay for an hour' and no one had told us, no note, nothing. It's like why has no one told us… it could be anything… like if the child has asthma, it could be down to the cold. It could be he has the flu…but unless they tell us, how do we know to do anything about it. [Caregiver]*

Another example illustrates a caregiver who feels the school behaves in a discriminatory way towards children who are living in care.

> *Like one of our kids had a fall out with another child at school and they got into a scrape. The child reported it to the teacher and the teacher did not do anything about it and the child came back and told us… so why should I have to go back to the school to chase up? Why hasn't anything been done about it? That's playground bullying and they have not done anything about it. Even if the teacher does not think that it was bullying… at the very least the teacher could email and say 'hey just a heads up, your child was in a thing, we have dealt with it, and we don't think that there should be any further action' but you just get nothing. They [the teachers] just think, 'it's only that kid, that child in care again, always causing trouble' and so don't bother to tell the carer. [Caregiver]*

On the other hand, other caregivers noted the need for the home–school relationship to be actively fostered by the caregiver. They felt it was important that caregivers have a positive attitude towards the school and education, to immerse themselves into the school system, and keep in contact with the teacher. Caregiver-teacher communications were seen as two-way, with teachers telling caregivers about what was going on at school and in the classroom so that learning could be enhanced at home and caregivers telling teachers what is going on for the child outside of school so that learning in school can accommodate children's changing needs.

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