EDUCATION OF CHILDREN IN CARE IN IRELAND: AN EXPLORATORY STUDY

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Foreword

As Ombudsman for Children, my overall role, and statutory responsibility, is to promote and monitor the rights and welfare of children under 18 living in Ireland, without prejudice. Among my positive obligations in this regard – as provided for by the Ombudsman for Children Act, 2002 – are to undertake research on any matter relating to the rights and welfare of children and to promote awareness of how children's rights can be enforced.

In 2007, my Office published baseline research on the principal barriers facing children in Ireland in the achievement of their rights. Children in care were one of several groups of children identified as facing multiple obstacles to the enjoyment of their rights. This finding is borne out by, inter alia, complaints regarding the rights and welfare of children in care that have been received and investigated by my Office during the past nine years. Among the issues that have frequently arisen and that I have highlighted at national and international levels, including to the UN Committee on the Rights of the Child in 2006 and to the UN's Universal Periodic Review process in 2011, are: shortfalls in the provision of allocated social workers; deficits in care planning and failures to include children in the care planning process; difficulties experienced by children in care as regards accessing placements appropriate to their needs as well as therapeutic services, such as those addressing mental health needs or drug/alcohol difficulties; and inadequate provision of aftercare services.

As I have noted on previous occasions, including in my annual reports to the Oireachtas, it is my Office's experience that parents are the most tenacious advocates for children, with around 70% of complaints we receive each year being made by parents on behalf of their children. In the case of children in care, the profile of complainants is more diversified. Firstly, it is notable that of the relatively small percentage of complaints made to my Office by children themselves, the majority are brought by children in care either on their own initiative or with the support of an advocate. Furthermore, complaints made on behalf of children in care are often brought by foster carers and professionals, including social work and social care professionals. From this experience of dealing with complaints and my Office's engagement with the rights and welfare of children in care through my other statutory functions, I am aware of and appreciate the commitment of many carers and professionals to meeting the needs and safeguarding the best interests of children in their care.

Notwithstanding carers' and professionals' dedicated efforts in respect of children in their care and a number of positive developments in legislation and public policy which have taken place since my Office's establishment and which affect children in care more generally, it is evident that deficits in policy and provision remain that risk adversely affecting the lives of children in care in a variety of ways.

When the circumstances and experiences of children in care come under the spotlight, the focus is often on matters relating to their safety, protection and welfare. While work to identify, highlight and address shortfalls in this area is vital, we should be mindful not to overlook or neglect other significant areas of these children's lives. One such area is their education.

Taking into account the findings of the aforementioned baseline research and complaints we have dealt with, my Office commissioned the Economic and Social Research Institute and the Children's Research Centre, Trinity College to conduct research to strengthen our understanding of the educational experiences of children in care and identify ways in which the Irish education system, in conjunction with health and social services, can best support attendance, participation and attainment in education by children in care. The research comprised three strands: a literature review, which considered developments in policy and practice in Ireland and in other jurisdictions; interviews with policy-makers, practitioners and carers in Ireland; and direct engagement with children in care and young care leavers.

A key issue to emerge from this research is the scarcity of data regarding the educational experiences of children in care in Ireland. As the researchers note, the deficit is such that it is not possible to generate an adequate profile of attendance, participation and attainment rates in education among children in care or to compare them with the general population of children. A wider shortfall in comprehensive, systematic data collection on children in Ireland is an issue that the UN Committee on the Rights of the Child recommended the State should address following its examination in 2006 of Ireland's progress towards implementing its commitments under the UN Convention on the Rights of the Child. The specific deficit highlighted by this current study presents a serious impediment to evidence-informed policy-making and practice and needs to be addressed if effective policies, procedures and practices are to be put in place to mitigate the barriers to and in education that the literature indicates children in care can face. In addition to establishing a mechanism to support the systematic gathering of data in this area, it would also be worthwhile to conduct longitudinal research focused on enriching understanding of the educational experiences and pathways of children in care. Given that there are currently about 6,300 children in the care of the State – a relatively small number of children relative to the overall population of children living in Ireland – a study of this kind should be feasible. Moreover, the valuable viewpoints and insights shared by children in care, young care leavers, carers and professionals who participated in this current study indicate that a longitudinal study could benefit future policy-making and practice.

While noting that children in care can have positive experiences of and outcomes in education when they receive the requisite supports, this study underscores that children in care can face significant challenges to pursuing their education, including attitudinal barriers, placement breakdowns, inadequate care planning and review, and shortfalls and delays in assessment. When encountered, these challenges place children in care at higher risk of suspension, exclusion, absenteeism and early school leaving. The adverse consequences for children can be immediate and long-term.

In addition to highlighting the need for data collection and research, the study identifies several areas for action to improve the educational experiences of children in care. They include: the development and implementation on an inter-agency basis of a joint action plan focused on strengthening educational opportunities for children in care; the preparation of information and training materials that build capacity among carers and professionals to assist children in care with their education; the implementation of specific approaches and measures by both education and care professionals that can directly and indirectly support attendance, participation and attainment in education by children in care; and the mainstreaming of opportunities for children in care, and their carers, to express their views in the context of decision-making processes about issues that affect them, including care planning and review and matters concerning children's education.

Article 2 of the UN Convention on the Rights of the Child obliges State Parties to respect and ensure the rights set out in the Convention to every child, without discrimination. One of these rights is the right to education. I hope this study and the recommendations emerging from it will assist the Department of Education and Skills, the HSE and, in due course, the Child and Family Agency to collaborate in dedicated work to mitigate the barriers to and in education that children in care can face.

Emily Logan,
Ombudsman for Children

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Executive Summary

Background

Research from the English-speaking world consistently shows that children[1] leaving the care of the State[2] tend to have lower levels of educational attainment and higher rates of unemployment and social disadvantage than other young people. Recent research has argued that difficulties in schooling and education experienced by children living in care lie 'far more in the care and education systems than in the children themselves' (Jackson and McParlin, 2006: 91). Approximately 6,000 children are currently in the care of the State in Ireland, but little is known about their educational experiences and outcomes.

This report presents the results of an exploratory study on education for children in care in Ireland. The overarching aim of this study is to identify how the Irish education system can best support attendance, participation and attainment in education by children in care. In addressing this aim, the study addresses the following three research questions:

1.   Does a care background influence the educational experiences of children in care?

2.   What are the main factors in the social and academic spheres that impact on the educational experiences of children in care?

3.   What are the expectations of people working with children in care for the future lives of these children and young people (e.g. further education, training, and jobs/ employment)?

The study engages with and builds on existing knowledge in Ireland and other jurisdictions and seeks to identify practical solutions that could be implemented in order to improve educational access, participation and attainment among children in care in Ireland.

The research study comprised three phases. Phase 1 constituted an analysis of existing international and Irish research as well as an overview of four case-study jurisdictions (i.e., Victoria, Australia; Ontario, Canada; Scotland; and Northern Ireland) to highlight examples of good practice in addressing the educational needs of children in care. Phase 2 involved interviews with key stakeholders, including social workers, school principals and deputy-principals, foster parents, and policy-makers in relevant areas. Phase 3 involved interviews with children in care and those who had left the care system.

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1   The term 'child' is used throughout this report to refer to a person below 18 years of age.
2   The definition of children in the care of the State differs across different jurisdictions. In addition, there are inconsistencies in the use of the term in Ireland. For the purposes of this study, the report uses the term 'children in care'.

The main themes emerging from the three phases of the study were:

- **Care placements:** A stable and supportive environment (either foster home or residential care unit) can enhance children's and young people's motivation to do well at school and to have high aspirations. In contrast, multiple care placements may disrupt their schooling. Children in care may experience social and emotional difficulties that could hinder their full engagement in education, for example, challenging behaviour may be indicative of emotional difficulties.

- **Importance of school:** Schools provide much-needed stability in the lives of some children in care. A positive school climate and good relationships with teachers have a positive impact on students' school engagement. It is important to acknowledge barriers that exist for some children in care with regard to their education, for example, delays in and lack of needs assessment, problems with access to special education services.

- **Importance of inter-personal relationships:** Having good, close friends was important to the children interviewed; while they generally did not want it to be widely known that they were in care, they had discussed it with their close friends.

- **Inter-agency collaboration:** Joined up inter-agency work by dedicated individuals (including foster parents, carers, teachers, and other professionals) who place a high value on education is likely to have a positive impact on the educational experiences of children in care. Some children report a differential emphasis on education issues across care settings, with social workers less inclined to focus on education-related issues compared to issues around general well-being.

Implications for Policy and Practice

Arising from the findings of this study, the following measures are suggested for improving the educational experiences of children in care and those leaving the care system:

1. **Data collection and research:** A mechanism needs to be established for systematic gathering of data on the educational experiences of children in care in order to inform evidence-based policy making. In addition, longitudinal research would contribute to a deeper understanding of the experiences and pathways of young people in care.

2. **Inter-agency cooperation and coordination:** There needs to be an explicit public policy commitment to promoting all possible educational opportunities (including access, participation, and attainment in education) for children in care. A joint action plan for children in care needs to be developed by relevant government departments and other agencies with responsibilities relating to children in care.

3. **Training and information dissemination:** Relevant departments/agencies should collaborate on preparing training materials for key stakeholders – including social workers, carers, foster parents, teachers and school management – to help them deal with educational issues that can arise for children in care. Government policy documentation regarding quality of care and care outcomes for children in care should contain explicit references to educational outcomes.

4. **Strengthening supports by the care and education systems:** Stability and continuity of care placements should be enhanced, particularly at key moments in the education career of children in care (for example, preparation for State examinations). At school-level, whole school approaches and inclusive education should be adopted for young people in care (and other high-need groups). A flexible approach to education provision should be adopted for children from care backgrounds, reflecting an understanding that it is possible for all children in care to achieve educational success, and, furthermore, while it may take some longer than others to progress through the system, all can do so under suitable conditions.

5. **Hearing the views of children in care and carers:** Children in care, and their carers, need to be given opportunities to engage in decision-making processes and to express their views on matters affecting them, including issues relating to children's education and future pathways, and in the context of care planning and review. Children in care, and their carers, also require clear information about the education and training options available to children in the education system.

Chapter One

1.1   Introduction

Internationally, a relatively small minority of children are placed in foster or residential care every year. The reasons they are placed in care vary, but the decision is generally only taken if the child is orphaned or abandoned, or if the family is not in a position to provide adequate care and protection for the child. Many children in care may encounter damaging life-experiences and suffer often serious disruptions in the environment of their natural family and/or in their care placement. It is important to note that, as with all children, those in care do not constitute a homogenous group and have individual aspirations and needs.

At present, there are over 6,000 children in care in Ireland. The majority are in foster care (including family/relative foster care) and a smaller number are in residential care or special care.[3] In recent years, there has been an upward trend in the number of District Court orders granted to the Health Services Executive (HSE) allowing the agency take children into its care (from 5,727 at the end of 2010 to 6,282 in May 2012).

Although there is an expanding international literature on, for example, general characteristics, family background, behavioural and mental health issues among children in care, less is known about their experiences in the education system. It is only in recent years that researchers, policy-makers and service providers have begun to consider how children living in care fare in the education system (Courtney, Roderick, Smithgall, Gladden and Nagaok, 2004a). Compared to the general population, children in care are more likely to experience educational difficulties and tend to have poorer educational outcomes; these trends occur in a number of countries (Melbye and Husted, 2009; Andersen, 2010). Some international studies have shown that children in care present challenging behaviour, arising from one or more aspects of their experience in school, which ultimately may impact negatively on educational outcomes for them (Trout et al., 2008). This may result in various disciplinary measures, including the most extreme, school exclusions, which can exacerbate problems by adversely affecting the educational outcomes of the student. While several studies have highlighted barriers to education for these young people, others note that some young people in care are able to break the cycle of disadvantage and experience success in education and beyond (Jackson and Simon, 2005); these authors note the success of these individuals is often down to their own personal resilience. Nevertheless, children's resilience needs to be cultivated and supported by carers, social workers, and teachers at school. It is not possible to draw

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3   Figures produced by Health Information Quality Authority (HIQA) in 2012 indicate that the Health Service Executive (HSE) runs 65 residential care centres, catering for over 400 placements.

definite conclusions from the literature about the impact of living in care on educational outcomes as there is a dearth of research focusing on the subject-matter, sample sizes are often small, and research drawing on information collected from children themselves remains sparse. In order to provide a fuller picture, longitudinal and retrospective research is needed to provide evidence of outcomes. This research should include the tracking of children from the point of entry into care through to exit and at key milestones afterwards (Clarke and Eustace, 2010).

In Ireland, very little research has been conducted in this area. Of the few existing studies that have been carried out, findings show that children in long-term foster care are likely to have experienced a range of disadvantages in their lives, which may impact on their educational progress and performance (Daly and Gilligan, 2005; Daly and Gilligan, 2010). Much of the research in Ireland, and elsewhere, has tended to focus on wider social care issues, rather than on factors specific to children's access to and participation in education. In Ireland, this gap in existing research may be attributed in part to the lack of systematically collected data on access to, participation, and attainment in education by children in care, as well as potential difficulties involved in obtaining consent to talk to them (Daly and Gilligan, 2005).

Research published by the Ombudsman for Children's Office (OCO) in 2007 found that children in care in Ireland face multiple barriers to the realisation of their rights and experience problems regarding education (Kilkelly, 2007: 21). Taking account of these findings and recognising the need to gather more information on the educational experiences of children in care and on how the education system, in conjunction with the social care system, might best support attendance, participation, and attainment in education by children in care, the OCO commissioned this research project. Against the background of limited data available on children in care, a small-scale exploratory study was carried out by a joint research team at the Economic and Social Research Institute (ESRI) and Trinity College Dublin. The study set out to address some of the gaps in research regarding the educational experiences of children living in care (both in foster families and in residential units) by drawing on existing research as well as information collected from key stakeholders and children in care in Ireland.

1.2 Aims and objectives

The overall aim of this exploratory study is to give preliminary insights into how the education system could best support attendance, participation, and attainment in education by children in care in Ireland. The research examines policies, practices, and any special initiatives operating within the education system and between the education

and health/social care systems that can contribute effectively to meeting the educational needs of children in care. The specific objectives of the study are:

- To examine the issues around education for children in care from an educational perspective and, where necessary, from a social care perspective;

- To engage with and build on existing knowledge and research in Ireland and elsewhere;

- To explore and identify concrete, practicable, cost-effective measures to improve provision for the educational support of young people in care.

1.3. Research questions

It is not within the scope of this research report to explore the marginal effects of being in care over and above other background characteristics. The central research questions identified by the research team to guide the research are:

· Does a care background influence the educational experiences of children in care?

· What are the main settling-in difficulties at school for children from a care background?

· What are the main factors in the social sphere that impact on the educational experiences of children in care?

· What are the main factors in the academic sphere that impact on the educational experiences of children in care?

· What are the expectations of people working with children in care for the future lives of these children and young people (e.g. further education, training, and jobs/ employment)?

· What recommendations can be made for improving the educational experiences of children in care?

1.4 Methodological approach

The research adopted an exploratory approach. Exploratory research is generally used when seeking insights into the general nature of a problem; the method is highly flexible, unstructured and qualitative, designed to uncover basic viewpoints, perceptions and attitudes (Schutt, 1999; Vogt, 1999). Exploratory studies often rely on a combination of secondary research (for example, review of existing research) and primary research

(for example, qualitative semi-structured interviews). In the context of the present study, exploratory research is a first step in providing valuable insights into educational experiences of children living in care, as little is known about their experiences in the Irish educational system.

1.5 Data sources and methodology

In order to provide a multifaceted view of the educational needs of children in care, the study drew on information from a range of sources: existing international and Irish research; case studies of four jurisdictions, focussing on provision for educational support for children in care; and in-depth interviews with key stakeholders as well as children in the care and young care leavers.[4] Data from the various sources were triangulated to ensure that the findings are rich, robust, comprehensive and well-developed (Patton, 1999).

1.5.1 Secondary research

Literature review

A preliminary review of national and international literature focussed on educational experiences and attainment of children in care. The main themes arising within the existing literature indicated that:

1. Stability, of both care and school placements, is one of the main factors ensuring positive student outcomes in terms of educational attainment and future pathways.

2. Support from schools and teachers can improve the experience of a child in care.

3. Joined up inter-agency work by dedicated individuals who place high value on education is likely to have a positive impact on the educational experiences of children in care.

Overviews of four jurisdictions

In order to identify examples of existing good practice as regards education provision for children in care, an overview of relevant developments in four different jurisdictions was undertaken. The jurisdictions examined were Victoria, Australia; Ontario, Canada; Scotland and Northern Ireland. These jurisdictions were selected because they provide relevant examples of a range of high level policy approaches and special initiatives and projects that support the access, participation, and attainment in education by children in care.

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4   A care leaver is a young person at the age of 18 leaving the State care system.

1.5.2 Primary research

Advisory Group meeting

In January 2011, an Advisory Group meeting was held in the ESRI to consult with stakeholders within education and health sectors with direct contact with children in care (including school principals/deputy principals; social workers; foster parents; managers of residential care units; and representatives of relevant government departments, statutory agencies, and NGOs). The aims of the meeting were to provide a forum for discussing the main issues regarding barriers to education of young people in care, to select key stakeholders for interviewing, and to inform the topic guide of the subsequent interviews.

Key informants were drawn from members of the Advisory Group meeting and a snowball sample approach was used to identify additional respondents. Snowball sampling is a form of purposive sampling whereby the sample is gradually collected by asking a participant to suggest someone else who might be appropriate for the study and willing to engage. Snowball samples are particularly useful and frequently employed in reaching hard-to-track populations. Although the snowball sampling method has limits with regard to generalisability, it was useful in this instance for identifying specific individuals who have direct contact with children in care and/or have specialist knowledge and expertise in the field.[5] The snowball approach was also useful for identifying areas for further research involving a more representative sample.

Interviews with key stakeholders

The next stage of the study saw the compilation of letters containing detailed descriptions of the aims of the study and the procedures involved. The letters were sent to the prospective interviewees. In total, 19 key stakeholders were selected and interviewed, mostly on a one-to-one basis (and one focus group).[6] The interviewees were made up of two broad groups: those with first-hand experience of working with children in care (i.e., social workers, school principals and deputy-principals, and foster parents), and those who have a more general involvement and/or interest in policy and provision as regards education for children in care (i.e., individuals working in relevant Government departments, statutory agencies, and NGOs) (Table 1.1).

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5 It is important to note that their responses represent their individual views and cannot necessarily be taken to reflect the views of their respective organisations.

6 This was the preferred arrangement of the organisation the representatives of which were interviewed for this study.

Table 1.1	Key stakeholders and organisations represented by the study
Stakeholder	**Organisation/Role**
1	Post-Primary school – Deputy Principal
2	Fostering Social Worker
3	Care Advocacy Group worker
4	Youthreach Centre Manager
5	HSE Regional Manager
6	Department of Children and Youth Affairs
7	Barnardos
8	National Education Welfare Board (NEWB) (1)
9	Special school – Principal
10	HSE Dublin West – Child Care Manager
11	Primary school (national school in Dublin) – Principal
12	HSE Eastern Health Board
13	Health Information and Quality Authority (HIQA)
14	National Education Welfare Board (NEWB) (2)
15	Foster parent (1)
16	Foster parent (2)
17	Department of Education and Skills (1)
18	Department of Education and Skills (2)
19	Department of Education and Skills (3)

The interviewees were assured that their participation was voluntary and the information they provided would be treated as confidential and would be used for research purposes only. The purpose of the interviews was to explore the views of the stakeholders with regard to the issues surrounding education policy and provision for children in care. The interviews focused on the following topics:

- Involvement of the key informant with children in care

- Profile of children in residential and foster care in Ireland

- Settling-in experiences at school

- Social integration at school (interaction with peers and teachers)

- Academic issues (attainment, attendance, potential difficulties)

- Support for children in care

- Educational progression

- Early school-leaving

- Inter-agency co-operation

- Examples of good practice in schools

- Suggestions for moving forward to ensure that children in care reach their full potential in education [7]

The interviews lasted approximately 60 minutes each and were digitally recorded. The voice files were transcribed and analysed to identify issues highlighted by the individuals. Due to the diversity of the stakeholders, the interviews allowed for exploration of a range of issues that can arise for children in care in relation to education, including current provision and supports available, gaps in existing data, current degree of collaboration, cooperation, and communications among relevant agencies, and recommendations for improvements in addressing the educational needs of children in care. The interviews provided insights into issues that may potentially hamper or, alternatively, support education for children in care. They focused on key issues, such as conducting educational needs assessments for children entering care and implementing Individual Education Plans for children in care. They investigated early school-leaving and other difficulties that can arise for this group of children and highlighted possible solutions and initiatives to encourage children in care to remain in the education system. They also explored stakeholder recommendations for realistic measures that could be implemented in the Irish context to promote and support access, participation, and attainment in education by children in care. Analysis of the data helped identify areas of policy and provision that require an inter-agency approach between the education and social care systems.

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7   It is important to note that academic attainment is not the only way to measure success; other forms of achievement (including sport, music, and various other skills) are equally important.

Interviewing children in care and young care leavers

Interviews with children living in care and young care-leavers formed important elements of the study. Conducting research with children in care can be a complex process, particularly in terms of achieving access to potential participants. In many cases, several different individuals, including biological parents, foster parents and social workers, can play a role in facilitating access to children in care and giving consent to their participation in research.

In this study, the researchers were not involved in the interviewee selection/ recruitment process. The participants under 18 years of age were identified by HSE regional managers and HSE social workers; care-leavers over 18 years of age were identified by staff working with Empowering People in Care (EPIC) (also members of the Advisory Group). The rationale behind this selection/recruitment approach relates to child protection guidelines, since the children under 18 years of age are in the care of HSE.

As the study aimed to highlight issues relevant to children of different age groups in care, a quota sampling technique was deemed most suitable. This technique is usually used to ensure the inclusion of particular segments of the population. The quota sample contained 15 children who live or have lived in care (Table 1.2). This small number of individuals is best described as a non-probability (non-representative) sample.

Table 1.2 Descriptive details of the children and young people who participated in interviews

Pseudonym	Education sector	Age	Gender	Type of care	Location	Contact
Tommy	Primary	>10	M	General foster care	rural	HSE
Mary	Primary	<10	F	General foster care	urban	HSE
Susan	Primary	<10	F	Relative foster care	rural	HSE
Nadine	Second level	<18	F	Relative foster care	urban	HSE
Annie	Second level	<18	F	Residential care	urban	HSE
Eva	Second level	<18	F	Residential care	urban	HSE
Lorcan	Second level	<18	M	Residential care	urban	HSE
Daniel	Second level	<18	M	Residential care	urban	HSE
Martin	Second level	<18	M	Residential care	urban	HSE
Philip	Care leaver	>20	M	Previously in residential care	urban	EPIC
Richard	Care leaver	>20	M	Previously in foster care	urban	EPIC
Robert	Care leaver	>20	M	Previously in foster care	urban	EPIC
Lindsay	Care leaver	>20	F	Previously in residential care	urban	EPIC
Margaret	Care leaver	>20	F	Previously in foster care	urban	EPIC
Oisín	Care leaver	>20	M	Previously in foster care	urban	Social worker

A list of the selected potential participants was drawn up and letters were sent to them outlining the purpose of the research, giving assurances that the interviews would be confidential and anonymous, and requesting their voluntary participation. The participants were then contacted by telephone to arrange interview appointments. Ten in-depth face-to-face interviews were conducted with individual children in care (attending primary and post-primary schools) and young people who had left the care system; in addition, one focus group interview was conducted with care-leavers. The interviews were conducted during May and June 2011. For conducting interviews with younger children, the interviewers visited their homes across the country. Five residential care participants were interviewed in their residential home. Interviews with care-leavers took place in the EPIC centre, which is located in Dublin.

The participants were almost evenly split, eight male and seven female, and ranged in age from about 10 years to 'in their 20s'. Information collected enabled the researchers to identify the types of care (foster or residential) the participants were receiving/ had received. They were nearly all living in urban areas – two lived in rural areas. The participants spanned three education levels: primary, post-primary, and care-leavers with various levels of educational attainment who were not in the formal education system at the time the study took place. This diversity provided scope to explore the issues that exist for children in care at each level of their formal education and later on.

The interviews lasted approximately 45 minutes each and were digitally recorded. The voice files were transcribed; interviewees were assigned pseudonyms, and the written transcripts were then analysed using NVivo software. The responses were coded under specific themes identified from the reviewed literature and from the interviews themselves. This approach enabled identification of respondents' convergent or divergent views across a range of areas discussed during the interviews and helped to identify common issues that the interviewees considered important.

The topics covered in the interviews with children in care included the following:

- General experience of being in care and its impact on education

- Experiences of settling into a new school

- Relationships with other students

- Relationships with teachers

- Subjects they find interesting / difficult

- Choice of subjects / types of Leaving Certificate courses

- Suggestions for improvement of the educational experience

- Aspirations in relation to education (examinations, grades, further training/third-level education)

- Plans for the future (further education / job / career)

1.6   Ethics issues and confidentiality

The rationale for the study and the proposed procedures were approved by the ESRI Research Ethics Committee. The ESRI/TCD research team was responsible for the overall study design, analysis of the qualitative data and the preparation of the report. It was agreed among the research team from the outset that identifiable participant information would not be included in the text analysis. Additionally, the ESRI/TCD research team agreed they would contact the relevant authorities if any form of disclosure from children or young people was made during the interviewing process. The interviewers were vetted by An Garda Síochána in accordance with their procedures. Consent for children to participate in the study was sought from the children themselves as well as their foster parents/carers. The purposes of the research were explained to the potential participants. The interviewees were assured that the information gathered would be anonymised and the following issues were explained to them:

- No individual will be identified.

- The aim is to identify general themes arising from the interviews.

- The participant can refuse answering questions and is free to terminate the interview at any point.

- The information will be used for research purposes only.

- The data gathered will be stored on a secure network in the offices of the ESRI and will not be taken outside the premises.

- Access to the data is limited to the researchers working on the project.

1.7   Limitations of the study

The study has some limitations, particularly in terms of the selection and recruitment of children for interview. The researchers relied on the HSE to identify children under the age of 18 years and to obtain their consent to participate in the study. Hence, the information provided in the report may not be fully representative of the experiences of all children currently in care. Nevertheless, despite these limitations, the information collected complements earlier research in the Irish context and addresses a gap in research by highlighting issues relating to education from the perspectives of children in care themselves.

1.8   Structure of the report

This report is structured as follows:

1. An overview of international literature and research about education of children in care;

2. Description of legislation, regulations, and established standards relevant to education for children in care in Ireland;

3. Examples of policies, protocols, procedures, practices, and special initiatives in four case-study jurisdictions that promote and support access to, participation, and attainment in education by children in care;

4. A record of research participants' perspectives on: a) current experiences in the Irish educational system; and b) prospective improvements/solutions;

5. Recommendations for concrete, practicable, cost-effective measures that can be implemented within the education system (including any measures that can be implemented most effectively through joint initiatives between education and health/ social care) to support access, participation and attainment in education by children living in care in Ireland.

Chapter Two
Overview of Policy in Ireland and Review of the Literature

2.1 Introduction

For many children in care, school may be one of the most constant factors in their lives and a place where they can feel like 'everybody else'. Schools also have the potential to provide an additional place where they can develop skills and self-confidence, receive praise and encouragement, make friends, achieve success, and obtain educational qualifications. Successful educational attainment is a highly significant gateway to future employment and study opportunities and may be the most important means of avoiding the patterns of family disadvantage that led to entering public care (Jackson, 1989). Hence, for many children in care, education can be a form of protection and a critical influence on their life-course trajectories (Jackson and Cameron, 2010).

In the past, very little international research on care systems focused specifically on the educational experiences of children in care. Over the last decade, however, this has begun to change and researchers and service providers have started to examine how children living in care fare in education systems (Courtney et al., 2004a). Most of these studies highlight the potential problems that can exist for many children in care and that can result in educational disadvantage and negative outcomes (Jackson and Cameron, 2010; Andersen, 2010; Trout et al., 2008). Only in recent years, researchers in Ireland have started to examine the disadvantages that children in care can face and the potential impact of these challenges on their educational progress and performance (Daly and Gilligan, 2005).

2.2 Definitions and terminology

One of the most striking aspects of the international literature on children in care is the difficulty in defining 'care' settings and the various terminology used across different national contexts. In the United Kingdom, for example, the term 'in care' has come to be regarded as pejorative and stigmatising and is increasingly being replaced by the term 'looked after'. The term 'looked after children' (LACs) refers to children who are in the care of local authorities or who are looked after by foster carers in the community or in children's homes. In the United States, the care system is referred to as 'out-of-home care' and the term 'corporate parenting' has also been introduced.

Care arrangements vary in different countries. For the purpose of this report, the term 'in care' is used and we differentiate between children in foster care (including family/relative foster care) and residential care. The term 'child' is used in this report to refer to children and young people below 18 years of age.

2.3   Profile of children in care

Under the Child Care Act, 1991, children in Ireland enter the care system either with the consent of their parents or on the legal authorisation of the courts. In circumstances where a child has been abandoned or orphaned or where his/her parents are unable to care for their child for one or more reasons and agree to their child being taken into the care of the HSE, the child is said to be in voluntary care. A child may also be placed in care on foot of an application by the HSE to the courts for a care order. There are different types of care orders, which aim to take account of the different circumstances that can lead to a child becoming the subject of a care order, children's different care needs, and different types of care setting and provision. The 1991 Act provides that the State has a statutory obligation to provide alternative care to children up to the age of 18. The Act further provides that the State may assist a young person who has reached 18 years with aftercare supports, including so that s/he can complete his/her education, but places no statutory obligation on it to do so.

There are currently over 6,000 children in care in Ireland and, as noted at 1.1, there has been an upward trend in recent years in the number of District Court orders permitting the HSE to take children into its care (from 5,727 at the end of 2010 to 6,282 in May 2012). Ninety per cent of children in care are in foster care (including family/relative foster care) and a minority lives in residential, high support, or secure care. In line with national policy to minimise the number of children below 12 years in residential care, most of those living in residential care range between 12 and 17 years of age.[8]

At present in Ireland – and in contrast to policy and practice in the case-study jurisdictions examined for the purposes of this study – there is a significant deficit in data relating specifically to children in care. This deficit is indicative of a wider shortfall in systematic, comprehensive data on children that has been a focus of concern, not only in Ireland, but also internationally. Following examination in 2006 of Ireland's progress towards implementing the UN Convention on the Rights of Child, the UN Committee on the Rights of the Child recommended that the Irish State 'take further measures, including through strengthening the role of the Central Statistics Office and other governmental departments and agencies, to develop a systematic and comprehensive collection of disaggregated data […] which should be used for the creation, implementation and monitoring of policies and programmes for children' (2006: 4, paragraphs 16 and 17).

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8   In its 2008 National Children in Care Inspection Report, the HIQA indicated that 91 per cent of children below 18 years living in care on 24 October 2008 were aged 12 and over. It also found that more boys than girls were living in residential care.

As a result of the lack of relevant data, it is not possible to generate an adequate profile of, among other things, attendance, participation, and attainment rates in education among children in care or to compare them with the general population of children.[9] While the HSE has begun to publish basic statistics on the number of children in care between 6 and 16 years of age who are in full-time education[10], we do not know, for example, how many school placements children in care experience on average or why they change schools; the numbers of children in care who complete different stages in formal education; the numbers of children in care who obtain formal second-level qualifications; the numbers of children in care who continue through to third-level education; rates of absenteeism and early school-leaving, as well as rates of suspension and exclusion among children in care; the numbers of children in care with special educational needs and/or behavioural difficulties; and so on.

In addition to presenting challenges for research in this area, the data deficit also impedes the development of evidence-informed policy-making and practice that can address specific barriers to and in education that face many children in care. Consequently, it is difficult to put appropriate supports in place. As such, this data deficit is a serious shortfall that needs to be addressed, including in the context of work to tackle the broader deficit in data relating to children's education that has been highlighted in the National Strategy for Research and Data in Children's Lives, 2011-2016 (DCYA, 2011: 26).

2.4 International standards and legislative framework for Ireland's care system

Ireland's legal framework in respect of children in care broadly reflects, while not being fully aligned with, international children's rights standards. Under the UN Convention on the Rights of the Child (CRC), which Ireland ratified in 1992, education is recognised as a basic human right of all children. Article 28(1) provides that, in recognising and working towards the progressive realisation of children's right to education, State Parties to the Convention must:

- make primary education compulsory and available free to all;

- encourage the development of different forms of education, including general and vocational education; make them available and accessible to every children; and take appropriate measures such as the introduction of free education and offering financial assistance in cases of need;

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9   Enquiries were made to the National Education Welfare Board (NEWB), Educational Research Centre (ERC) and Department of Education and Skills (DES). All responses were negative, confirming that the data does not treat children in care separately from all children.

10 Data on the number of children in care between 6 and 16 years in full-time education is included intermittently in the HSE's monthly performance reports (supplementary reports) from June 2011. The most recent data in this regard is available in the HSE's Supplementary Report for December 2012 (HSE, 2012:28).

- make higher education accessible to all, on the basis of capacity, by every appropriate means;

- take measures to encourage regular attendance at schools and the reduction of drop-out rates.

Implementation of these and other rights set out in the Convention are underpinned by the following general principles: The rights set out in the Convention are for every child, without discrimination (Article 2); the best interests of the child must be a primary consideration in all actions and decisions affecting children (Article 3); and children have the right to express their views in all matters affecting them and to have their views taken into account, in accordance with their age and maturity (Article 12). Article 4 of the CRC places an explicit obligation on the State regarding the realisation of children's rights and Article 20 establishes a specific obligation on the State to provide special protection and assistance and alternative care for children deprived of their family environment.[11]

The Irish Constitution also makes provision for children's right to education. Article 42.3.2 states that the State 'shall … require … that the children receive a certain minimum education, moral, intellectual and social' and Article 42.4 sets out that 'the State shall provide for free primary education'. An amendment to strengthen children's rights protection in the Constitution was passed by the people in a referendum held in November 2012. The new Article endorsed through this referendum can be seen to enhance the visibility of children's rights in the Constitution. Providing that the State 'recognises and affirms the natural and imprescriptible rights of all children and shall, as far as practicable, by its laws protect and vindicate those rights,' Article 42A contains several elements of relevance to children who may be placed in the care of the State, including that any intervention by the State in this regard will have 'due regard for the natural and imprescriptible rights of the child' and that provision will be made in law to ensure that children's best interests are 'the paramount consideration' and that their views are ascertained in relevant proceedings.

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11 In this regard it is worth noting provisions in the UN Guidelines for the Alternative Care of Children (2009), which were adopted by the UN General Assembly in 2010 and are intended as 'a set of orientations to help to inform policy and practice' in this area. In respect of education, the Guidelines state, inter alia, that children in alternative care 'should have access to formal, non-formal and vocational education in accordance with their rights, to the maximum extent possible in educational facilities in the local community' (paragraph 85).

The principal piece of legislation that specifically concerns children in care is the Child Care Act, 1991, as amended. Under the 1991 Act, children in care are the responsibility of the HSE. Broadly reflecting two core principles of the CRC, the 1991 Act provides that in the performance of its function to promote the welfare of children not receiving adequate care and protection, the HSE will 'regard the welfare of the child as the first and paramount consideration' (3(2)(b)(i)) and, 'in so far as is practicable, give due consideration, having regard to his age and understanding, to the wishes of the child' (3(2)(b)(ii)). At the time of writing, proposals are in train for the transfer of statutory responsibility for children in care from the HSE Children and Family Services to a new Child and Family Support Agency, which will come under the aegis of the Department of Children and Youth Affairs.[12]

Rights-based principles and their promotion also inform the Ombudsman for Children Act, 2002. The Ombudsman for Children's overall statutory mandate is to promote and monitor the rights and welfare of children. In fulfilling her mandate to accept and investigate complaints made by or on behalf of children, the Ombudsman for Children must 'have regard to the best interests of the children concerned' and 'in so far as practicable, given due consideration … to his or her wishes' (Section 6(2)). In addition, under Section 7 of the 2002 Act, the OCO has positive obligations to encourage public bodies to develop policies, practices and procedures that promote children's rights; to raise awareness of children's rights, including the principles and provisions of the CRC; and to consult with children and highlight issues relating to their rights and welfare that are of concern to children themselves.

Other legislation of direct relevance to this research study on education for children in care includes the Education Act, 1998, the Education (Welfare) Act, 2000, and the Education for Persons with Special Educational Needs (EPSEN) Act, 2004. Among the express objectives of the Education Act are to give practical effect to the constitutional rights of children as they relate to education (6(a)) and to promote equality of access to and participation in education and the means whereby students may benefit from education (6(c)).

The Education (Welfare) Act, 2000 has a more specific focus on providing for 'the entitlement of every child in the State to a certain minimum education' and, with that, on promoting school attendance by children. The Act provided for the establishment of

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12 At the time of writing, the forthcoming Child and Family Support Agency Bill is among those listed in Section A of the Government Programme of Legislation.

the National Education Welfare Board (NEWB) and its statutory mandate to support, monitor, advise, and review matters relating to children's school attendance.

The Education for Persons with Special Educational Needs (EPSEN) Act, 2004 was passed with the express purpose of making 'further provision' for the education of people with special educational needs and 'whenever possible, within an inclusive environment'. As the OCO highlighted in its submission to the UN Universal Periodic Review process in 2011, the 2004 Act has not been fully implemented, including the provisions relating to accessing individual education plans. Access to supports for children with special needs continues to be one of the largest categories of education-related complaints received by the OCO (2011: paragraph 23).

Also relevant to this study is The Health Act, 2007, which provides for the independent inspection by the Health Information and Quality Authority (HIQA) of all residential children's services, foster care services, as well as residential and respite services for children with disabilities. It is important to note that certain sections of the Heath Act, 2007 have not yet been commenced, meaning that, inter alia, legislative and other steps are still required to allow the HIQA to carry out independent inspections of all residential and foster care services for children (OCO, 2011: paragraph 8).

2.5. Responsibilities for education of children in care in Ireland

As noted, at the time of writing, statutory responsibility for children in care remains with the HSE. Underpinned by the 1991 Act, the 1995 Child Care (Placement of Children in Residential Care) Regulations and the 1995 Child Care (Placement of Children in Foster Care) Regulations elaborate on the HSE's responsibilities, including as regards supporting education among children in care. Specifically, the Regulations stipulate that the HSE is required to maintain a case record for each child in residential/foster care that includes reports on his/her progress at school, where applicable (Sections 22(2)(d) and 13(2)(f), respectively), and that the HSE must, in the case of a child attending school, consider the child's latest school report in the context and as part of its review of the child's placement (Sections 25(5)(d) and 18(5)(c), respectively).

The National Standards for Foster Care (2003) and the National Standards for Children's Residential Centres (2001) (see Appendices 1 and 1a) set out in more detail and through dedicated standards on education the roles and responsibilities of social work and social care professionals, among others, in relation to the provision of educational supports for children in care. The National Standards foresee a high priority being given to education for children in care by social workers, parents, and/or foster parents in the case of

children in foster care, and/or residential centre management in the case of children in residential care. Indeed, both sets of Standards can be seen to anticipate responsibilities being defined, taken and shared appropriately among carers and social work, social care and education professionals, with a view to ensuring that children's access, participation and attainment in education is valued, supported, and monitored through liaison and consultation, care planning and review, and assessment.

The Standards also make explicit reference to the roles of schools and school staff. In respect of children in foster care, the relevant standard (Standard 12) envisages schools being involved in promoting continuity and quality of education for this group of children; school personnel participating in considering and assessing their educational needs and progress; and schools being given information, as required and on a confidential basis, to enable them to offer support to children in foster care and to respond if concerns regarding school arise. Regarding children in residential care, the relevant standard (Standard 8.4) identifies schools as having an active role to play in ensuring that an educational assessment is carried out for any child where questions arise in relation to 'ability, specific learning difficulties, under achievement or special talents'.

At the level of national education policy, children in care are not visible, as such. While the DES necessarily has a role in relation to education for children in care in Ireland – insofar as it is responsible for national education policy in respect of the general population of school-going children – children in care are not the focus of any specific policy initiatives within the DES. Nor are children in care the focus of targeted initiatives in the context of programmes and schemes operated by and support services available to children in general through the NEWB, the National Council for Special Education (NCSE), or the National Educational Psychological Service (NEPS).

There is some evidence of good practice where the education of children in care is support. For example, the National Children in Care Inspection Report, 2009 documents the findings of a series of nationwide inspections of 38 care settings for children conducted by the HIQA in October 2008. In brief, the HIQA found that the majority of children in residential care centres attended school regularly, were provided with additional tutorial support as needed, and received help and encouragement with their education from staff members in the centres.[13] However, no comprehensive, composite picture is available to show the extent to which the standards on education as set out in the National Standards for Foster Care and for Children's Residential Centres are

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13 HIQA, National Children in Care Inspection Report 2008, p.55.

being met in practice. Moreover, there are known deficits in relevant areas of policy and provision that have yet to be fully addressed. For example, while every child placed in the care of the HSE is meant to have an allocated social worker who is responsible for different aspects of his/her care, shortfalls within in the social work system, including recognised social work staff shortages within the area of child and family services,[14] mean that some children in care do not have an allocated social worker. While this situation may be exceptional, representing fewer than 10 per cent of all cases, it nevertheless directly affects hundreds of children in care.[15] Similarly, regulations and standards stipulate that every child in care should have a written care plan that is reviewed regularly. Yet, figures indicate that this requirement is not being fulfilled in respect of hundreds of children as almost 10 per cent of children in care do not have such a plan.[16] As the OCO has highlighted at national and international levels, lack of an allocated social worker and deficits in care planning, together with difficulties accessing care placements appropriate to need and therapeutic services, such as those addressing mental health needs and drug/ alcohol difficulties, are among the most frequently examined complaints brought by children in care to the OCO.[17]

A further area of concern relates to aftercare. Under the 1991 Act, the HSE may provide aftercare supports to young people leaving care, including arranging for the completion of their education and contributing towards their maintenance while they are completing their education (Section 45(2)(b)). However, as noted, there is no statutory obligation on the HSE to provide aftercare supports, resulting in wide variations in practice and provision across the State. Accordingly, although the National Standards on Foster Care and Children's Residential Centres explicitly state that young people approaching school leaving age should be actively and strongly 'encouraged to participate in third level education or vocational training programmes as appropriate to their abilities, interests and aspirations' (Sections 12(8) and 8(6), respectively), provision for young people's continuing and further education is inconsistent. This situation has been highlighted, *inter alia*, by the Ombudsman for Children; for example, in her 2006 annual report to the Oireachtas, the Ombudsman for Children summarised the findings of an examination by the OCO into the case of a 17 year old young person in care:

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14 Dáil Debates, 21 June 2012, Deputy Jan O'Sullivan and Deputy Charlie McConalogue.

15 Dáil Debates, 21 June 2012, Deputy Jan O'Sullivan and Deputy Charlie McConalogue.

16 HSE Monthly Performance Report on NSP (December 2011: 30).

17 See Annual Reports of the Ombudsman for Children to the Houses of the Oireachtas (www.oco.ie) and the OCO's Submission for the 12th Session of the Working Group on Universal Periodic Review (OCO, March 2011: paragraph 11).

The absence of any statutory right to support for young people after they leave the formal care system has been raised on several occasions by the OCO, including in its 2006 Report to the UN Committee on the Rights of the Child (2006b: 21), which subsequently recommended that the State 'strengthen its efforts to ensure and provide for follow-up and after-care to young persons leaving care'. [19] Given the known adverse effects that the continuing deficits in aftercare provision can have on young people leaving care, the lack of progress in establishing a statutory entitlement to aftercare is a matter of ongoing concern to the OCO and to other agencies. They include Empowering People in Care (EPIC), which has emphasised how young people leaving care need access to a range of supports from the State, including finance, accommodation, training and education, and practical skills for independent living; and Barnardos, which has described the current availability of aftercare services from the HSE as 'patchy, inconsistent and inadequate' (2012: 2) and noted that many young people leaving care are less likely than other young people to have a strong network of support.

As noted, following enactment of the forthcoming Child and Family Support Agency Bill statutory responsibility for children in care and, accordingly, for addressing these and other deficits in policy and provision affecting them, will transfer from HSE Children and Family Services to a new Child and Family Support Agency. The new Agency will come under the aegis of the Department of Children and Youth Affairs and will, inter

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18 See also Office of the Minister for Children and Youth Affairs (2009), A Report of the Commission to Inquire into Child Abuse – Implementation Plan. The Stationery Office (p.48).

19 UN Committee on the Rights of the Child, Concluding Observations on Ireland's Second Periodic Report, CRC/C/IRL/CO/2, September 2006, paragraph 33(b).

alia, incorporate the functions of the NEWB. This reform can be situated in the context of wider developments in policy and provision affecting children, which have been initiated in recent years with the express intent of strengthening the degree of priority given to children in national policy-making and providing for a more coordinated, integrated approach to policy and service delivery. More recent developments in this regard include the appointment of a full cabinet Minister for Children and Youth Affairs, the corresponding establishment of a separate Department of Children and Youth Affairs, the holding of a referendum to insert a new article relating to children into the Constitution, and ongoing work to develop a Children and Young People's Policy Framework as a successor to the National Children's Strategy. While it is premature to assess the impact of these and related developments concerning child protection and welfare (such as ongoing work to place the Children First National Guidelines for the Protection and Welfare of Children on a statutory footing[20] and HIQA's publication in July 2012 of new National Standards for the Protection and Welfare of Children), there is an expectation that the combined effect of these reforms should benefit all children, including children in care.

2.6   Review of national and international literature

Several themes appear to predominate in the national and international literature on education for children in care. The following sections focus on the key areas that impact on the educational experiences of children in care, including the academic and social spheres of school and the effects of care arrangements on educational participation and attainment. There is much debate about how best to measure children's school performance and, in particular, the extent to which traditional academic measures can provide accurate insights into children's educational experiences. Research has tended to focus on the academic attainment or outcomes of students using indicators such as student grades, formal qualifications, or transition to third-level education. It is only in recent years that attention has begun to be directed towards the more holistic measures of school engagement, such as social participation, student attitudes, and behaviour (McCoy et al., 2011; McCoy et al., 2012). In relation to children in care, however, the issue of school performance – both academic attainment and broader more holistic school engagement – has received little attention. Most studies in this area focus on the difficulties (both academic and social) experienced by the majority of children in care (see Laxton and Laxton, 2008). For example, Daly and Gilligan (2005) point to the difficulties experienced by many students from care backgrounds, such as the damaging effect of disruption and multiplicity of

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20   At the time of writing the forthcoming Children First Bill, 2012 is listed in Section A of the Government's Programme of Legislation.

placements, difficulties making and confiding in friends, and feeling that many teachers do not understand the difficulties of their home situation. However, there is also research that suggests that educational failure is not inevitable and shows that some children do well in school and go on to lead successful adult lives (see Daly and Gilligan, 2005).

While literature and statistical data indicate that socioeconomic factors such as poverty and social exclusion may be 'causal indicators' of children being placed in care, these issues are under-researched. Also under-researched are the pathways by which children in the care system might overcome their childhood disadvantages through further and higher education (Eurydice, 2005; Jackson and Ajayi, 2007). There is a need for greater examination of care systems and the remedial role that can be played by education (Höjer et al., 2008). From a policy perspective, there is a lack of empirical evidence on best-practice approaches being adopted by policy-makers and professionals working in care and education sectors in other jurisdictions.

2.6.1   Academic outcomes for children in care

There is increasing interest in educational and social outcomes for young people after leaving care. Most of the published research studies about education of children in care originate from Europe, the United States, and the United Kingdom. The European *YiPPEE* study revealed two key explanations for why young people choose to study and gain qualifications beyond compulsory school, both of which are interlinked: 1) not ending up like their parents; and 2) getting a good job (Höjer et al., 2008: 132). However, low educational achievement is a long-established characteristic of children in care. Low educational achievement was first identified as a matter of concern in the 1970s in the British National Child Development Study (Essen, Lambert, Head, 1976). Over 30 years later, it continues to be a major policy issue and the available data continues to show high levels of poor educational attainment among children leaving care (Jackson, 1994, 1998). Low achievement and related issues, such as poor student grades, subject levels, class placements (streaming, setting), special educational needs and supports, and disruptive or problematic behaviour, have tended to dominate research in this area. The common themes presented have been the low level of educational attainment and the high numbers of people who leave care with no qualifications (Jackson, 2000). Furthermore, research has shown that children in care tend to underachieve in comparison with their peers and the gap between the attainment levels of children in care and those of the rest of the pupil population remains substantial (DfES, 2010). For example, in Scotland, McClung and Gayle (2010) found that 'looked after' children performed less well than the general school population across all Scottish Credit and Qualifications Framework (SCQF) levels. Similarly, in England the educational achievements of children in care are

significantly lower than those of their non-'looked after' peers (DfES, 2007). Statistics from the Department for Education and Skills in the United Kingdom showed that in 2006 in England, 12 per cent of children who had been in care for a year or more achieved five or more GCSEs at grades A to C; the national average at the time was 59 per cent of children (Lewis et al., 2007). Further afield, a synthesis of research conducted in Chicago by Walker and Smithgall (2009), showed a pattern of children in care (first grade) being 'behind' academically and being too old for grade. Over time, Walker and Smithgall suggest, these students learn progressively more slowly than their peers and show higher rates of serious school disciplinary offenses; they are also more likely than other students to be placed in special education and are less likely to ever exit. There are numerous reasons for this under-achievement, including disruption within the home environment, disruption caused by having to move schools and lack of a motivating and inspirational environment that recognises the importance of education.

Studies of academic performance and attainment have highlighted the children in care who are placed in lower-streamed classes or lower tracks and the extent to which they are prevented from progressing into the next year (or grade) (Scherr, 2007; Sawer and Dubowitz, 1994; Fox and Arcuri, 1980). The literature also indicates that students in care are disproportionately represented in special education (Pecora et al., 2003; Zetlin et al., 2003; Scherr, 2007). In England, for example, approximately a quarter of children in care were found to have special educational needs (DoH et al., 2002) and more recent estimates indicate that they are nine times more likely to have a statement of special educational needs than the general pupil population (DfES, 2010). However, many children who are eligible for special education services experience interruptions in the assessment and special education process due to disruptions and frequent moves in their care placements. Consequently, learning disabilities or difficulties may not be diagnosed and services may not be provided (National Centre for Children in Poverty (NCCP), 2006).

Research examining academic ability and class/track placement of children in care draws heavily from literature on the ramifications for children of adult expectations and attitudes. Jackson (1989) found many social workers and care staff form assumptions, accurate or otherwise, about children's ability and, based on these assumptions, they frequently formulate low expectations of the children's levels of academic achievement. Similarly, Fletcher (1993) showed teachers often form low expectations of the capability and achievement potential of children in care. Several authors recognise the detrimental effects of low teacher expectations with regard to the academic performance of children in care (see Archer, 1999; Fletcher-Campbell, 1997).

Research has suggested that many care and education professionals regard education as a low priority for children in care (Christmas, 1998; Gilligan, 1998). This is reflected in, what has been reported as, the minimal attention given to education in the assessment, planning and review work carried out by social workers and care staff (Fletcher-Campbell, 1997). In a more recent Irish study that asked students from care backgrounds about their perspectives on teachers' expectations, students felt that many teachers have low expectations for them, which, they believed, very often stemmed from teachers' lack of understanding of the care system; this resulted in what students regarded as lack of sensitivity regarding their care backgrounds, which, consciously or otherwise, caused them to feel different from their peers (Emond, 2002: 23-25). Kilpatrick et al. (2008) found that having the 'right' staff team in residential care settings is particularly important for the welfare of children and young people. As young people in residential units live together in a group setting, good management of peer relationships and group dynamics is fundamental. Moreover, many young people in residential care have had traumatic experiences prior to being placed into care, so it is critical that staff members are equipped with the 'right' skills, qualities and attitudes to relate to these young people.

In summary, low educational achievement is the dominant theme in the literature and research on education for children in care. Having said that, however, there is also evidence to suggest that, while many children in care experience considerable challenges in their schooling and education, others manage to overcome the difficulties and do well. The international literature provides little evidence of change or improvement in recent years in education outcomes for children in care (Ofsted, 2009). Lack of empirical and descriptive information in Ireland prevents evaluation of the extent to which tangible advances have occurred here.

2.6.2 Social outcomes, attendance and behaviour
Studies point to the importance of focussing on the social outcomes of children in care in school. The literature in this area tends to focus on student attendance, discipline, behaviour and peer/social relations as being particular issues for children in care. At present, there are no detailed official data available on school attendance by children in care in Ireland. However, such information is routinely published in certain other jurisdictions, including England, Scotland and Northern Ireland, and the statistics generally show attendance tends to be lower among children in care than those in the general population. In England, Condie et al. (2009) show that children in care have higher-than-average rates of low attendance; in Scotland, attendance for children in care averages at around 87 per cent, compared to 93 per cent for those of similar age in the general population (Statistic from the Scottish Government, 2011).

The fact that children in care tend to have lower attendance rates compared to children in the general population may be associated, in part, with problems of behaviour. For example, children in care have consistently shown above-average rates of truancy and are vulnerable to social problems at school such as bullying (Condie et al., 2009). Research has also shown that disciplinary actions, which typically remove students from educational settings, occur disproportionately among children in care. One of the first studies to highlight this issue was Festinger's (1983) research on young adults leaving the care system. Festinger found an average of 35 per cent had been suspended from school at some point during their academic lives. Almost 30 years later, Kortenkamp and Ehrle (2002) reported 32 per cent of a sample of fostered youth, compared to 13 per cent of children living in their original homes, had been suspended or expelled from school in the previous year. In England, Condie et al. (2009) found children in care have consistently above-average rates of exclusions. Research in the United States indicates similar trends, for example, the National Centre for Education Statistics found students in foster care have higher school dropout rates than students living in their own homes (NCES, 2006). Other research shows children in care are three times more likely to be suspended or expelled from school due to problem behaviours, for example, fights with peers or teachers (NCCP, 2006; Zima et al., 2000). A recent meta-analysis of international research on this issue also found that students from care backgrounds are frequently disciplined in school (Scherr 2007). Fletcher-Campbell et al. (2003) found that management of challenging behaviour is the principle challenge for schools working with children from a care background. Suspension and/or expulsion were found to be frequently-used penalties, even though they were recognised to negatively influence experiences at school and, ultimately, diminish young people's chances of continuing their education and competing for employment opportunities after school (Trout et al., 2008). Rather than punish or remove difficult students from the classroom or school, Fletcher-Campbell et al. (2003) suggest more effective ways of addressing challenging student behaviour include staff paying more attention to the pupils in question, forging strong relationships with them, and reassuring them that they are capable of providing the support they require and willing to assist them. However, the authors argue that in many schools, staff report that they find it difficult to make allowances for unacceptable behaviour among children in care, while, at the same time, trying to ensure they maintain fairness and send the right messages to other pupils.

In an effort to explain the inter-related patterns of challenging behaviour, discipline, suspension and exclusion, research shows many young people in care miss out on education and experience gaps in their schooling, particularly during their younger years. Studies also

suggest children in care are more likely to experience poor educational outcomes because of factors such as bullying by peers and family problems (Höjer et al., 2008; Kendrick, 1995).

It has been argued that it is difficult to ascertain a direct causal relationship between poor school attendance and educational outcomes among children in care. For example, Pricewaterhouse Coopers (PwC) conducted a review of literature, comprising approximately 60 documents, on attendance at post-primary schools among children in care. They concluded that '[n]one of the studies reviewed showed a direct link between attendance at school and attainment' (2011: 45). Having said this, however, taking all factors into consideration, it is likely that the combination of intervening problems of challenging behaviour, negative stereotyping, suspension and expulsion have detrimental effects on children's interest in school, which, ultimately, may infringe on their educational attainment.

2.6.3   Placement mobility, disruption and instability

Changes in care placements very often involve moving to a new location and require moving to a new school, which can be disruptive for children (Maxwell et al., 2006; Ofsted, 2011; Malmgren and Meisel, 2002; Borland et al., 1998) and can have detrimental effects on their schooling. Studies show frequent mobility and lack of continuity in schooling are associated with poor attendance (Conger and Rebeck, 2001), significantly lower levels of attainment in reading, writing and mathematics (Strand, 2002), as well as impediments in children's social and personal development (Courtney et al., 2004b). Highlighting these issues, the cross-national European *YiPPEE* study examined the educational lives of young people in and from care backgrounds and found that:

> *'Negotiating their role in several communities was regarded as difficult for some young people because they had to adapt to new rules and ways of behaviour all the time when many changes occurred. They found themselves feeling uncomfortable and lonely, with no close friends'*

(Höjer et al., 2008: 128).

Research conducted in Ireland has found that frequent changes in care placements cause uncertainty among young people, who find it difficult to repeatedly move to new schools and have to make new friends, particularly when they are unsure how long their current placement would last. For some young people, 'choosing to not have friends was easier than having to repeatedly leave friends behind' (Emond, 2002: 27-28).

For other children, it should be noted, changing care placements and schools can be a positive experience. For example, the DCYA report on its consultation with young people in care in Ireland indicated that some young people in care perceived their care environment as preferable to their natural/birth homes. One benefit that was mentioned in particular was the discipline and routine that is imposed regarding schooling, for example, one participant living in foster care stated, 'You go to school every day – it is easier to get an education when you are living in care because your foster family make sure you go to school' (2011: 20). Similarly, the Ofsted (2001) survey showed how changing school gave children an opportunity to leave behind problems like bullying and allowed them to start afresh.

There is a growing recognition of the importance of continuity and stability of school placement for children in care, who may or may not come from a secure and stable home background. However, there has been little research on whether the school provides a 'true asylum' and whether it is a place where children can feel safe and secure (Walker, 2002). For example, Borland et al. found that, for many children, school adds to the turmoil of living in care, rather than providing stability (1998: 56). The Ofsted study found that many young people in residential special schools[21] described their living environment as 'homely and safe' and appreciated the home comforts that were provided, such as having their own bedroom and plenty of space around them, which was in contrast to their (birth) family homes (Ofsted, 2009: 7).

2.6.4   Environmental factors and adult role models

The Danish report from the cross-national YiPPEE research states that parental and familial (birth and/or foster) supports and an ethos of education are crucial to young people's educational pathways (Höjer et al., 2008: 130). Research conducted in the United Kingdom has shown that the educational background of carers can influence the attitudes of children towards school and further education (Jackson, 1989). More recently, in an Irish study of young people in residential care in Dublin, Emond (2002) found that the interests and personalities of staff in residential care homes can influence the way in which learning is experienced by young people in residential care. Emond found the young people she interviewed valued qualities in their teachers such as their ability to build confidence, encourage, provide personal support, stimulate interest in learning, respect the potential of the young person, and 'expect well' of the young people. She also found that privacy, confidentiality, and concern about intrusiveness are very important issues for young people in care, especially with regard to sensitive

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21   These are schools for children with special educational needs (SEN).

personal matters. Drawing on Emond's work, Gilligan (2003) suggested that a teacher's interpersonal style may have a bearing on a child's 'internal working model' of school and learning. Furthermore, Emond (2002) found that the young people who ranked education as a low priority were those who lacked self-confidence, had little or no contact with their (birth) family, and felt anxious, isolated and unhappy at school. By contrast, she found that those who gave priority to education were more likely to have an acceptable level of contact with their family, had established friendships, and generally felt good about themselves.

2.6.5   Care leavers – What happens after school?

It is not uncommon that many young people in care perform as well as other children at school and achieve success in their adult lives (Gilligan, 2001). However, the general picture emerging from the literature is that young people from care backgrounds tend be lower achievers after school and tend to experience more hurdles in adult life compared to their peers. As noted at 2.5, the absence of any statutory obligation on the State to provide aftercare supports, including in respect of education, to young people leaving care in Ireland, has been a focus of sustained concern at national and international levels and issues arising from deficits in aftercare provision feature among the complaints examined and highlighted by the Ombudsman for Children's Office.[22]

Research in Australia, Canada, England, and the United States consistently shows that young people leaving care have higher rates of unemployment, mobility, homelessness, financial difficulty, loneliness, and physical and mental health problems (Biehal et al., 1995; Broad, 1998; Courtney et al., 2004a; Kufeldt and McKenzie, 2003; Maunders et al., 1999; Pecora et al., 2003; Raman et al., 2005; Stein and Carey, 1986; Stein, 2009). The connectedness between mental health problems and experience of social and socioeconomic difficulties is evident from the research that shows that care-leavers have been found to be vulnerable to the development or exacerbation of mental health problems because of the problems they may face on leaving care, such as poor/lack of qualifications, unemployment, homelessness, teenage pregnancy, entering the prison population (for example, Biehal et al., 1995; Social Exclusion Unit, 2003; Mullan and Fitzsimons, 2006).

Some research evidence highlights the very low proportion (1 per cent) of care-leavers who enter higher education (Fletcher-Campbell, 1997). Other 'leaving care' studies

22   See the Ombudsman for Children's annual reports to the Oireachtas and the OCO's submission to the UPR process (2011: paragraph 11).

(see Jackson and Martin, 1998) have shown that over 75 per cent of care leavers have no educational qualifications. While this would appear to imply that a quarter of care leavers have educational qualifications, Jackson and Martin (1998) argue this is probably an optimistic assumption, since the few examination passes that children in care have are often of little value in terms of enabling them to continue their education or enter the labour market. In the United Kingdom, research shows that only 3 per cent of care-leavers obtain five GCSE passes at grade level C or above compared with over 60 per cent in the general, or non-care, school population, while fewer than one in 100 students in care enters higher education (Fletcher-Campbell, 1997).

On the other hand, some young people in care are able to break the cycle and experience success in education and beyond (Jackson and Simon, 2005). These authors suggest the success of these individuals is often down to their own personal resilience. Earlier discussions suggest such individual resilience may be associated with the quality of their upbringing, the level of support received from key adults in their lives, and the attitudes/ethos towards education in their home and school life. The YiPPEE report identified factors such as 'support, [...] great determination, siblings, friends and nominated adults' as positive influences on young people's educational pathways (Höjer et al., 2008: 121). Social and cultural factors, both at home and in school, play an important role in cultivating personal resilience; hence, parents (birth/foster) carers, teachers, social workers and friends all need to be aware of the challenges children in care can face, listen to their views, show interest and, when necessary, demonstrate willingness to take action on children's behalf. Referring to British Cohort Studies, Jackson and Simon (2005) argue that quality of adult life is closely associated with educational qualifications; hence, they argue the study of factors (background, as well as institutional) that impact on academic success and experience of children in care is of particular importance in order to inform policy-making in this area. Other characteristics they suggest contribute to success in education and beyond include seeking out opportunities in further education and/or demonstrating success in areas where academic qualifications are of lesser importance.

2.6.6   Financial and practical supports

Related to the previous point, the literature argues for more efficient use of (financial) resources for young people in care to aid their progression through school and, where necessary, onto further education. For example, in the United Kingdom, a Report of H.M. Chief Inspector of Schools entitled 'Raising the Achievement of Children in Public Care' recommended that there 'should be a flexible approach to the funding of individual children who are moved between schools, especially during an academic year' (2000: 7).

This recommendation highlights two important issues: 1) the need to adopt a flexible/ individualised approach, and 2) the need for resources to follow the child.

There is also an argument that financial resources are not the only form of assistance required. Many children and young people in care need other supports when they move between care placements and schools to help them overcome the disruptions and potential disadvantages of such adjustments. For example, they may benefit from extra teaching or learning support assistance or they may require other kinds of assistance and support, such as transport. Consider the situations in Nordic and Scandinavian countries, where social-democratic policies espouse a fundamental principle of free education for all and governments provide financial support for young people in care to assist with education. Studies in Sweden and Denmark show that, despite the availability of universal financial and social benefits, young people in care still tend to have lower educational attainment (Vinnerljung and Sallnas, 2008) and lower qualifications (Höjer et al., 2008) than their peers; they also tend to be more at risk of social problems, such as higher levels of unemployment, more convictions for crime and higher risk of teenage pregnancy (Höjer et al., 2008). The implication here is that supports other than funding are also required, such as practical assistance, holistic service provision, increased awareness by professionals of the specific needs of children in care, and appropriate interpersonal contact between the children, carers and education providers.

2.6.7   Recognition and fulfilment of children's rights to/in education
Despite provision being made in the 1991 Act that due consideration be given by the HSE to children's wishes, the Irish Social Services Inspectorate (ISSI) has found that, in some cases, the voices and opinions of children and their families are not always adequately considered (2010). Evidence of this was also found in Emond's (2002) research, which showed that, when children in care complained to an adult about being bullied on the basis of their in-care status, nothing came of their complaint and the bullying did not stop (2002: 32). Emond also found that many children in residential care settings complained about their lack of input into the rules regarding day-to-day decision making (ibid: 36). Drawing on research findings such as these regarding provision for children in care to express their views in relation to actions and decisions affecting them, Kilkelly has argued in baseline research commissioned by the OCO that there is 'a clear need to involve children more in decisions about their daily lives' (2007: 25).

When examining the practical application of a rights-based approach to education provision for children in care, Kilkellly (2007, 2011) draws attention to the fact that, even though the right to education is an internationally recognised human right, many children

in care encounter hurdles to the realisation of this right. In many cases, Kilkelly (2007) argues, the very specific needs of children in care are not being met. Kilkelly suggests that schools need to do more for many children in care, for example, teachers need to be aware of and sensitive to the particular circumstances and needs of children in care and they need to pay greater heed to children's views, particularly their views on issues regarding decisions about their own lives. She also suggests that every child in care should have an individual education plan, developed in conjunction with his/her school (2007: 25).

While some of Kilkelly's findings are not specific to children in care or education, she makes some important points about children's right to be heard. Her 2011 children's rights analysis of investigations conducted by the OCO revealed, with few exceptions, a lack of awareness about the impact of public administrative decision-making on the lives and rights of children and their families. Kilkelly found decision-making that affected children directly and sometimes indirectly was not informed by its impact on the children concerned; nor was it informed by children's rights principles. In particular, the parameters of the child's best interests and the child's right to be heard were not always used to guide administrative actions or decision-making. Kilkelly found that procedures, and in some cases the individuals/agencies applying them, were not aware of or sensitive to the needs or rights of children or their families. Other considerations appeared to predominate over ensuring that the rights and interests of individual children are met and, in many cases, the individual children appeared to be 'largely invisible in the decision-making process' (2011: 77). As regards children in care, this finding accords with complaints brought to the OCO by children in care about not being included in the care planning process (2011: paragraph 11) and with the critical viewpoints expressed by participants in the DCYA consultation with children in the care of the State (2011a).

In a similar vein, the Eurochild surveys (2010), conducted across 30 countries, revealed disparities around children's right to be heard and for their voice to be represented in policy-making. The Eurochild report recognised the need for 'direct involvement of children, young people and their families, both in decision-making processes that affect them directly and in the development of alternative care policies and services' (2010: 9). According to the Ofsted report (2011), young people in care believe having their own views heard is crucial. However, Ofsted also found many children in care believe that, even when they are consulted, it is debateable how much choice they are given and how much influence their decision has on the outcome; many children believe they are only given small decisions or are given 'options for decisions already made' (2011: 21). The Ofsted report claims that children's age and other issues, such as whether they have a

disability, affect the extent of consultation and the degree to which their voices are heard and their views are considered in decision-making processes affecting them.

2.7   Summary

This chapter provided an overview of the current legislative framework for Ireland's care system and of statutory roles and responsibilities for the rights and welfare of children in care, in particular as regards their educational needs and entitlements. With reference to international and national standards, it highlighted deficits in legislation, policy and provision that are having adverse effects on some children in care, including their participation and attainment in education.

Reviewing the national and international literature on education provision and care systems, it is apparent that a relatively limited amount of research has been conducted in this area. While a number of studies suggest that some children in care enjoy and benefit from school and go on to pursue successful adult lives, most of the existing research highlights the difficulties experienced by children from care backgrounds in relation to education. Like the international literature, studies of the Irish care system indicate that children from care backgrounds tend to under-achieve in school compared to their peers in the general population, and tend to be more likely to suffer disadvantage in later life. Given the level of educational attainment required for gainful employment and the negative adult outcomes associated with low levels of attainment, it is important to ensure that at-risk populations such as children in care are provided with adequate academic support (Trout et al., 2008). Further research is required to explore the benefits of positive educational experiences for children from care backgrounds, and how further education and training may serve as a route to overcoming childhood disadvantage. The lack of adequate information and data on the educational experiences of children in care is a serious omission in the Irish context that has important consequences for policy-making in this area.

Chapter Three
National Standards, Policies and Practice in Four Case Study Jurisdictions

3.1   Introduction

Raising educational standards among children in care and attempts to improve their educational experiences is evident in national policies and government initiatives in different jurisdictions. Although the approach taken differs across countries, it is generally recognised that education is a critical dimension to the welfare of children in care. This chapter provides case studies of four jurisdictions – Victoria, Australia; Ontario, Canada; Scotland and Northern Ireland – and examines the different approaches adopted in these jurisdictions to address the educational needs of children in care. In some jurisdictions, data is systematically collected about children in care (for example, Scotland and Northern Ireland). Some jurisdictions identify children in care as a specific target group of policy initiatives and interventions (for example, Scotland), while others provide support for all 'at risk' children (for example, Ontario). Taken together, the case studies describe a range of measures used to improve access, participation and educational attainment of children in care. It is important to note that while we can learn from the experiences of other countries in terms of policy solutions and good practice, one should exercise caution in direct 'policy borrowing', as 'what works' is often system-specific and situated in complex origins of individual jurisdictions (Smyth and McCoy, 2011).

3.2   Victoria, Australia

3.2.1   Legislative and policy framework

In Australia, public policy with regard to education builds on Articles 28 and 29 of the UNCRC. This approach is evident in the *Children, Youth and Families Act*, 2005 (CYFA),[23] which focuses on the needs of vulnerable children. The CYFA laid the groundwork for the development of a *Charter* (2005)[24] for children in care in Victoria, which provides a framework for promoting the wellbeing (including education) of these children.

Until recently, each State and Territory in Australia had its own set of Standards for addressing the needs of vulnerable children, including children in care. However, recognising the need for a more consistent approach, in 2011, the federal Government published a set of *National Standards in Out-of-Home Care* (the National Standards).[25]

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23 www.legislation.vic.gov.au/

24 In 2005, the Charter for Children in Out-of-home Care was developed by the Department for Health and Children, in conjunction with the Office of the Child Safety Commissioner and with input from carers, social workers, parents and other interest groups. The Charter provides a clear and simple set of statements of the rights that ensure well being of children in care. For further information see: http://www.dhs.vic.gov.au/about-the-department/documents-and-resources/policies,-guidelines-and-legislation/charter-for-children-in-out-of-home-care.

25 Published by the Department of Families, Housing, Community Services and Indigenous Affairs, together with the National Framework Implementation Working Group (http://www.fahcsia.gov.au/sa/families/pubs/nat_std_4_outofhomecare/Documents/PAC_national_standard.pdf)

These new National Standards, of which there are 13, are considered important for the educational provision for children in care, as the research evidence from Australia indicates young people in out-of-home care do not perform as well as their peers at school and are more likely to experience disruption in their schooling through relocation and/or exclusion (Harvey and Testro, 2006). The authors found that young people in care are less likely to continue their education beyond the compulsory phase; they also found many experience frequent placement and school changes, sometimes resulting in being away from school considerable lengths of time. The 13 National Standards focus on the key factors that directly influence better outcomes for children living in out-of-home care. They note that children should be treated as active participants in decisions that affect their lives and that 'their views about what works, what can be done better and what should change, will help drive continuous improvement in out-of-home care'. In the context of the current study, Standards 6 and 7 are particularly relevant, i.e. children in care access and participate in education and early childhood services to maximise their educational outcomes; and children up to at least 18 years are supported to be engaged in appropriate education, training and/or employment.

Promoting positive outcomes for vulnerable children and families is reflected also in various organisational mission statements, objectives, policies and programs across Victoria and is evident in a number of practical initiatives.

3.2.2   Measures adopted by the jurisdiction

Inter-agency collaboration
Looking after Children (LAC)[26] in Out-of-Home Care is a joint initiative of the 39 community service organisations across Victoria that deliver care services for children in foster and residential settings.[27] LAC provides a framework to identify the needs, including educational needs, of children, guide their assessment, and develop plans to help them achieve their potential. The LAC framework attempts to strengthen communication and collaboration between carers, Department of Human Services (DHS) staff, community service organisation staff, other professionals, clients and their

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26   The Looking After Children (LAC) approach was originally developed in the United Kingdom in 1987 and has since been adopted by several other countries, including Australia and Canada. The LAC project describes seven areas of a child's life in which development and growth occur; these are: health, education, identity, family and social relationships, social presentation, emotional and behavioural development and self-care skills (NYCN 2001: 14).

27   In Victoria, Australia, the LAC framework sees participation in formal education as a crucial requirement, but takes a longer-term view that sees education as a lifelong process that extends throughout one's life, or through seven distinct 'life areas'. Furthermore, the framework contends that children need to be supported by people who have high aspirations for them, thus assisting them to reach their full potential. http://www.dhs.vic.gov.au/about-the-department/plans,-programs-and-projects/programs/children,-youth-and-family-services/looking-after-children-in-victoria-lac.

families. It also provides community service organisations with an Assessment and Action Records tool, which offers a common framework for their client records systems that in turn contain all of the information they require to look after a child or young person in the care of their organisation.

The Victorian Government introduced a *Partnering Agreement* initiative in 2003 to encourage inter-agency collaboration between the Department of Education and Early Childhood Development (DEECD), the Department of Human Services (DHS), the Catholic Education Commission of Victoria, and Independent Schools, Victoria.[28] The overarching aim of this initiative is to ensure that the care and education providers with responsibility for children in care and child protection professionals cooperate in order to improve educational outcomes of children in out-of-home care (DEECD, 2011). Specifically, the Agreement aims to ensure the following:

· Processes are in place to actively support the educational achievement of every child and young person in out-of-home care;

· A strongly coordinated approach exists to support the needs of children in out-of-home care;

· All parties understand each other's roles and responsibilities and work co-operatively;

· Strategies are implemented to improve outcomes related to student enrolment and attendance;

· Achievement, case planning[29], retention, and school completion (p.5).

The Partnering Agreement sets out a number of key requirements, including:

· Case managers should advise the school that the child or young person resides in out-of-home care;

· Schools should record the child's or young person's out-of-home care living arrangements in their student information record keeping mechanism (CASES21[30] for government schools);

· Schools should establish a Student Support Group for each child or young person in out-of-home care and case managers must participate in this group;

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28 The DEECD and DHS share responsibility for monitoring compliance with the Partnering Agreement.
29 This part of the report utilises terminology used in the original documents.
30 CASES21 is a student administration system.

- Schools should lead the development of an Individual Education Plan for each child or young person in out-of-home care, including input from the case manager;

- Schools and case managers should facilitate referrals for assessments and services to support the learning and wellbeing of the child or young person (p.5).

The recent DEECD report shows that attendance and school enrolments among children in care have improved since the Partnering Agreement was introduced (2011). If developed, similar partnership arrangements between the Department of Education and Skills (DES) and the Health Service Executive (HSE) (and in due course the CFSA) may provide a useful forum for developing strategies for supporting education of children in care in Ireland.

Information and data availability
Availability of relevant (national) data is essential for monitoring academic progress of children in care, policy-making and assessing the effectiveness of interventions. The policy formation of the State Government of Victoria is based upon the belief that: 'Robust analysis of rich data is critical to a learning culture. It helps us to understand what has worked or not worked in the past and the factors to consider in planning for the future' (DHS 2005: 83). Wise (2009) noted that, until recently, there were no established means to evaluate, monitor, benchmark, and review achievement of educational outcomes among children in care across Australia. While the Australian Institute of Health and Welfare (AIHW)[31] has previously published national data on children in care and protection orders from administrative datasets, these only provide limited data and do not contain information about child outcomes and do not allow for the assessment of interventions that can be used for informing policy and practice (Wise, 2003). In order to improve the situation, the Victorian Department of Human Services has built the *Looking after Children* materials into its Client Relationship Information System for Service Providers (CRISSP).

The Assessment and Action Records tool, referred to above, measures service outcomes, assesses effectiveness, and provides information for policy-making. A similar framework would considerably strengthen collaboration between different agencies and service providers in Ireland and sharing of data would facilitate empirical analysis for policy-making. Wise (2003) argued that, given the difficulty in collecting data on children in care through other means (such as surveys), data through the course of everyday practice is invaluable for a system of outcomes monitoring.

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31 See also: AIHW (2007). Educational Outcomes of Children on Guardianship or Custody Orders: A Pilot Study. Child Welfare Series No. 42. Cat. No. CWS 30. Canberra: AIHW.

The new National Standards for Teachers in Australia (launched in 2011) aim to ensure the availability of nationally comparable data on the outcomes for children in out-of-home care. In April 2011, Australian Community and Disability Services Ministers agreed a schedule of national measurement and reporting arrangements for out-of-home care. The aim was to adopt a joined-up approach and link existing data from various sources to create a comprehensive database that will be used to guide policy-making. This approach merits consideration in Ireland, including in the context of work arising from the National Strategy for Research and Data in Children's Lives 2011-2016; currently, various agencies, including the DES, the HSE and the NEWB, each collect their own data, but it is not possible to link the various data sources; moreover, not all data sources collect data relating specifically to children in care.

Initiatives for educational support for children in care
Within the Partnering Agreement, an *Education Support Guarantee* was established to lend further support for educating children in out-of-home care. The Guarantee includes:

- Allocation of teacher or staff member as a learning mentor to each child or young person in out-of-home care enrolled in a school;

- Prioritisation of referrals for children in out-of-home care to education-related health and wellbeing services to ensure that these services are highly accessible and responsive to the needs of this group;

- An educational needs assessment for every student who has resided in out-of-home care for a period of three months or longer to identify their individual learning needs and to inform their Individual Education Plan;

- Priority status for post-round applications to the Program for Students with Disabilities for children in out-of-home care enrolled at a government school;

- Checklists outlining the commitments and responsibilities for schools and case managers from DHS or community service organisations when a child or young person enters out-of-home care or when they are enrolled at a school (p.6).

The DEECD and the DHS provide two sets of resources for schools to assist them in supporting children from care backgrounds, namely *Partnering Agreement – School Attendance and Engagement*[32] and Individual Education Plan Guidelines. The School

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32 http://www.dhs.vic.gov.au/__data/assets/pdf_file/0007/586465/information-guide-registered-teachers-principals.pdf

Attendance and Engagement Agreement offers strategies to improve the school engagement of children in care and to monitor their educational achievement and attendance. Schools with children in care are expected to be familiar with this resource and are expected to implement the strategies. One such strategy recommends that school principals should establish Student Support Groups to facilitate collaboration between school staff representatives and care workers. Student Support Groups can utilise Individual Education Plans for monitoring the progress of the student. Where appropriate, the Agreement recommends that children in care should be encouraged to attend the Support Group meetings. Similar resources developed in conjunction with the DES and HSE (and in due course the CFSA) may be worth considering for educationalists and care workers in Ireland.

A practical resource for education professionals in Victoria who teach and/or have direct contact with children in care is *Great Expectations: Supporting children and young people in out-of-home care to achieve at school* (2007).[33] Originally commissioned by the DEECD, this comprehensive guide recognises the pivotal role schools play in ensuring that all children achieve their potential and is designed to help schools improve the educational outcomes of students from care backgrounds. Specifically, the guide provides an overview of relevant legislation and a review of research about education of children in care. It outlines helpful strategies and learning activities to help teachers/schools respond appropriately to the special needs of vulnerable students from care backgrounds and improve their educational experiences. It also provides links to relevant materials that are of use to various interest groups, including educators and student welfare staff. The resource includes the voices of children in out-of-home care, as well as the voices of carers and teachers, and acknowledges that 'academic achievement, school attendance and participation are key components of success for children in out-of-home care' (2007: 21).

Other supports for vulnerable families and individuals
While not directly dealing with improving educational outcomes, this next initiative is directed at integrating services to assist vulnerable children, particularly those in out-of-home care, and their families. One of the key measures of Victoria's policy is integration of service responses to vulnerable children and their families. In the past, kindergartens, maternal and child health nurses, early childhood education services, family support services and protective services have generally operated separately in Victoria. The major system change in the Government's policy framework is to better integrate these services so that they form a cohesive service system.

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The *Best Interests Case Practice Model* provides a foundation for working with vulnerable or disadvantaged children, young people and families. Reflecting the new directions arising from the Children, Youth and Families Act, 2005 and the Child Wellbeing and Safety Act, 2005, the Best Interests model aims to achieve successful outcomes for children and their families (DHS 2010). The model is designed to inform and support professional practice in family services, child protection and placement and support services. It covers a broad range of issues regarding children's development and welfare; with regard to education provision, the model advises practitioners working with children to adopt a holistic perspective and 'consider the child's educational, physical, emotional or spiritual needs as a whole, from the perspective of culture, not in isolation from each other' (2010: 7).

3.3   Ontario, Canada

3.3.1   Legislation and policy framework in Canada – Province of Ontario

Canadian education is governed at provincial level. Hence, all Canadian provincial and territorial governments devise their own standards and policies for children in care, as well as their own curricula and many major policies for mainstream schools. In practice, this may translate into Canadian children receiving different services, depending on the jurisdiction in which they reside.

The region's largest province, Ontario, has focussed on achieving positive student outcomes among young people from care backgrounds. The Ontario Ministry of Children and Youth Services (OMCYS) funds and monitors the foster care system, develops policy to support the child welfare program and licenses children's foster and group homes. The 'Ontario Practice Model: Resource family assessment, preparation and ongoing development' is an integrated framework of three approaches, SAFE, PRIDE (Parenting Resources and Information Development and Education) and OnLAC (Looking after Children, Ontario). The relevant aspects of this model will be discussed in the following section.

While not specifically relating to children in care and education, it is important to highlight that all Canadian service-providers involved with children are required to uphold the principle that *all children capable of forming their own views* have the right to express these views (Canadian Coalition for the Rights of Children 2002, Article 12), even before cases come to the attention of the Canadian Council of Provincial Child and Youth Advocates (Farris-Manning and Zandstra, 2003). Resources on children's rights

in Canada are available from the Canadian Coalition on the Rights of the Child[34], which offers a series of resources with regard to recreation, childcare, health care, education, protection and justice rights of the child, and the UNCRC, a guide for professionals who work with children and youth (CCRC 2002).[35]

3.3.2 Measures adopted by the jurisdiction

In recent years, Ontario has introduced several major mainstream educational initiatives. While not designed specifically for children in care, these initiatives can be drawn on by all students, including those from care backgrounds. One such initiative for high-school students, the Student Success Initiative, is aimed at improving high-school graduation rates; the success of this initiative lies in early identification of students who may be at risk of leaving school early and allowing students to customise their high-school experience around learning that is relevant to them. Students also receive additional support through new 'Student Success Teams', a new Grade 8-9 transition plan and the creation of 'credit recovery' programmes for students who have failed parts of their courses.

The Literacy and Numeracy Secretariat was established in 2003 to improve students' reading and mathematical abilities and outcomes. The Strategy is targeted at all elementary school students. Over its relatively brief history, the Secretariat has had a major, and primarily highly positive, impact on Ontario's education system' (2009: 11), as evidenced by improvements in the average pass rate in provincial examinations.[36]

A programme called *High Skill Major* provides an alternative curriculum for students experiencing difficulties in engaging with the traditional academic curriculum. In addition, by creating a 'Student Success Team', it became easier to identify students showing early signs of academic difficulties and to devise appropriate interventions. (In the Irish context, the 'Pastoral Care Team' in schools seems to fulfil similar functions.) Part of Ontario's success is also contributed to high quality and innovative teaching and leadership development, particularly for school principals.[37]

Educational initiatives for children in care

The national project, *Looking After Children (LAC) in Canada (CanLAC)*, supports and coordinates the implementation of the LAC tools as resources for effective in-care services across Canada. In 2006, the OMCYS policy directive was issued, which required all

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34 For further information see: http://rightsofchildren.ca/
35 For further information see: http://rightsofchildren.ca/wp-content/uploads/2009/05/ed.pdf
36 http://www.edu.gov.on.ca/eng/document/reports/OME_Report09_EN.pdf
37 According to the OECD (2010), students in Canada tend to perform well academically, irrespective of their socio-economic background, first language or immigrant status.

Children's Aid Societies (CAS) in Ontario to implement LAC from December 2007. The LAC approach assists agencies working with vulnerable children in Ontario to ensure they are cared for according to evidence-based best practices. An important element of LAC is monitoring outcomes through Assessment and Action Records. In Ontario (unlike other Canadian provinces), the Assessment and Action Records measure has been adapted and fully implemented as an instrument for outcomes monitoring of children and key individuals (Flynn et al., 2004). The data generated by LAC enables Ontario's child welfare professionals to measure outcomes for all the children in long term out-of-home care.

The Ontario Practice Model, alluded to above, is designed to enhance the quality of care provided for children in foster care, kin, and adoption homes. The overarching aim of the Model is that Ontario's looked-after-children are parented by families who understand the needs of vulnerable children, have the capacity and willingness to meet those needs, understand the impact of day-to-day experiences, and believe in 'resiliency' and the child's ability to do well in life. The result, in theory at least, is a comprehensive, respectful assessment, approval and preparation process of welfare provision for out-of-home children.

To help improve access for young people in care who are leaving school and wish to continue their education, the Ontario Association of Children's Aid Societies (OACAS), in conjunction with the Ministry of Training, Colleges and Universities (MTCU), introduced post-secondary education (PSE) application fee reimbursements.[38] In June 2007, the Ontario government announced a pilot project to improve the educational outcomes of *Crown wards: The Crown Ward Education Championship Teams Initiative*. In August the same year, the Premier announced tuition supports for Crown wards and former Crown wards pursuing post-secondary education. This was the first time the government, beyond the OMCYS, acknowledged that Crown wards and former Crown wards require special consideration for their needs and outcomes in public policy and funding.

 OACAS introduced *Ward Education Championship Team Pilot Project* (2007-08), an initiative by three Ministries to create an effective program to support Crown wards so they can succeed through high school to post-secondary education and training. Ten CASs participated in the Pilot Project to develop better strategies to encourage young people in care to continue their secondary and post-secondary education. The initiative provided funding grants and encouraged collaboration between CASs and school boards

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38 A decision was taken to waive the PSE application fees for Crown Wards from 2008 on. Furthermore, young people in care are eligible to receive a grant covering up to $3,000 of their first year tuition and an additional $3,000 grant if they are registered in a PSE program of more than 24 months duration (Ontario Ministry of Training, Colleges, and Universities 2007).

and post-secondary school institutions. In addition, OACAS also worked closely with the Ministry of Training, Colleges and Universities (MTCU) regarding the implementation of post-secondary application fee reimbursements, as a mechanism to help improve access to post-secondary education.

In March 2008, OACAS released 'Gateway to Success: Educational Status of Crown wards and former Crown wards, Age 16-21', a report that was based on manually-collected data from child welfare workers across Ontario. It explored the educational attainment of the province's Crown wards and former Crown wards. The government of Ontario used this report to help develop services for children in the care system. Following the recommendations of the report, CASs began investing in several educational supports, including Education Advocates, homework groups, increased funding, mentoring programs, and maintaining youth in their home until age 21.[39] While not specifically designed for monitoring the educational success of children in care, there measures would be useful to consider for Ireland.

OACAS Education Services provides a program with the necessary knowledge, competencies and tools for child welfare professionals, managers and resource families in Ontario to make critical decisions about child safety, while simultaneously working alongside families towards better outcomes for children.[40] OACAS Education Services has Learning and Development Consultants located throughout Ontario, each assigned to one of five regional areas. The role of the Learning and Development Consultants includes:

- Supporting and overseeing agency-based training programs and regionally organised training programs and initiatives;

- Trainer support and development;

- Resourcing agencies with new training and development products and seminars;

- Supporting regional and cross regional networking;

- Ongoing representation and support to the Ontario Practice Model, curriculum development and transfer of learning initiatives;

- Leading various field pilots, working groups and participating in planning education services symposiums and the development of provincial learning guides.

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39 http://www.oacas.org/pubs/oacas/annual/08annual_web.pdf
40 http://www.oacas.org/about/programs/education/index.htm

In addition, *OACAS Education Services* has a staff of three Provincial Trainers who provide a lead role in the delivery of training, development of curriculum, participate in OACAS projects/committees, and support capacity-building for agencies and their staff across the province. As well as providing direct classroom training, the Provincial trainers serve in a variety of facilitation capacities, including web-based/internet initiatives, support to learners engaged in alternative delivery models, and coaching and mentoring for the development of Agency Based and Sessional trainers as requested by trainers and agencies. They also offer support to agencies related to the transfer of learning with programs directed at child welfare frontline and management staff at CAS, and to CASs foster, kin, customary care and adoptive families. In addition, OACAS is beginning to provide training services to private adoption practitioners and foster/group care agency staff and families; since 2000, over 130,000 participants from CASs target groups have attended training.

The *Ontario Youth Communication Advocacy Network (Youth-CAN)*[41] promotes the interests, including education, of all youth in care and former Crown wards. Through a tripartite approach of communication, advocacy and networking, YouthCAN provides information on post-secondary education and support for young people in care who wish to pursue further education, training and/or apprenticeships after school. They recognise the difficulties many young people experience in getting started and they provide a comprehensive checklist of relevant issues. They also give practical advice about public and private colleges, financial assistance and funding programs, living arrangements, and contact details for agencies and associations that provide support for young people from care backgrounds.

3.4   Scotland
3.4.1   *Legislative and policy framework in Scotland*
In Scotland, every child of school-going age has the right to a school education provided or arranged by an education authority (Standards in Scotland's Schools Act (SISSA), 2000, s1). The Children (Scotland) Act, 1995 describes the duties and responsibilities of parents and public authorities towards children at different stages of their development. The law in Scotland requires Local Authorities to make appropriate arrangements to meet children's educational needs and to ensure continuity of education.[42] However, recent years have seen major changes in Scotland's legislative framework. In 2009, the Scottish government published 'Do the Right Thing', which presented the government

41 http://www.tcu.gov.on.ca/eng/postsecondary/careerplanning/crownwards.html#1a
42 The Arrangements to Look After Children (Scotland) Regulations 1996, Regulation 5(2)(c).

response to the 2008 Concluding Observations of the UN Committee on the Rights of the Child. It described the steps proposed in order to implement the UNCRC across Scotland. The Scottish Government announced plans for legislative and policy development that will force a major shift in services for children, including those in care. The focus will be on a new approach, based on four elements: prevention; appropriate, early intervention; child-centred service delivery; and support for parents to build their confidence and capacity. Consultation on The Rights of Children Bill closed on 1 December 2011 and a Children's Services Bill is planned for 2013.

The policy context in relation to the educational experience of looked-after children and young people in Scotland is relatively new. It began about 12 years ago, with the commissioning of a detailed review of research (Borland et al., 1998), which, in turn, helped to inform a highly influential inspection report of provisions for children looked-after away from home (HM Inspectors of Schools/Social work Services Inspectorate (2001). These two publications helped to raise awareness among professionals in education and health sectors, contributed to the development of materials, i.e., Learning with Care (2003),[43] (discussed below) to support the education of professionals working in these fields, and served as instigators in the publication of self-evaluation indicators for auditing support arrangements for looked-after children .

Current policy on education for children in care in Scotland is outlined in two reports: 1) *Looked After Children and Young People: We Can and Must Do Better* (Scottish Executive, 2007); and 2) *Count Us In: Improving the Education of Our Looked After Children* (Scottish Executive, 2008). In addition, the Scottish Executive has produced official regulations for looked-after children (2008) and guidelines for Local Authorities and service-providers working with and caring for looked-after children and young people (2009).

Policy-makers have examined the educational experiences of looked-after children and young people and also their post-school and post-care outcomes. Broadly, the educational policy context is underpinned by an aim 'to promote equality and help every pupil benefit from education' (Scottish Statutory Instrument, 2000).[44] This general principle of equality of access to education is confirmed in the National Care Standards

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43 Learning with Care: http://www.hmie.gov.uk/documents/publication/5679text.pdf

44 The National Standards: Care Standards Act, 2000 includes Scotland and NI. The Standards provide for the administration of a variety of care institutions, including children's homes, residential care homes. The aim of the Act is to reform the law relating to the inspection and regulation of various care institutions. The National Care Standards are framed within the aegis of the Regulation of Care (Scotland) Act, 2001, and in the Regulations and Guidance to the Children (Scotland) Act, 1995 National Care Standards: Foster Care and Family Placement Services Edition. Refer to: http://www.scotland.gov.uk/Publications/2011/05/16141925/0

Act, 2000. All children and young people who are looked-after must have a care plan in place which is reviewed at regular intervals. Under Scottish statute, education authorities are expected to ensure that looked-after children have the same opportunities as all other children for education, including further and higher education, and access to other opportunities for their personal and social development (Children (Scotland) Act, 1995 Regulations and Guidance Volume 2, Children looked-after by Local Authorities, paragraph 61: 14). When beginning to look after a child, the Local Authority must include information about the child's educational history and arrangements for his/her education in their care plan (The Arrangements to Look After Children (Scotland) Regulations 1996, Regulation 3(2)(a)).

Policy aimed at improving educational outcomes of children in care is considered important in Scotland, as research evidence has shown that many looked-after children – although only a small proportion of total schools' populations – experience exclusion from school.[45] This trend is evident in the 'Learning with Care' (2001) report, which showed that, while looked-after children represent 1 per cent of the school population, they account for 13 per cent of all exclusions.[46]

3.4.2   Measures adopted by the jurisdiction

One of the implications of recent policy initiatives around education provision for children and young people in care in Scotland has been a strong focus on gathering up-to-date data and information regarding children in care and publishing policy material to inform political decision-making and public discourse. Over the past couple of decades, the Scottish Executive has gathered data on looked-after children to help evaluate existing practices and inform the development of new policies. The government publication, *Educational Outcomes for Scotland's Looked After Children, 2009/10*, provides statistics obtained from linking, for the first time, data provided by looked-after children's agencies with data from education providers and organisations. The sources of data on looked-after children and young people are the individualised Children Looked After Statistics (CLAS) and returns from local authority social work services

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National care standards: care homes for children and young people Edition http://www.scotland.gov.uk/Publications/2011/05/16141058/0

45 For example, in a sample of 50 looked-after children in a joint inspection by Her Majesty's Inspectorate of Education (HMIE) and the Social Work Services Inspectorate (SWSI), 21 had been excluded from school at least once ('Learning with Care' (2001), Chapter 4, paragraph 4.9).

46 Parents have a legal entitlement to appeal against their child's exclusion from school (Education (Scotland) Act 1980, section 28H; Young people over sixteen years of age also have a right to appeal against their exclusion (Standards in Scotland's Schools Act 2000, s41). Children's rights of appeal against exclusion are particularly important for looked-after children as foster or residential carers have no rights of appeal against exclusion on their behalf.

departments. The sources of education-related data are publicly-funded schools, who provide information on attendance and exclusion; the Scottish Qualifications Authority (SQA), which provides data on educational attainment; and Skills Development Scotland (SDS),[47] which provide data on Positive Destinations of School-Leavers. The overarching aim of the analysis was to provide information that will help to evaluate existing practices and inform the development of new policies. The results provide key statistics on a range of educational outcomes for children who have been looked-after continuously during the previous 12-month period, in different types of care placements, and for pupils with multiple placements within the school year. For the first time, the data corresponds to the academic year (rather than the financial year) and will contain comparative analysis with children in the general population who are not looked-after. Furthermore, the Scottish Executive plans to provide year-on-year comparisons in the future.

The *Learning with Care* (2003) report helped with the development of resource materials, designed to assist care-workers and educational staff to raise attainment levels and improve educational outcomes among looked after children. These materials are aimed at foster carers, residential workers, social workers, teachers (particularly teachers with designated responsibilities for looked after children); education support staff and other specialist practitioners who work with looked after children. The *Learning with Care* report highlights the need to ensure that:

- The needs, rights and views of looked-after children are at the heart of decision-making;

- Each child and young person is valued as an individual;

- Needs arising from ethnicity, religion, language, and culture are met;

- The right of the child's or young person's family to be involved in their education is respected;

- Care is taken to respect confidentiality;

- Each child or young person is entitled to detailed, multidisciplinary assessment, care planning and review;

- The unique educational disadvantages that are experienced by looked after children and the special measures needed to overcome such disadvantages are recognised;

47 Created in 2008, Skills Development Scotland (SDS) is a non-departmental public body (NDPB) which brought together the careers, skills, training and funding services of Careers Scotland, Scottish University for Industry ('learndirect scotland') and the Skills Intervention arms of Scottish Enterprise and Highlands and Islands Enterprise. Currently, SDS employs 1,400 staff and has a network of public access centres and offices across Scotland.

- The right to permanent, full time education is accepted;

- Carers, social workers and teachers should work together to identify learning needs; set challenging, but realistic, educational targets; help raise attainment; and encourage educational achievement by developing children's and young people's skills, talents and abilities.

In October 2004, the Minister for Education and Young People announced funding of £6 million to support various pilot projects across local authorities with the aim to improve the educational attainment of looked after children. These pilot projects were in the following categories: provision of direct support (for example, extra tutoring, work placements, activities aimed at improving social skills and education); personal education planning (for example, monitoring academic progress and conducting needs assessments); support for children at various transition points (for example, entry to primary school, transition into secondary school, entry to further education); developing staff, parent and carer capacity (for example, training to support children's education); IT-based approaches (for example, use of specific software packages) (Scottish Government Social Research 2008: 17).[48] Overall, the project co-ordinators reported positive impact of these projects on student school attendance, reduction of school exclusions, improved engagement in education and rise in confidence. Educators, parents and carers also benefited and in some cases the pilots resulted in greater inter-agency cooperation (it should be noted, however, that there were differences across the projects and areas involved). The report (Scottish Government Social Research 2008), commenting on the impact of the pilot projects, noted that positive attitudes of staff involved and trusting relationships with the adults in the projects was crucial to the success. It suggested effective strategies for improving the achievements of looked-after children. Such strategies included encouraging children in care to have high but realistic expectations, tailoring support to suit an individual child or young person, flexibility, providing a breadth of learning opportunities, and not to give up on children, even if they are initially reluctant to engage. One of the most effective mechanisms recommended by the authors is to afford looked-after children opportunities to express their views on what their needs are and how they might be met. The evaluation study showed that some of the most dramatic success stories were projects that went to great lengths to help young people identify their goals.

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48 Created in 2008, Skills Development Scotland (SDS) is a non-departmental public body (NDPB) which brought together the careers, skills, training and funding services of Careers Scotland, Scottish University for Industry ('learndirect scotland') and the Skills Intervention arms of Scottish Enterprise and Highlands and Islands Enterprise. Currently, SDS employs 1,400 staff and has a network of public access centres and offices across Scotland.

3.5 Northern Ireland

3.5.1 Legislative and policy framework in Northern Ireland

In recent years, several investigations were carried out that highlight how Northern Irish society looks after children in care, including children with special needs and vulnerable children (for example, Northern Ireland Commissioner for Children and Young People 2008). Several initiatives suggest political commitment to enhancing education for children from disadvantaged backgrounds, including children in care. These initiatives include, for example, the S*trategic Plan for Education in Northern Ireland*, the ten-year strategy *Our Children and Young People: Our Pledge* (both published in 2006) and *Every School a Good School: A Policy for School Improvement* (2008). Young people in care and care-leavers have been highlighted as one of the priority areas in policy making (Office of the First Minister and Deputy First Minister (OFMDFM), 2010). This is evident in reports such as *Care Matters in Northern Ireland – A Bridge to a Better Future* (Department of Health, Social Services and Public Safety, Northern Ireland (DHSSPSNI), 2007); and *Care Matters Consultation Summary Report* (DHSSPSNI, 2009). The Care Matters reports emphasise educational outcomes for looked-after children, taking four key themes as the points of departure (Winter et al., 2011):

- Empowerment of education services to support looked-after children;

- Foster carers to be supported to engage with schools like any other parent;

- Inter-agency information sharing with information sharing about a child's care status informed by the best interests principle and respect for privacy;

- Equal access to the full range of learning opportunities.

The Care Matters reports recommend the following:

- Establish Looked After Children Education teams led by a senior Education Welfare Officer and staffed by two welfare officers and a youth worker;

- Expand the Fostering Achievement Scheme, which supports foster carers access to educational equipment and resources (for example, computers) and out-of-school support in the form of tutoring;

- Implement and monitor Personal Education Plans for looked-after children;

- Introduce statutory guidance on the above and other related issues, including prioritising the admission of looked-after children into schools.

A survey of educational attainment of children in care in Northern Ireland was conducted between 2006 and 2008. The findings, published by the Department of Health, Social Services and Public Safety (DHSSPS) in Northern Ireland, showed that, while levels of educational attainment of children in care improved slightly in some areas, they declined in others. Overall, children in care in Northern Ireland perform significantly less well when compared with their peers in the general school population and with looked after children in England.

3.5.2   Measures adopted by the jurisdiction

Winter et al. (2011) note that, until recently, statistics examining education for children in care in Northern Ireland have tended to focus on secondary schooling. However, data is now being collected on children in care in primary school settings.

Information is also available on the level of information exchange between agencies working within the care system. In general, Northern Ireland compares well with other countries on this issue. In Northern Ireland, under Article 46 of the Children (NI) Order (1995), Social Services are required to notify the relevant Education and Library Board when a child is taken into care. Sharing this information is important in order to be able to track the educational progress of children in care and ensure early intervention. Schools must refer pupils whose attendance drops below an agreed threshold and are required by law to notify the Board when a pupil is suspended.

All looked-after children should have a personal education plan commencing at the time they enter pre-school settings. The preparation of such a plan requires an assessment of the child's potential, drawing information from all relevant sources – schools, carers, children and social workers, and setting of realistic achievable targets that promote self belief and provide experience of success. The plan should also include opportunities for learning and development through after school activities, such as extended schools; statutory and voluntary sector youth clubs, clubs and personal development schemes.[49] It is important that the plan is monitored and reviewed so that it continues to be relevant for the developing child.

Being aware of what supports are available in school is important for carers. Schools should also be aware how the care system works and what is expected of them to ensure positive educational experiences for the child. This could be achieved by training to ensure mutual understanding and fostering co-operation in the best interests of the

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49 For example, Duke of Edinburgh and XL schemes.

child. If the education sector is to be in a position to support and monitor the progress of looked-after children, then additional resources will be required (Winter et al., 2011). The implementation of the new structures in Social Services and Education following from the Review of Public Administration (RPA) provides an opportunity to focus on the needs of these children and to ensure a consistent service across Northern Ireland.

In the last five years, there have been a number of initiatives within the education sector aimed at improving educational outcomes for looked after children. In the North Eastern Education and Library Board, a Looked After Children Team of two *Education Welfare Officers* was established. These Officers deal with all referrals of looked after children made to the Education Welfare Service (EWS) and provide training for schools' staff on care matters and training for social services' staff on education. The programme aims to enhance participants' awareness of the complex additional needs of these children. In the Southern and South Eastern Education and Library Board areas a resource handbook about education has been prepared to assist foster carers, social workers, teachers and all those involved with looked after children. In the Western Education and Library Board area, a joint protocol on the education of young people who are looked after by WHSSB and educated within the Board area was agreed in 2003. An *Education Welfare Service (EWS) Team* for Looked After Children, comprising two EWOs, a Youth Worker and dedicated time from Education Psychology, has been established. This team works closely with the Belfast Trust, South Eastern Trust, LACE, VOYPIC, Fostering Achievement, and Barnardos.

In 2001, a collaborative project aimed at the needs of looked after children Looked After Children in Education (LACE)[50] was set up. Most of the partner organisations are drawn from statutory bodies, such as the Department of Education, the Northern Ireland Office and the Department of Health Social Services and Public Safety. Under the *Children and Young People Funding Package*, funding is available to support the educational and development need of fostered children; to provide independent advocacy services for children in care; support care-leavers in staying with their foster parents until the age of 21; and support front-line child protection services that are able to respond more quickly to referrals. *Supporting Families Package* offers both universal and specialist services to the families and children.

The *Letterbox Club* project focussed on improving educational outcomes of children aged 7-11 in foster care in Northern Ireland. This intervention provides direct support

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50 http://www.education-support.org.uk/welcome/

for these children and involves personalised parcels posted once a month to children in the foster homes. These 'parcels' contain story CDs, various educational games, reading materials and stationary. In 2009, the Letterbox Club opened to every Local Authority in the United Kingdom. In 2010, 4,500 looked after children and 140 Local Authorities were involved in the programme. Northern Ireland joined the programme in 2009. In the Northern Ireland programme, as well as delivering 'parcels', various additional activities (e.g. reading and story-telling) are organised in local libraries for children in care. Winter et al. (2011),[51] who conducted an evaluation of the project, noted that the materials posted to children in care are carefully chosen to help to promote personal connection with the material. Children who had participated in the programme had made significant progress in reading and comprehension. In fact, the evaluation noted that 'the size of the gains made by the children in reading and number during the period they participate in the Letterbox Club can be regarded increasingly as a reliable predictor of what one can expect' (ibid: 50).

3.6   Summary

Across various countries, many children in care tend to be disadvantaged with regard to educational outcomes and equal opportunities. The case studies of Australia (Victoria), Canada (Ontario), Scotland, and Northern Ireland show this clearly. Existing research in these countries reveals that children in care are generally (but not always) at a greater risk of experiencing poor educational outcomes; compared to their peers they tend to underperform at school and many tend to have issues with behaviour, resulting in school exclusions. This chapter provides an overview of policy development with regard to education of children in care in these jurisdictions and describes some of the initiatives that have been established to address the educational needs of these children and the implications for practice. These initiatives are many and varied, ranging from approaches encouraging inter-agency collaboration to practical measures that can be implemented in schools. In all four cases, availability of national data for policy-making and monitoring of student outcomes is highlighted. Furthermore, all four jurisdictions have set up broader programmes to improve educational success for all pupils (for example, the Literacy and Numeracy Initiative in Ontario, Canada).

Region-based measures include approaches to linking up various databases to enable empirical analysis of student outcomes (for example, building the Looking After Children data into databases of various service providers in Victoria, Australia). In addition,

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51   http://www.letterboxclub.org.uk/usr/library/documents/main/queens-letterbox-evaluation-full-report-1-.pdf; http://www. letterboxclub.org.uk/usr/library/documents/main/queens-letterbox-evaluation-full-report-1-.pdf

in order to provide consistency in educational provision of children in care, national standards have recently been adopted in Victoria, with Standards 6 and 7 explicitly focussing on educational outcomes. On the other hand, in Canada, each province devises their own standards and policies, which may result in differences in approaches adopted. The *Looking After Children* (LAC) framework has been implemented in a number of jurisdictions in order to determine whether the needs of children in care (including education) are being met. School-based interventions include, for example, Great Expectations (Victoria), involvement of Education Welfare Officers (Northern Ireland), and specific projects (for example, the *Letterbox Club* project in Northern Ireland). The availability of resources for adults involved in the education of children in care cannot be underestimated. A particularly good example is the *Great Expectations* resource, which provides helpful strategies and learning activities that schools can adopt and links to relevant legislation and policy.

While all countries have put in place various initiatives, there is now a growing recognition that it is important to know whether these projects 'work'. Researchers in Scotland evaluated a number of pilot projects aimed at improving social skills and education of children in care. The results were mixed and varied by region and also by project. However, the majority of projects resulted in positive educational outcomes for the students involved. For example, the *Letterbox Club* in the United Kingdom was very successful in improving students' reading and mathematics results and, consequently, it was rolled out to over 140 Local Authorities.

It is important to note that in order to ensure student success, interventions need to be monitored and assessed. While some of the approaches being used in Ireland resemble initiatives adopted elsewhere (for example, guidance counsellors, education welfare officers, and home-school-community liaison officers), there appear to be no specific measures targeted specifically towards children in care. Moreover, research in other jurisdictions indicates that improved inter-agency collaboration in policy-making and designing initiatives, strategies, and resources is likely to provide a more consistent and reliable approach when catering for the needs of children in care and working towards improving their educational outcomes.

Chapter Four
Education of Children in Care: Perspectives of Key Stakeholders

4.1   Introduction

It is generally accepted that education difficulties experienced by children in care lie 'far more in the care and education systems than in the children themselves' (Jackson and McParlin, 2006: 91). However, there is a dearth of information and 'almost complete absence of empirical evidence' (ibid), both in Ireland and elsewhere, about the educational difficulties and experiences of children in care. Addressing this gap in research in Ireland, the second phase of this study explored the views and perspectives of 19 individual stakeholders with professional expertise and knowledge of the care and education systems. The stakeholders represented different professional backgrounds within care and education sectors; broadly, they can be divided into two groups: (i) those who work directly with children in care, and (ii) those involved in policy-making (see Chapter 1). This chapter presents an overview of the issues raised by the stakeholders.[52]

4.2   Stability in care setting and whole-school approach

In general, the stakeholders agreed that care and education experiences were inextricably linked when striving to achieve stability for children in care. They agreed that children who had constancy in their care placement from a young age shared largely similar education experiences to other children in the general population and encountered the same kinds of hurdles and difficulties in their education as most of their peers. On the other hand, the stakeholders believed that children who had multiple care placements and experienced disruptions and trauma in their care home very often have problems at school too and experience difficulties in education. One stakeholder drew particular attention to the difficulties for children who enter the care system at an older age and find it difficult to settle with the foster family; many can experience multiple placements before turning 18 years, with negative consequences for the continuity of their schooling.

The stakeholders agreed that a key aspect of achieving stability in the lives of children in care is nurturing good working relationships, communication and dialogue between school staff and carers, including foster parents and professional care staff. One stakeholder who worked in a residential care unit observed that 'communication between wherever the child is living and the school is crucial, it's really important'. Another stakeholder emphasised the importance of viewing the relationship between children in care and their carers as a parent-child relationship; she likened care and

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52   Where direct quotations are provided, the interviewee's name and details have been removed to preserve their anonymity and maintain confidentiality.

education staff to 'proxy parents' and argued that they are the only adults to whom the children can turn for help, advice or consolation. Another stakeholder gave an example of a young girl who came from an extremely traumatic home situation and spent her childhood in care but, thanks to a good schooling experience, achieved a successful career and good quality of life:

> 'They always accepted her; they never suspended her, even when she was kicking off. They gave her breakfast and they kept spare clothes for her in the school. They kept closely in contact with her social workers [...] they were committed to her.'

The consensus among stakeholders was that, for students who experience disruption and uncertainty in their home lives, school can provide constancy and stability. However, while they acknowledged this crucial role for schools, most of them believed the current approaches to schooling and education provision for children in care are uneven and unreliable. They agreed that a whole-school approach is generally regarded as the most appropriate measure for achieving constancy for children in care. This they described as an approach that creates a welcoming atmosphere for vulnerable children, including those from a care background. Ideally, schools would provide a supportive classroom environment, set a positive example for the students, and cultivate a climate of support, consideration and understanding. However, according to most stakeholders, in practice, the approaches adopted in schools tend to vary considerably, which they believe influences the climate in schools and the attitudes of staff and students towards children from care backgrounds. For example, in some schools, responsibility for children in care falls to specific staff members, usually principals, deputy principals, year heads, and class teachers. In other schools, the principal may appoint a designated care team to assume responsibility for all vulnerable children in the school, including those in care; typically, the care team would meet regularly with the class teachers to discuss the children and any problems that may be occurring. In other schools, particularly schools in the DEIS programme, responsibility for children in care rests with Home-School-Community Liaison officers and/or guidance counsellors, who combine their academic role with a pastoral one. According to the stakeholders who work in schools, staff who take responsibility for children in care tend to be better informed and more 'tuned in' to the difficulties and hurdles in their home lives. Consequently, they have a better understanding about events and circumstances in the children's lives outside school that affect their behaviour and performance in school – for example, children's visits with their natural families can be very difficult for some children and can result in behavioural problems in school.

4.3 Barriers to educational success

Based on their own experiences within the care and education sectors, the stakeholders identified specific problems that they believe affect children's education experiences. These included lack of and/or lengthy delays in assessment procedures; poor communication and interaction between carers and school staff; and variability in schools' commitment to support vulnerable students from care backgrounds, ranging from some schools that 'bend over backwards to make sure they give the kid every chance', to others that say they just 'don't have the time'. The stakeholders discussed the main 'barriers' they think are likely to impede the educational experiences of children in care. They adopted a broad, holistic understanding of education experience, including both attainment of qualifications and personal development and happiness in later life. The types of barriers they discussed included:

a) Inadequate communications and liaison between care and education providers;

b) Inadequate assessment of children's educational needs and access to appropriate services;

c) Disrupted schooling due to frequent placement mobility/multiple placements;

d) Poor attendance/high absenteeism among children in care;

e) Behaviour problems and stereotyping by others;

f) Challenges regarding progress through the education system and early school leaving.

Each of these barriers is outlined in more detail in the following subsection.

a) Communications and liaison

Most of the stakeholders suggested that, in practice, good communications and good working relationships do not always exist between the relevant adults that are involved with children in care. Relevant adults include school staff, carers/foster parents, birth parents, where appropriate, as well as relevant agencies operating in the care and education sectors (for example, the HSE, the NEWB, Youthreach, and the VEC). One stakeholder who worked in education services recounted her experience of poor communication procedures between care and education providers:

'...I'd been called to give evidence in court when a child has been discharged [from a residential care unit into a foster family] and six months later we find out [that] they [the social workers] haven't been able to secure a school place [nearby] and the child was moved to another county.'

A stakeholder with experience of residential care settings emphasised the role of communication between carers and school staff as a means of establishing links between the two major elements that constitute the child's daily routine:

'If the child has a bad night because something happened his mother or father, or whatever, we will let the school know before the child goes into school [...] he had a bad night, he may be a little bit upset today. And that's helpful, as a teacher you are tipped off, you are aware, you can look out for this child [...] All it might take is give them a job to do or, [ask] are you okay [...] or can I talk to you at break time?

'And likewise [...], if the child has a bad day in school or something comes up for the child in school, for the school to communicate that, and preferably before the child goes home [...] this little lad has had a bad day in school, he was upset or in a fight or whatever, so [the carers] can mind them again when they come home.'

Many stakeholders pointed out that one of the problems hindering effective communications and cooperation between schools and agencies is inconsistency in care personnel. Frequent staff changeovers, part-time employment among social workers and other care professionals, and replacement/stand-in staff can create difficulties in care provision, both for the children themselves, who experience difficulties establishing familiarity and trust, and for schools, who have to become acquainted with new care staff and 'start over' establishing new working relationships. Several stakeholders said this problem can lead to fundamental lack of awareness about the different roles and responsibilities of personnel in the care and education systems.

In general, the stakeholders felt there was a need for many schools to develop a better understanding of the kinds of issues that confront children in care in their home lives and the potential problems that can emerge in school. One stakeholder who works in a school suggested that teachers and other school staff with limited contact with children in care may not be familiar with the day-to-day challenges young people in care can face in their home lives and that may spill over into their school lives, whereas teachers

with more experience of working with vulnerable students may have a more informed understanding of their backgrounds and the effects on their behaviour and performance in school. Arguably, if teachers are more informed about the children's backgrounds, they can adapt their expectations of the children and deal with difficulties if they arise in an appropriate manner.

b)   *Needs assessment and access to services*

Some stakeholders, particularly those with experience of working and teaching in schools, claimed that many children in care display below-average academic achievement and have a higher-than-average requirement for specialist education attention. For example, one stakeholder said, in her school, many children in care 'receive learning support and they would be in the [...] lower quartile in terms of achievement'. The stakeholders were unable to confirm whether these trends of poor educational achievement are due to specific learning difficulties or social and economic disadvantage, or if they result from the compounded challenges of turbulent home-lives and lack of trusting relationships with adult role models, on top of the usual day-to-day stresses experienced by all pupils. However, they were clear about the options that are currently available to schools and carers/foster parents regarding children with special needs or problems. Schools have a number of options: they can report behavioural and disciplinary problems to foster parents or, for children in residential care settings, to residential care managers; they can refer problems to the child's HSE social worker or education welfare officer; or they can recommend students to receive a formal needs assessment, which should result in the student obtaining appropriate services from a special educational needs organiser (SENO).

One stakeholder described her experiences of a small number of schools that offer counselling and/or mentoring for children who need specialist support and/or play therapy programmes. However, the stakeholder was careful to point out that these were exceptional cases and are not widely available in most schools. Another stakeholder described educational settings that can offer supports for older students in care and those about to leave care. For example, Youthreach centres offer special programmes to help with learning difficulties, provide anger management programmes, counselling and mentoring to help teenagers and older students with behavioural and emotional problems.

Outside of these school-level options, carers/foster parents of students with special educational needs can apply for home tuition under a scheme provided by the Department of Education and Skills (DES Circular 50/2011). This scheme is not designed explicitly for children in care – in this respect, children in care can avail of the same

provisions as all students with special education needs. Most stakeholders were aware of this scheme, although only one or two had personal experience of using it. Those that had used it described it as overly bureaucratic and complicated and seemed to rely on strict and often lengthy assessment procedures. In their view, it is not and will be not be widely taken up by people in the care system. For these reasons, the stakeholders did not consider this a viable option.

Despite the availability of several options, several stakeholders held the view that the current system suffers from a lack of clear procedures for special education needs assessment of all students, including students from care backgrounds. In addition, they argued that needs assessment must be backed up with access to services, resources and supports. The current provisions, one stakeholder argued, are 'reactive rather than proactive' and do not cater for 'holistic assessment of children's needs'. Furthermore, when children's education needs are identified, many find the specialist services they require may not be located nearby, which means children may need to travel and, consequently, require transport services, adult assistance and/or additional resources. The stakeholders pointed out the practical difficulties for children themselves, for their foster parents, and for schools/ education providers.[53]

c) *Disrupted schooling due to frequent placement mobility/multiple placements*
Disrupted schooling due to frequently changing care placements was the most prominent issue raised by the stakeholders and the one that they identified as 'the main area of concern'. Under current practices, stakeholders said, children can be moved frequently from one care arrangement to another when their placement breaks down. The principal motivation for moving them out of care settings is to ensure children's safety, so when social workers are confronted with dangerous or emergency situations; they frequently have little option but to move children, often at short notice. An added complication is that it may not always be possible to relocate them in foster care in the same geographical area. Consequently, children who are moved to a new care placement may also need to move to a new school.

There was consensus among the stakeholders that frequent mobility and multiple placements results in lack of continuity and constancy in children's lives, which can be detrimental to their personal development, engagement in school, and educational

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53   Related to discussions of access to educational services, several stakeholders noted that there can be problems for children in care gaining access to certain schools, for example, school authorities have a lot of autonomy and are free to operate their own admissions policies, which may potentially disadvantage children from a care background. There is evidence in the literature to suggest that admission policies giving preference to children of past pupils and those with older sibling(s) in the school may disadvantage some families and children, especially if they are new to the area and school (Smyth et al., 2009).

progression. The words of one stakeholder illustrate the potential damage incurred by frequent mobility:

> 'Moving the children around from place to place, because with that goes moving from school to school, moving from curriculum to curriculum, moving from friends to friends, and none of this helps to build children's educational or, indeed, social [self-]worth.'

Several stakeholders suggested that moving children from school to school may give an impression that care professionals do not regard education for children in care as a priority, but they were keen to point out that this was not the case. Rather, it is that children's safety and welfare take precedence. One stakeholder said they aspire to 'keep the show on the road [...] even if that means education can take a back seat'.

The existing care policy requires that all children in care have a care plan tailored to meet their specific needs, including their educational needs. However, according to several stakeholders, this 'is not always being done'; furthermore, even when a care plan is drawn up, there are occasions when it is not implemented. The reasons suggested for this are many and varied, and tend to be linked to practical questions around ensuring children's safety in their care placement, even if it means disrupting their schooling or interrupting their education plan.

Moving to a new school presents challenges for all students, for example, meeting new peers and teachers, new buildings and environment, new sets of rules and regulations, different approaches to teaching subjects, finding they are 'behind' in some areas, and feeling 'lost' when the teacher is teaching. However, children in care who move to new care placements frequently find they have to overcome these challenges in addition to overcoming serious difficulties in their home and personal lives, such as new living conditions, new 'parents', siblings and family circumstances, changes of geographical location/environment, loss of their old friends and of all that was familiar to them. Many stakeholders noted that the biggest problems for children settling in to a new school tend to be more in the social sphere than in the classroom. They gave examples of children in care who, on changing school, lost contact with their old friends, found it hard to make new friends, had difficulties joining clubs or participating in sports or extracurricular activities, and felt 'left out', different and worried. According to the stakeholders, children in care are like all other children – they just 'want to be accepted ... they want to be just like everybody else ... they don't want to be singled out'. For many children in care, being perceived as different from their peers may result in them being

'highly susceptible to bullying', while others 'put up walls' or withdraw themselves from situations in order to protect themselves from getting hurt. The stakeholders pointed out that, while these kinds of issues can apply at times to all students during their school lives, the important point to highlight for children in care is that many do not have a strong, trusting, supporting home background or adult figure to turn to when they experience difficulties in school, as other students are more likely to have.

Several stakeholders suggested it may also be useful for children in care if they received an induction session before they start in a new school. This would help them to understand the new environment, with all its rules and regulations, and help them to fit in. For example, one stakeholder described how she tried to provide such assistance for children from care backgrounds and 'go through possible scenarios' with them, in order to prepare them for situations and questions they may encounter, for example:

> *'I would say to the children, 'You are going into a new class, they are going to ask you what school were you in last, where are you going to tell them, are you okay to tell them you were in a special school? And, if they ask you, are you okay to explain to them what that means?' I'd role-play with them...'*

Stakeholders with experience of working with children in residential care settings reported additional problems. They revealed some of the practical difficulties for many children trying to contend with the two very different worlds of residential care and the mainstream school environment, including children's reluctance to tell others where they live; children getting off the bus at different stops on the way home from school to divert attention from the residential home; reluctance to invite friends to visit and to host birthday parties. According to the stakeholders, many children in residential care experience 'a multiplicity of issues' that go beyond education and schooling and can affect their overall well-being and quality of life.

For older students, problems of settling into post-primary school and/or post-school training programmes largely tend to relate to their earlier educational experiences. As referred to earlier, several stakeholders believed that some older children may already have developed habits and attitudes that they find hard to break.

d)   *Attendance and absenteeism at school*
Several stakeholders working in the education system observed that poor school attendance/ higher absenteeism tends to be more prevalent among children in care than those in the general population. Furthermore, according to one stakeholder

with experience of residential care settings, poor school attendance may be an issue among children in residential care. The stakeholder observed how some older children in residential care settings developed negative attitudes towards school and their educational attainment. Very often 'they just refuse to go' or they drop out entirely. For many young people in care, the problems escalate as they get older and progress through secondary school. Several stakeholders recounted examples of students who dropped out of secondary school due to problems they were experiencing in the school, often emanating from lack of consideration by teachers of their home circumstances and the consequent problems they wrought in the students' behaviour and academic performance, for example:

> 'Young people have said to us, 'well, I moved to a different school and they were doing a different course than I was doing, or they were at a different place in the maths book, then the teacher said I was stupid' ... So they opt out of school.'

The stakeholders did not outline causal factors behind poorer attendance among children in care. However, the accounts of their own experiences suggested several possible explanations, such as students' poorer levels of social integration, emotional problems, academic difficulties, behavioural issues, family background and familial/ parental attitudes towards the value of education. In general, discussions around poor school attendance pointed to problems that lie in the broad social and cultural sphere, as well as different attitudes about the value of education between the natural family and the care and education professionals. Several stakeholders discussed cases of children in care whose natural parents (and very often their older siblings) did not 'see a huge value in education or schooling' and did not encourage or enforce school attendance for their children, either while the children lived at home or when they were placed in foster or residential care. The stakeholders observed that these parents were likely to 'have had very negative experiences in school and may have themselves left school early and may not be able to read or write and they may feel very overwhelmed coming up to the school'. Furthermore, negative attitudes towards schooling may continue from childhood into young adulthood, for example, one stakeholder with experience of teaching older students from care backgrounds believed that many students find the 'habit' of poor school attendance they developed when younger 'hard to break' by the time they reach their teenage years. This interviewee told us this is one of the hurdles that post-school trainers try to tackle in young people from care backgrounds.

e)   *Behaviour problems and stereotyping by others*

Most of the stakeholders alluded to problems relating to behaviour (both in the classroom and the schoolyard), discipline, and punishment, including suspension and/or exclusion from school. In general, the stakeholders suggested that challenging behaviour among children in care may be an outcome of the difficult 'life issues' many of them experience from a young age, which result in poor social skills, lack of self-confidence, and uncertainty about how to handle emotions. Hence, the stakeholders suggested that teachers may be better able to understand and deal with behavioural problems if they know more about children's backgrounds and their routes into foster or residential care.

One of the inevitable outcomes of students' behavioural difficulties in school could be that many acquire a reputation for 'bad' behaviour and may earn a label as 'problem' students. In turn, the labelling process is likely to reinforce the negative stereotype that is frequently applied to children from care backgrounds, which, according to several stakeholders, often emanates from other people's (inaccurate) perceptions about what it means to be 'in care'. One stakeholder suggested this process is evident in school staff sometimes taking unnecessarily or inappropriately punitive action towards children in care, without considering the broader picture of the personal difficulties the child may be experiencing.

One of the consequences of negative stereotyping is that children's behavioural reputation may start to overshadow their schooling. According to several stakeholders, negative stereotypes are often detected by children in care themselves and can potentially result in feelings of low personal self-esteem and affirmation of students' self-perceptions that they are low-achievers and unsuited to an academic-oriented education. One stakeholder claimed to have observed this process at first-hand in school, when some children in care were 'stigmatised, bullied sometimes, shouted at in the schoolyard' or were ostracised, singled out, or when students turned themselves into a 'feature' of the classroom, like 'the class clown, to get a bit of positive attention'. For some children in care, fear of negative stereotyping may lead to being 'afraid to admit that they are in care' and result in secrecy, hesitance about opening up to others, and reluctance to make friends. Several stakeholders pointed out that, where it occurs, the negative stereotyping of children in care at school may be exacerbated by frequent moves to different schools, as children who are frequently moved around become perceived as 'problem' cases.

Several interviewees expressed the view that, in their experience, behavioural and disciplinary issues tend to be more serious among children living in residential care compared to those living in foster families. They suggested the reason may be that

children living in foster families are accustomed to having to 'function in a family setting, in a household where there's rules and regulations, so [they] were behaving reasonably well in school', whereas, children in residential care very often experienced additional problems and 'there can be a huge loneliness and isolation for them as well'.

For older students attending post-school training programmes, issues around behaviour tend to be dealt with differently than in schools. In these more adult settings, the emphasis is on encouraging students to recognise the value of training and education, and earning their trust and respect. However, the fundamental difference here is that, for the most part, these staff members are dealing with motivated individuals who chose to enter a particular programme or return to education, unlike some of the school-going students who present with difficulties around attendance and participation.

Some stakeholders referred to the role of the NEWB in helping schools deal with problems of poor attendance, challenging behaviour, participation, and retention. Most stakeholders welcomed the services provided by the NEWB; they felt that the situation has 'been good [...] since the NEWB are on board', and were optimistic that its interventions can result in further improvements for children in care, as well as other vulnerable children.

f) Early school-leaving and educational progression
Several stakeholders had experiences of young people in care leaving school prematurely, mostly at around Junior Certificate level. In their view, the reasons for this usually involved a complex range of personal, home and family problems. One stakeholder recounted a positive anecdote about a school that took the pro-active decision to intervene in cases of early-school leaving among students from care backgrounds, providing support and encouragement to help students continue in school.

Several stakeholders who work with teenagers from care backgrounds raised the matter of post-school training and education programmes. One of the big challenges for many carers and teachers is how to engage young people who opt out of school in alternative forms of education or training programmes, such as Youthreach. Many young people in care (and those on the verge of leaving care) may be 'turned off' the idea of pursuing further education by their school experiences and, according to a stakeholder with experience of working with early school-leavers, 'the older they get, the harder it is to force them'. One stakeholder reported that there are few formal mechanisms for getting young people into further education and training programmes. It is usually achieved through informal personal communications between the students, the HSE, staff in their schools or in Youthreach

centres, and their foster parents or carers in local residential care homes. According to the stakeholders, this informal practice has pros and cons: it has the benefit of allowing for flexibility and case individualisation, but the loose structuring allows arrangements to be ad hoc and discretionary.

Stakeholders who work with young people on training programmes like Youthreach said that, once students from care backgrounds enter these programmes, they tend to stay longer than their peers who are not in care, usually for three or four years compared to about two years. Most complete FETAC Level 3 and some stay on to complete Level 4 or 5. The stakeholders also referred to PLC courses and third-level education, although they said attending university or third-level colleges is still a relatively rare occurrence among people from care backgrounds.

One stakeholder pointed out that many young people in care attend schools in localities where progression rates to higher education generally tended to be low. Another stakeholder had frequently known young people from care backgrounds who left school with minimal or no qualifications and, later in life, returned to education, for example:

> 'I knew a young girl who struggled through primary, didn't attend secondary and went to a youth project [...] and then at 22 she decided that she was an awful eejit, as she said herself, to mess up the thing [...] and she's gone back to do her Leaving Cert.; she wants to do social work.'

Several stakeholders suggested that young people in foster families are more likely to continue in further education after they leave school, compared with young people in residential care settings. While they had no definitive evidence to support this claim, they believed it and suggested it may be attributable to the family environment that exists in many foster homes, where foster parents emphasise the value of educational qualifications and encourage the foster child to engage in school in the same way they encourage their birth children.

4.4   Stakeholders' recommendations

The stakeholders made a number of general recommendations for changes in the care and education sectors. They also offered practical suggestions for improving schooling and education provision for children in care. Their recommendations and suggestions can be synthesised into two broad areas: 1) Policy, or system level, recommendations; and 2) School-level recommendations, which incorporates student-level suggestions.

1)   Policy or system-level recommendations

The stakeholders generally believed that many of the barriers to education provision for children in care apply to both the education system and the care system. The two main criticisms of policy in this area they identified were interrelated: first, the existing policies lack clarity and specification, as one stakeholder suggested, there is a 'mish-mash of policies, some of them clashing'. Second, existing policies are not implemented, which, one stakeholder suggested, may be due to the fact that policies lack clarity and are, therefore, difficult to follow through.

There was consensus among the stakeholders that greater cooperation and collaboration between the care and school/education providers is essential to ensure that children in care receive the level and quality of education they require and to which they are legally entitled. Several stakeholders argued that, while this is the stated aim of the current care model, it does not always happen in practice. They generally agreed there needs to be effective communication and good working relations between schools and foster families or residential care settings, for example:

> *'...to brief schools of the child's needs and present [to] school reports, so the school is fully aware of what the child's needs are and may be able to prepare for that, and if the child has special needs, then a special needs organiser also has to be part of that process'.*

A small number of stakeholders said that, at the national level, there appears to be a lack of systematic planning and formally agreed protocols for education provision for children in care. However, one stakeholder with familiarity in this area indicated that the NEWB is currently working with the HSE to develop such protocols. Some stakeholders, including those whose professional role is in policy-making and those working on the ground with children in care, believed education should feature more strongly in policy-making within the care system. They argued that services need to be put in place to ensure that education is treated as a priority for children in care. In particular, they suggested, this should involve early assessment of children's learning needs. It should also involve the establishment of an effective system for providing training, or capacity-building in a broader sense, for foster carers, in order to help them assist their foster children with all aspects of their schooling, including academic work and interaction with teachers and peers.

Several stakeholders observed that, in recent years, there has been talk at the policy level about the welfare of children in care, particularly, they said, since the publication of the

report by the Commission to Inquire into Child Abuse (*Ryan report*) in 2009. There were suggestions that policy-makers and service providers, including the HSE, are 'finally starting to realise that [...] the State has to take a much more rigorous approach to the[ir] welfare'. However, there was also a strong feeling among most of the stakeholders that, in practice, children in care appear to remain far down the political agenda and, while there have been some instances where resource allocation for children in care has improved, the pace of change has been very slow and piecemeal. One stakeholder said that, aside from a couple of mentions of minor increases in staff numbers in welfare provision in one or two areas, few policies, if any, have resulted in meaningful change.

2) *School-level and student-level recommendations*

Several stakeholders suggested schools need to show initiative and interact with personnel working within the care system. This would facilitate both groups sharing their knowledge about children and working together on behalf of the children. They also suggested that teachers and other education providers may benefit from specialist training about the care system. The stakeholders suggested training should be provided both as part of initial teacher training and continuous professional development. Training would help them to work with and support children in care (and their carers) and learn effective ways of dealing with challenging situations that may arise in school.

One stakeholder suggested that teachers might benefit from attending case conferences for children in care, along with their social workers. This would give insight to children's background, living circumstances and needs. However, the stakeholder acknowledged that it may not be practical for teachers to be released from class during the school day to attend such meetings.

Despite reference in the National Standards that social workers would share information on a confidential basis with the school if required, at the time the interviews were conducted, several stakeholders reported that there is no national protocol around whether or not schools should be informed about the parental/family circumstances of children in care. They agreed that this is a contentious issue and opinion on it varies. On the one hand, there is a feeling that all children should start school with 'a clean slate', thus avoiding unnecessary stigmatisation. On the other hand, stakeholders suggested that withholding information about children's background may create difficulties for teachers and school authorities, which in turn may act against the best interests of children in care. Given this dilemma, several stakeholders suggested a compromise arrangement, whereby responsibility for vulnerable children from care backgrounds may be assigned to selected staff members, such as the year head and teachers. These

personnel could be made aware of any difficulties experienced by children in care and, with that, would be better equipped to address issues arising and to provide necessary support and assistance.

There appeared to be different understandings among the stakeholders as to whether it is preferable for students to reveal or conceal the fact that they are living in care. By revealing it, several stakeholders suggested, students could inform their peers about the reality of the care system and begin to tackle the problem of negative stereotyping. But other stakeholders did not encourage disclosure and favoured the practice of diverting attention from issues that may 'differentiate' children in care from other students. In practice, however, it can very often be difficult to conceal being in care. For example, one stakeholder pointed out a visible practicality that can be a very sensitive issue for children in care, particularly those in residential units, is dropping and collecting children at school. The stakeholder recounted cases of children in care who were dropped and collected by different members of the care staff or were driven in taxis. In the stakeholder's view, this drew attention to the 'difference' of their living situations and singled them out among their peers. Some stakeholders considered it in the best interests of the child to fabricate truths around these kinds of behaviours, while others did not see it as the appropriate role for schools to either conceal or participate in tackling the issues that led to students' stigmatisation and negative stereotyping.

The stakeholders made several other practical recommendations for schools to improve the quality of education experiences for children in care. For example, they recommended that schools should discuss students' educational needs with the children themselves and with their carers/foster parents/guardians, over and above the existing discussions that are facilitated through regular parent-teacher meetings. They also suggested that, where appropriate, schools might consider entering into dialogue with other relevant agencies, such as the Higher Education Authority (HEA). The stakeholders emphasised the need for improved collaboration between schools regarding children in care, especially when children are moving to new schools or moving from primary to post-primary school. Such communication, they believed, is vital for the implementation of children's Individual Education Plans.

While most stakeholders agreed that a whole-school approach based on inclusive education may be preferable for engaging with students from care backgrounds, one or two stakeholders also suggested that schools might consider appointing one member of staff who would hold overall responsibility for children in care. This staff member could get to know the children well and aim to establish supportive, trusting relationships with

them. For example, when children in care start to disengage and complain about being 'bored' in school, or say they 'have no friends... nobody likes me', it may be helpful...

> '...if the child had [...] one significant person that they could link into every day, preferably first thing in the morning, [a] teacher, counsellor or the resource teacher or an [Special Needs Assistant] SNA or somebody that can just ground them [...] somebody that they can have a positive interaction with in the morning first thing and set them up for the day.'

Underlining all the discussions about communications for children in care was awareness among the stakeholders of the requirement to respect children's privacy. The stakeholders were careful to point out that it can be difficult to quantify the amount of personal, background information on children in care that is useful for providing support. One stakeholder recounted the words of a young man he knew from a residential care setting who described his growing-up experience as 'like being a goldfish in a goldfish bowl'. The general consensus among the stakeholders was that, 'it's a balance between stigmatising the child and keeping the information flowing'. The correct 'balance' lies between knowing enough about the lives of children in care to be able to help and support them and interfering in their lives; and this 'balance' is different for every child.

Several stakeholders mentioned the importance for schools to develop codes of behaviour containing guidance on managing challenging behaviour among vulnerable children, including children from care backgrounds. There was a general feeling among the stakeholders that schools should adopt flexible approaches for dealing with behavioural and attendance problems among students in care, who may experience difficulties trying to reconcile their care situation with mainstream schooling. This should include encouraging students to respect school rules, while at the same time, teachers taking into consideration individual children's circumstances and needs. For example, early intervention by teachers and/or school staff, using situation-specific disciplinary methods when dealing with children from care backgrounds (for example, less authoritarian, not in front of their classmates, alternative forms of censure or correction). The stakeholders acknowledged that it is difficult to make one explicit ruling that applies to all cases, as children in care constitute a very diverse grouping. Thus, these suggestions may also be relevant for vulnerable children more generally.

This chapter focused on the views and perspectives of key individual stakeholders with professional experience in the care and/or education sectors. The interviews highlighted the key issues the respondents themselves considered important. The discussions yielded three cross-cutting themes: first, stakeholders' perspectives on the educational experiences and needs of children in care; second, schools' approaches to supporting children in care; and third, policy and provision in relation to education for children in care.

In general, the stakeholders agreed that, for many children in care, school can be an enjoyable and academically worthwhile experience. However, for others, particularly those who have been exposed to difficult conditions in their family and home lives, the situation can be very different. Many of the stakeholders with experience of working directly with children in care emphasised this point.

A lot of the topics discussed with the stakeholders reflected the issues contained in the literature. The most important was around poorer levels of educational success, in its broadest definition, among children in care and the barriers in the care and education systems that hamper these children from achieving their potential. According to their own experience, the stakeholders said children in care do not perform as well as their peers from non-care backgrounds, either in terms of their grade attainment or their behaviour and attendance. We know from previous research that children in care tend to have poorer levels of educational attainment than their peers in non-care families (McClung and Gayle, 2010; Aging Out, 2007; Jackson, 1994, 1998). They tend to have higher rates of school transfer, absence, punctuality problems, suspension, and expulsion; they are less likely to do their homework, sit for exams, receive school-leaving qualifications, or continue on to post-school education (Bruskas, 2008; National Conference of State Legislatures, 2008; Aging Out, 2007; Barber and Delfabbro, 2003; Burley and Halpern, 2001). Research has also shown that children in care were found to have more disabilities that hampered their learning and experienced higher rates of school disciplinary problems (Havalchak et al., 2009). There is evidence from a study conducted as long ago as 1990 that the incidence of emotional, behavioural, and developmental problems among children in foster care (including depression, conduct disorders, difficulties in school, and impaired social relationships) was three to six times greater than the incidence among children not in care (Dubowitz, 1990). Twenty years on, a study conducted by the American Academy of Pediatrics (2000) estimates that almost one-third of children in foster care have severe emotional, behavioural, or developmental problems.

The stakeholders' discussions around education were not entirely focused on the negative aspects of schooling; they also emphasised the strong indirect benefits of school for many children in care. In their views, schools can provide stability and constancy for children in care, a potential counterbalance to the disturbed and traumatic home lives they may have endured. The discussions on this point highlighted how positive school experiences for children in care can enhance their well-being, help them make more successful transitions to adulthood.

Thus, the stakeholders argued, schools have a shared responsibility to engage with the challenges that can arise for children in care. In general, the stakeholders believed a whole-school approach is the most appropriate way to achieve the level of openness and flexibility to cope with a heterogeneous student population. However, they also had a general perception that schools vary in the degree to which they achieve this. Most stakeholders indicated the difference depends, in large part, on schools' policies around delegation of responsibility regarding children in care. In turn, this sphere relies on both the effectiveness of policy direction for education of children in care and the commitment of individual school personnel, particularly the principal, who is responsible for decision-making around staff roles. In practice, according to the stakeholders, whole-school approaches tend to be somewhat loosely interpreted by schools and, in practice, responsibility for dealing with children in care tends to fall on certain individual staff members, usually the principals, deputy principals, year heads, and/or class teachers.

Furthermore, stakeholders argue that schools cannot act independently in engaging with children in care. They rely heavily on cooperation with care professionals and receipt of accurate information regarding children's needs. Schools need to work closely, therefore, with social workers and other agencies involved in care and assessment of children's needs. This requires better inter-agency liaison and communication practices between care and education professionals than currently exists.

Regarding individual children themselves, the stakeholders made several practical recommendations about how their educational experiences might be improved. For example, they stressed the need for all children in care to be assigned a designated social worker with whom they can get along and approach with ease and confidence; for children to be assigned a designated adult in school with whom they can develop a trusting relationship and to whom they can turn when they need help, support and encouragement; for children to have prompt assessment of their learning needs; and for assessments to be translated into service delivery. At a broader level, children in care experience difficulties that relate to their social and, for many, disadvantaged,

circumstances. The stakeholders pointed out that some children from care backgrounds may be educationally disadvantaged before they start school on account of their personal and family circumstances – for example, problems like limited vocabulary, lack of familiarity with books or reading matter, and lack of value placed on education may put some children in care at a relative disadvantage in the classroom. Furthermore, there was general consensus among the stakeholders that children from troubled backgrounds tend to have serious anxieties to contend with, which can distract and impede their engagement in school and educational progression. These opinions are substantiated by existing research in Ireland that shows that young people in care are likely to experience a range of disadvantages, many of which impact on their educational progress and performance (Daly and Gilligan, 2005).

In conclusion, according to several stakeholders, one of the biggest challenges around education provision for many children in care lies in the apparent incompatibility between disadvantaged and/or dysfunctional family circumstances and a mix of care placements on the one hand and, on the other, the environment in mainstream schools, which draws on a largely institutionalised, academic ethos and middle-class culture (McLeod and Yates, 2008; Reay, 2008; Clancy, 1995). While this problem may apply for a range of students from disadvantaged backgrounds, the stakeholders suggested it is particularly acute for children in care. In addition to problems relating to social background, many of these children have to contend with all the usual growing-up challenges against a backdrop of extremely problematic home lives, lack of trust, and dealing with the stigma that still attaches to living in care. A large part of the problem, according to the stakeholders, lies in the lack of clarify in existing policies around education provision for children from care backgrounds.

Chapter Five
Educational Experiences of Children in Care: Perspectives of Children in Care and Care-Leavers

5.1   Introduction

In this chapter, we draw on the perspectives of a number of children in care to inform our study of the educational experiences of this group of young people. The chapter presents the analysis of one focus group and 10 face-to-face interviews conducted with a total of 15 children and young people currently or formerly in the care of the HSE. The interviews sought to explore their experiences in primary and/or post-primary schools in Ireland.[54] The inclusion of the views of these young people highlights topics that they considered important and serves to illustrate issues that may be considered relevant by other young people in care in Ireland. In particular, the chapter focuses on issues such as the impact of home background and care on the experiences of the children in school; difficulties with settling into new schools and learning environments; social integration and academic performance; future expectations; and specific suggestions for improvements in schooling and education provision for children from public care backgrounds.

This chapter highlights the perspectives of a small number of primary and post-primary school children as well as the retrospective views of young care-leavers[55] in order to gain a better understanding of some of the factors that can impact on the educational experiences of children and young people in care at each stage of formal schooling and, where relevant, beyond.

5.2   Potential impact of (birth) family background

As discussed in previous chapters, some school-age children taken into care have a background history of family difficulties which may impact on their academic progress and behaviour in the school system. The analysis of the interview transcripts revealed that four young people felt that their (birth) family background had impacted on their experiences at school. The way these young people responded to the situation at home was different – for one young care-leaver, the primary school provided a welcome change from the difficult environment at home. However, this young person remembered that, although he enjoyed school, he also had a tendency to get into difficulty:

> *'No, I loved school, I loved primary school – it was escapism for me because I'd troubles at home. So when I was in school everyone was on an equal footing like. […] I was in trouble all the time, looking for attention more than anything else.'*

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54   As discussed in Chapter One, the children under 18 years of age were recruited with the assistance of HSE personnel and were not selected by the researchers. We acknowledge the diversity of the participants and that their views may not be generalisable across the whole population of children in care.

55   See Chapter One for further information.

Another young care-leaver remembered school life as having 'got in the way', as he was mostly preoccupied with life at home and his family and less focused on school:

'At the start I didn't [enjoy school] because …life wasn't that easy at the time so school didn't help either because it was like un-comfort zones all the time, school got in the way because you weren't able to focus on it….School was in the way to be honest, like you don't want to be there because at home you don't know where you are, you want to see your family, at the time you were like your family was everything, you know yourself.'

[Face-to-face interview with Oisín, care-leaver]

In addition, this young man reported that when already in school he felt that, because his birth parents 'showed very little interest' in him or his education, he was not able to participate in all school activities (e.g. sport) on equal terms with other children. However, while he had little understanding at first of 'what sport was', Oisín started to play and later 'would not miss a game':

'….there was people in senior, junior, senior and first class, second class, they all knew what sports was, but my parents didn't show much interest in me, so I didn't know what sports was. It was only when I was in third class, when I started living here [in the foster family] that I began to take up sports, talking about football and Manchester United, I started to play and I used to play every lunch break, I wouldn't miss a game you know and started to develop a bit.'

[Face-to-face interview with Oisín, young care-leaver]

One young woman reported that her problematic (birth) family background had a particularly negative impact on her experiences at school, where she felt she was 'picked on' by fellow students and teachers. She thought that the situation was magnified by the fact that there seemed to her there was little awareness among the teachers of her personal circumstances and home life, which led her to develop a negative view of school:

> *'I hated primary school. … like I didn't go into care, like I was in care before I was six and then I was back out when I started school, … and it was the worst experience of my life. Like I was bullied by teachers, I was bullied by students, I didn't have a school uniform, never had school books, never had a lunch going to school'*

[Margaret, Focus group with care-leavers]

For Oisín, getting settled in a secondary school took a long time because of issues associated with his birth parents – according to him it wasn't until the third year that he felt comfortable in the school:

> *'First and Second Year was still a bit, you know, stuff with family at home and stuff, Third Year you become a bit more developed as a person, 15, 16.'*

[Face-to-face interview with Oisín, care-leaver]

Oisín had one short-term and one long-term care placement. He noted that, once he was in a stable living environment, his situation in school began to improve. While Oisín and Margaret [in different foster families] noted how their (birth) family background had affected their experiences at school in terms of getting on academically and making friends, two other young people, Tommy and Robert – who were both placed into general foster care at an early age and stayed with the same respective foster families throughout their childhood – did not seem to have had difficulties at school. The common characteristic of these four cases was that the children's foster families and carers supported them and had high expectations for their educational attainment and future lives. These qualities appeared to have positive effects on the children's overall experiences at school and their desire to succeed.

5.3   Changing schools and settling in

Being taken into care and changes in care placements sometimes involve changing schools. As noted in Chapter Two, research evidence seems to indicate that frequent changing of schools may impact on students in a negative way (Legault et al., 2006). Several young people in the sample experienced frequent school changes and said they found it difficult, but something that one got 'used to':

> *'I changed a lot of primary schools… I changed about, honestly about four times, three or four times… It was hard a little bit, but I got used to it.'*

[Face-to-face interview with Annie, residential care, post-primary school]

Another young man who had experienced frequent changes of schools, Philip, said he could not settle into most schools and, while efforts were made to find alternative schools suitable for him, the frequent changes meant that he had difficulties adjusting to the new environments:

> 'I kept getting shifted around in schools, so I don't really have much memories of primary school at all… I kept getting changed schools to try and suit me or something like that because I just couldn't settle in in most schools… So it was very awkward trying to remember which school I went to like and try to remember like who I was talking to or who I used to hang out with, so… I went to about eight, I just couldn't settle in any of them.'

> [Philip, Focus group with care-leavers]

As a separate issue, in some cases foster parents took considerable steps to enable their foster child to remain in the same school. For example, in order to avoid further disruption of Susan's schooling when she was placed in care, her foster family drove Susan every day a considerable distance to her primary school.

When asked about their experiences of getting used to new schools, the majority of respondents said they settled in relatively quickly. For Mary, going to a new primary school for the first time meant she had to get used to new teachers and peers, but for her, making new friends did not take long:

> 'It was like a bit hard because like it's new, new teachers, new class and new friends and all and like you have to get used to the routine of being in school… ..I'm really good at making friends, like I just, the moment I say hi then they just start talking and then we just start being friends, so…'

> [Face-to-face interview with Mary, general foster care, primary school].

However, for others, the process took much longer. For example, Nadine attended several different schools in Ireland and one abroad. According to her, getting settled into her current school took nearly a year, as she was not very outgoing at first:

> 'It took me about a year really, long enough… I was just too shy; I wasn't as outgoing as I am now'

> [Face-to-face interview with Nadine, relative foster care, post-primary school].

Nadine said she now feels very settled in the school, her confidence had grown and she has made many friends in the school.

The transition from primary to post-primary school was not raised as an issue of particular concern by the participants. Richard (care-leaver) said that he settled in secondary school 'straight away', while Margaret and Lindsay (care-leavers) both noted that they had preferred post-primary school to the primary school. Tommy (general foster care, primary school) said he was looking forward to the transition 'because people say it is good and fun'. However, Annie (residential care) confessed to being a little nervous on her first day in post-primary school because she 'did not know who to talk to'.

5.4   Support from relevant adults

As discussed in Chapter 2, foster carers and care workers play an important role in supporting the educational progress of children in care both through providing practical supports and having positive attitudes towards education. The experiences of some young people who participated in this study showed that those who had stability of foster care from an early age and whose foster parents valued education tended to do well at school and beyond. For example, Robert, who lived with the same foster family from a very young age, received the same encouragement to do well at school from his foster parents as did the other children in the family (including biological children and another foster child). According to Robert, his foster parents' support helped him to focus on his studies at school and progress on to college:

> 'I had a lot of support which other young people in care may not have at the time, because when you're doing your Leaving Cert you are just turning 18, you have got an awful lot of other stuff on your plate such as where am I going to go when I'm finished my Leaving Cert, how am I going to get to college? […] Young people in care have a lot more issues than just, ah I wonder what points I'll get in my Leaving Cert so I can go to college […] They encouraged me to go just like one of their own kids like … there was another girl who … lives in my house, she's a foster child as well and … we were always pushed towards education, education, education, because that was their kind of way of giving back to us … kind of setting us up for the rest of what we wanted to do with ourselves.'

[Robert, Focus group with care-leavers].

For Robert, having a stable and supportive home environment also meant that, after school, he did not have to worry about some of the things that bother other young care-leavers.[56] Today, Robert has an undergraduate degree and is planning to continue his studies at Masters' level.

The importance of foster-family support was also highlighted by Oisín (care-leaver), who reported that he was the only child in his foster family (the foster parents had several biological children) who went to college:

> *[The foster family]' told me like you know if you want to get something you can; you know if you focus and you put your mind to it you can do what you want. ….*
> *That's what my [foster] mother says to me, you're the one child that made me very proud, like going to college and stuff, nice thing to be told you know.'*

> [Face-to-face interview with Oisín, care-leaver]

Some of the younger participants living in foster care also acknowledged the importance of support by their cares for their educational progress. In three cases, the foster parents valued education and encouraged the children to do well at school. For example, Mary told us that her foster parents encourage her to take her studies seriously – that 'school is not just for fun and games; it's for learning and for getting a good grade'. There were also examples of how support from foster parents was not confined to academic endeavours, for example, Susan reported that her foster parents supported her interest in horse-riding.

Positive support from birth parents may also be important for children's success at school, even after the children have been taken into care. For example, Mary (primary school, general foster care) felt that her birth-mother would be 'disappointed' if she did not get good grades; she believed her birth-mother wanted her children to do the best they could at school:

> *'Yeah, like she'd [birth-mother] ask me am I being good at school and I tell her yes and all, so, and then she'd discuss what we were doing and all, so yeah, she likes us to, like she'd be disappointed if we didn't get a good grade because she wouldn't like push us too hard, she'd just push us like very, no she wouldn't push us, it's just she'd want us to do the best that we can, be the best that we can in school.'*

> [Face-to-face interview with Mary, foster care, primary school]

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56   A major worry for Lindsay and some other care-leavers was entry into independent living.

Support and positive attitudes towards education from professional carers also tend to have beneficial impact on the educational experiences of children in care. Five post-primary students participating in this study (Daniel, Eva, Lorcan, Martin and Annie) all came from the same residential care home. They all appeared to be satisfied with the support they were receiving in the care home and believed the carers placed a high value on education. They said that the adults in the residential care unit helped them with homework and monitored their homework completion. It was evident from the interviews with these young people that staff in the residential care home took an active interest in the educational careers of children in their care. For example, according to Daniel, both the staff and the manager were supportive of his decision to continue his education and were 'doing as much as they can' to help him.

Another source of support for children in care is social workers. In this study, the participants were asked whether they regularly discuss school with their social workers. The responses of the participants varied: many commented that, while some social workers had been interested in discussing their educational progress, others said their social workers were more focussed on general care and well-being issues. Most of the respondents in the study said that the social workers 'sometimes' talked to them about their education, but they seemed to be more focussed on how they were coping with other areas of their lives: 'how are you getting on in school, grand and you know any subjects you need help in or you know' [Annie, residential care]. Daniel characterised his social worker as very 'hands on' and somebody who 'likes to know how you're getting on'. By contrast, Eva thought that the social workers 'don't pay much attention […] they don't ring as much or come out or anything'. According to Martin, the social workers differed in the level of contact with children in care and in the extent of interest they showed in their academic achievement. The views of foster children seemed to echo those in residential care. While some regarded social workers as very engaged and supportive of their academic success and progression, others found them more distant and more focussed on how they were getting on with their lives in general. For example, Susan said, 'Sometimes like they just ask do you like school, do you like that and then they'll just move on' [Susan, primary school].

On a related issue, the interviewees claimed that social workers change frequently, which they felt is not conducive to building relationships. According to Nadine (relative foster care, post-primary school), the social workers 'have to like gain your trust'. It was generally reported by the young people that getting used to a new social worker took time as 'you have to start all over again and they have to try and get to know you and you have to try and get to know them and all, so yeah it is hard' [face-to-face interview with

Annie, residential care]. Discontinuity with regard to social workers was also criticised by Oisín:

> 'That was a bit of a disaster to be honest… Yeah, just you get one social worker for a few months and another one, another one, another one … Yeah, like we were just told, listen, I'll be leaving next week so you're getting a new social worker in the next couple of weeks.'

[Face-to-face interview with Oisín, care-leaver]

5.5 Social integration of children in care

5.5.1 Social interaction with peers

Research has shown that social integration at school, i.e. positive interaction with fellow students and teachers, is likely to enhance school engagement and belonging of students at school (Smyth, Darmody, McGinnity and Byrne, 2009). We asked the young people how they get on with their peers at school, whether they find it difficult to make friends, and how open they are about telling their friends about living in care. The interviewees reported different experiences in relation to their ease in making friends at school. Several young people (for example, Margaret and Richard) reported having made lasting friendships in school:

> '…she's still my friend now to this day, we're friends about ten years, like do you know what I mean, she, on my first day she came over and she just sat beside me and she's just one of them really happy people, do you know what I mean. And I'm still friends with her today and she used to let me share her books with her and all, share her lunch with her and all.'

[Margaret, Focus group with care-leavers]

Despite her close friendship, however, Margaret also experienced bullying, particularly in primary school:

> 'I was told and all in school by my peers that I wasn't cool enough to like [band's name] (laugh). Swear to God, you're not allowed like [band's name], and I wasn't allowed join in with anybody or nobody played with me or anything … it was a horrible time, horrible time. But my mates, I really relied on my mates a lot like.'

[Margaret, Focus group with care-leavers]

For some young people, school provided a supportive atmosphere, which gave them a sense of belonging and a sense of community. For example, Oisín (care-leaver) said, 'Yeah that's what I loved about the school, just that sense of community, everybody in the class were great for each other' and Nadine (post-primary school) said:

> 'Well this one [school] here, there's like everyone gets on, like in every year, like the other day a little boy in first year fell over and like in the other school people would laugh at him, the school I'm in now, like a few of them went over and helped him with his books, so that's different'

> [Face-to-face interview with Nadine, relative foster care, post-primary school]

Robert recalled that yearning to get positive attention and approval from their peers sometimes made him behave in a certain way, to act like a 'class clown':

> 'It's positive attention from your peers, do you know what I mean, ah they're real funny they are, I love X, Y and Z, I love when they do this, I love when they do that, tell us a joke or do something funny, its positive attention from your peers because everybody is laughing at something that you've done as opposed to being at home.'

> [Robert, Focus group with care-leavers]

Martin, a boy in residential care, found that he had to make an effort to make friends with other students:

> 'So what's the secret, because a lot of kids don't find it that easy to make friends? A lot of people go up and think ah yeah it's going to be hard, I can't make friends here, it's just about putting yourself out there and going hello my name is [name] or whatever else your name is and just being positive and like I can make friends. [interview with a care home resident'

> [Face-to-face interview with Martin, residential care, post-primary]

For some students, many of the difficulties they experienced stemmed from changing schools frequently: '...the hard part was to tell them [schoolmates] two weeks later goodbye; that was the only part of it that was difficult' [Philip, care-leaver].

As discussed in Chapter 2, young people generally do not want it to be known that they are in care. This sentiment was reflected in the interviews with the children. Most said

they only revealed to close friends that they are living in care: 'I'd say around maybe three of my friends know I'm in care, that's it' [Lorcan, residential care]. Margaret [care-leaver] explained that 'it's all about the negative assumptions' that she thinks other people make about the status of being in care. However, another interviewee reported as the times moved on, he felt his peers paid less attention to the issue:

> 'I think like people are more open to it nowadays than they were a few years ago, they don't care if you're in care anymore.'

[Face-to-face interview with Oisín, care-leaver]

Several interviewees commented on the curiosity of their schoolmates if different people collect them from school. In some cases, the schoolmates were offended if the child in care refused to answer their questions. Annie (residential care, post-primary) recalled her schoolmates' reactions when she tried to avoid discussing her living arrangements, 'like why are you going in that car, like why aren't you going home, and just like it's a long story, so I don't want to talk about it, and some people they're grand about it, some people are just offended'.

5.5.2   *Social interaction with teachers*

We asked the interviewees about their relationships with their teachers. The responses demonstrated that most of the children in our sample tended to get on well with most teachers in the schools they attended: 'Eight out of ten teachers for me in secondary school were, I befriended them like' [Richard, care-leaver]. Several interviewees reported liking 'some' but not 'other' teachers. Overall, their experiences are in line with the findings among the general student population (Smyth et al., 2004). In the case of Robert (care-leaver), he reported his experience in a school that was proactive in identifying issues between students and teachers and had established a formal reporting system. Robert recalled how all students in the school were encouraged to report any difficulties they experienced regarding teachers:

> '…we were always told this by our tutors, that if we didn't like it we could change it, not curriculum obviously because that's something that's set in stone nation-wide, but things like teachers or if we didn't like the way a teacher was treating us we could go to our class rep and our class rep would go to the tutor and the tutor would go to the principal with any complaints that we had, so we could change it and I think that's what made school life a little bit better for me'

[Robert, Focus group with care-leavers]

In line with findings from other studies (Smyth et al., 2004), a number of the young people described a good teacher as someone who had 'personality and understanding', who was 'engaging' and who liked and knew the students [Oisín, care-leaver; Martin, residential care]. Robert was critical of the teaching approaches some of the teachers in the school he attended were using:

> '…certain ones just come in and you know yourself they're just real like you know, open their mouths, they opened them and they just tell you what's in the book, open page, blah, blah, blah and explain, well it's their version of explaining. But they could be going 100 miles per hour and they won't go back again. You listen this time, if you don't hear it or you don't understand it it's your own fault'

> [Robert, Focus group with care-leavers]

Only a few interviewees reported that they felt that teachers were too harsh on them. Susan criticised what she saw as her teacher comparing her work with that of other students in the class who were quicker at finishing their tasks:

> 'My teacher I have now, I don't really like her, she's nice but, I feel like she's, all the other girls are perfect, like the way she's treating them and then the way she's treating me, it's a bit different though, I don't know why. I try my hardest in school but she thinks I don't, but some other kids are worse than me in school… Because some people got their work finished then others, because I might be a little slow at writing because I don't really write that much at home, only my homework and like they get everything done, one night I forgot to do something, it was last night I forgot to do my tables and she gave out to me and then she went on to the next person sitting beside me and she was like excellent, brilliant and (laugh) I was just cracking up, I wasn't really happy'

> [Face-to-face interview with Susan, primary school]

One care-leaver, Margaret, recalled feeling humiliated by a teacher in primary school because she had no uniform:

> '… because I had no uniform, you're seven years old and you walk into school with no uniform and your teacher makes you stand at the top of the class as an example to everybody else, like how is that the child's [fault]. I'm very angry still at that to this day, that that happened to me in my school, do you know what

I mean. And I remember always being upset in school and my primary school experience was terrible.'

[Margaret, Focus group with care-leavers]

For Oisín, low expectations from his teacher spurred him on to continue his education after school to prove her 'wrong':

'When I left my FETAC course, … I got along with a teacher but she said I wouldn't advise you to do a degree course, she goes I don't think you're ready for it yet so I always had her in the back of my mind the whole time, so when I got it I wanted to go back down to the school and show her, there you go. …I wanted to prove you know to my family as well because they were told like this guy is going nowhere in life, when I was brought into foster care, said like he's a bit slow and he's this and that, so that was always in the back of my mind all the time. And going back to college again it was still in my mind, just to get me to do the thing.'

[Face-to-face interview with Oisín, care-leaver]

The previous section showed that, for the most part, the interviewees said that they did not want their peers to know that they were in care; this was an issue they only wished to share with their best friends. However, when asked if they minded teachers knowing about their care background, they expressed divergent views. Some felt it was a good idea if teachers knew they were in care, some felt it was better if teachers were unaware, and others recognised the potential benefits and drawbacks of both situations, for example, one interviewee said, 'it's [teachers knowing] a mix of both, it's good and it's bad'. Some participants felt that it would be useful if teachers knew that they were in care because it would facilitate communication between the school and carers:

'Most do because they have to know, because Mum and Dad, they'd be saying go home to your parents or go home to your guardians and then they'll say to me, if they need to meet with a specific person, like [name] or [name] or my key workers or something like that, they'll have to say, have to pull me aside and say I need to speak to someone about something, need to do this, I need their permission on this and can I get their permission, can I get a phone number and stuff.'

[Face-to-face interview with Martin, post-primary]

Two young men who were in care, Philip and Richard (care-leavers), felt that because teachers were aware of their situation, it gave them 'a little bit of leeway [...] I think that if it wasn't for the, how would you say, like the special treatment, I would have been kicked out of school' [Richard, care-leaver]. Oisín (care-leaver) considered that it was only natural that teachers knew about his circumstances so that he could get the support he needed:

> 'I would have told them myself as well, or they would have been told by, my social workers would have called to the school and had a chat with them… So they knew like that I had that extra bit of, not looking for attention, but just they knew there was that extra bit lacking in that area, not so much brains, but as regards education, so they knew that I needed that extra bit of support'

[Face-to-face interview with Oisín, care-leaver].

According to Oisín, difficulties arose in school when teachers did not know his family situation and what was going on at home. He said the teachers that did not know about his background attributed his poor performance in school to lack of effort, rather than taking into consideration the difficulties at home that affected him in school:

> 'No, some made it worse to be honest because why don't you know this or, I kind of got the feeling that I was kind of holding the class back a bit because I'd be the one that was kind of slowing things down you know, making no effort, that was my impression'

[Face-to-face interview with Oisín, care-leaver, on his experience in primary school]

Similar views were expressed by Susan, who felt that teachers should know about their situation to provide support if needed: 'I just think they'd be there for you, but it's, only a couple know, like if they're there for you if you're sad or...' [Face-to-face interview with Susan, relative care, primary school]. Nadine thought that teachers should only be made aware of a child's care background in relatively serious cases, but not necessarily when a child is settled and happy:

> 'Well, for me, I don't think it is, but like for other people that come from like homes where they're beaten and all, teachers should know then, like when you're in a home like this where you don't, you're happy and it's grand'

[Face-to-face interview with Nadine, relative care, post-primary]

It also emerged in the interviews that young people felt strongly about the way teachers handle difficult or awkward situations involving children in care. For example, Lindsay and Margaret (care-leavers) both reported humiliating experiences at school. Lindsay felt that the teacher should not have told the class about the death of her mother without first consulting her:

> 'But I remember one time in religion class, I was 16 and I was in care, me Mam had just passed away and the topic we were talking about during religion annoyed me so I got up and I left and when I was coming back I overheard the teacher tell the whole class [Lindsay] has an awful lot going on, as yous are all aware her Mam has just passed away and I felt that small, do you know what I mean when I walked back in to the room, everyone getting off the chairs and giving me big hugs, that's not what I wanted, I wanted to tell them but the teacher that I felt that wasn't just because me Mam had died, I felt it was dealt with [insensitively]. Oh like be careful around [Lindsay], kind of thing, she's a bit fragile'

[Lindsay, Focus group with care-leavers]

Margaret (already alluded to above) felt deeply humiliated in front of her peers because of the way her teacher highlighted the fact that she had no uniform:

> 'And then it didn't help with teachers, God forbid I didn't have a uniform and a teacher pulls you up and making you a victim for everybody else… like people, the teachers need to understand that you actually have a home life and if your mother hasn't got money don't take it out on me because my ma hasn't got money'

[Margaret, Focus group with care-leavers]

5.6   Academic sphere: Attendance, homework and education pathways
5.6.1   Attendance
As described in Chapter Two, many children in care may experience problems with school attendance. When the participants of this study were asked about school attendance, all the primary-school children said that they went to school every day and were only off when they were sick; none of them admitted to ever having 'mitched'. However, before coming into their current care arrangements, some of the young people in post-primary schools [Eva and Martin, both in residential care] admitted they had had relatively patchy attendance history, with long periods of time away from school (for example, Martin said he was absent approximately 10 days every year while he was still living with his birth parents). Some of the care-leavers admitted they 'mitched' a couple

of times, for example, Richard (care-leaver) said he had no problems with attendance in primary school but he started to 'mitch' in 5th year and subsequently his attendance became progressively worse. Margaret (care-leaver) admitted that she 'mitched' in primary school.[57] None of the interviewees elaborated on specific reasons for 'mitching', but it is reasonable to suggest that the possible reasons could be both family- and school-related.

5.6.2   Homework and study

The young people were asked about homework and study. As expected, primary-school pupils were not given too much homework; they said they usually do it all, often with help from their foster parents or carers. For example, John (general foster care, primary school) reported that he got homework 'sometimes' in English and Irish and it did not take him long to do, as he said he was 'really good' at these subjects. In all cases, the interviewees living with foster parents told us that their foster parents provided support in doing homework. Having too much homework was only an issue for one interviewee, Mary, who also reported that her teacher used extra homework as punishment for pupils who were 'really bold':

> 'I don't mind [homework] it's just like some teachers can give you too much and then it's not really good because your brain needs work for something else and all, but in fourth class you only get about four things or five or sometimes if you were bold you'd get extra homework or like that only happens if you're really bold, not if you're talking'

> [Face-to-face interview with Mary, non-relative foster care, primary school]

Susan reported some difficulties with homework, particularly in Mathematics, which she described as her weakest subject. Eva (residential care, post-primary) commented on heavy homework loads and said she spends on average three-and-a-half hours doing homework. Lorcan (residential care, post-primary) admitted that he used to hate doing homework; in the past, he said he was nearly suspended for not doing it, but he has since changed his attitude, due predominantly to the help he received from his care workers:

> 'I'd say, like last year I was kind of like, I'd hate doing homework and for the first six months of school I actually nearly got suspended because I didn't do no homework, because I just hated doing homework and then I kind of got my act together and then at the, like after January I stopped getting bad notes and I

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57 Earlier sections of this chapter show that Margaret had very negative experiences at school.

started doing my homework and at the moment now if I'm doing homework I actually, I hate having to do, the amount that the teacher goes write down 10 lines, I hate doing that so I'll write down maybe 15 lines'

[Face-to-face interview with Lorcan, residential care, post-primary]

According to Daniel, the care workers in his residential care unit checked students' homework and took this checking very seriously. Several students said they could avail of a study group and/or homework club at school. However, one student was somewhat critical about the way the homework club in his school functioned:

'Well, they said, like it's three hours long [...] and when I got down there I just wanted to go for the homework, but then they stopped and they take lunch breaks and then they go and do some activity, like I'm not there to do activity, you can do that after school, y'know, I'm there to do my homework, but I was only doing 20 minutes, so it wasn't really helping that much'

[Face-to-face interview with Martin, residential care, post-primary]

'…we technically have five people here who study with you and four or five staff who are on per day and that's basically your study group, we don't need to go anywhere. If we want to study with friends we go down to our friends and stuff or if you don't want to, you want a study group, you literally bounce ideas off people here…'

[Face-to-face interview with Daniel, residential care centre, post-primary]

Pathways within post-primary school
The students discussed their experiences of various secondary school programmes. Two boys, Daniel and Oisín, had participated in the Transition Year Programme and, in general, they had positive experiences: they liked the variety of activities and experiences that the Programme offered. In addition, they felt the course boosted their self-confidence:

'Grand, it was surprisingly easy, just basic forms that you deal with like you do 20% of your Leaving Cert courses and then you do whatever else for the year, so we done like all different activities that you normally wouldn't get a chance to do, like outdoor education and like working within the community and stuff like that, so it's a whole different experience, gives you more of a taste

of what's college like and what's beyond what you're doing now.… I'd advise people to do Transition Year because it was a great experience and it's lots of fun'

[Face-to-face interview with Daniel, residential care home, secondary school]

'Yeah, you didn't have to but again I was advised to do it because it would be great for your confidence building, an extra year in school also, that was good as well. [It] was all project work, you were mixed in with different classes, you were mixed in with the honours but it wasn't honours class, we were all just the one, at times it was tough because you know you're mixed in with higher grade people but like there was no major work'

[Face-to-face interview with Oisín, young care-leaver]

The students were also asked whether they were permitted to choose which Leaving Certificate programme they pursued. In some cases, the students believed their teachers steered them towards less academic Leaving Certificate courses, such as the Leaving Certificate Applied (LCA):

'I was given the option to do, well they pushed me to do vocational but there was Applied and Vocational in my school. Well sometimes you have a choice and then other times, well you have a choice anyway but they recommend you, they really push for you… if they think you're up to Vocational, they push you and then if you're not up to it, they push you to do Applied'

[Richard, Focus group with care-leavers]

One young care-leaver who did the LCA said he felt compelled by teachers to take this programme and, while he enjoyed the actual course, he was not happy about taking this direction, which he perceived had a lower reputation:

'Yeah, you felt stupid because the Leaving Cert I done was the Leaving Cert Applied […] I don't want to put the course down, but all of us in the class thought we were a bit, we were the dopes of the year, the low Leaving Cert Applied, whereas the rest were all doing Leaving Cert honours and honours this, honours that. Inside me it mentally affected me because I always felt like, not so much the gobshite but you know you weren't good enough… they said it was the right move yeah, said don't even dream of going for the honours,

you'll just struggle, they were right like but like, I really enjoyed the leaving cert applied but deep down in my mind that was always my [last option]'

[Face-to-face interview with Oisín, young care-leaver]

5.7 Students' plans for the future

The young people in our study had high aspirations. Two care-leavers had undergraduate degrees and many of the other young people, three primary school children and most of the post-primary school students, said that they were hoping to continue their education after school in college. The care-leavers emphasised the importance of support from (foster) home and stable family environment where education was valued for shaping their educational decisions. Their reasons for going to college were to get a good education and, ultimately, a good job.

Two young care-leavers are now themselves mothers of children with special needs. They expressed their wishes that their children would do better at school than they had done. One of these young women [Margaret] told us that she dropped out of secondary school before sitting for the Junior Certificate exam, but she returned later and completed her Junior Certificate. She now has plans to continue her education, as she wants to have 'nice things'. Two other care-leavers reported that they are in the process of looking for work.

5.8 Suggestions for school improvement

The participants were asked what they thought could be done to improve the school experience for young people in care. The suggestions they made included improvement of environmental characteristics (for example, having smaller class sizes), as well as provision of support:

'...maybe if the classes were a bit smaller because like, for secondary level maybe, because say if a person has trouble in a certain subject, because there's so many pupils and there's only one teacher [...] They can't give the attention [...] They can't really see that the person is struggling or not'

[Face-to-face interview with Eva, residential care home, secondary school]

'And that's not just for young people in care, that's just the way teachers are in primary school, they've too heavy a work load, the classes are too big, do you know what I mean, they're missing signals and signs'

[Margaret, Focus group with care-leavers]

Several young people commented on the importance of good and supportive social relations at school, particularly with teachers. Mary and Susan (foster care, primary school) said that teachers should 'look out' for children who are 'lonely and not playing with anyone and they're just on their own'. Annie (residential care, post-primary school) noted that teachers should 'just listen to them [children] more like, you know and just take it seriously and once they do that it's good, perfect'. Several care-leavers also highlighted the role teachers can play in raising the level of self-esteem of children in care:

> 'There's a curriculum that's around self esteem that the teachers do in a class, talk about self esteem… and even then it's touched on, self esteem should be worked on, that's something that I particularly need a push towards, that a young person who is in care that that's what's focused on because one thing I've always said, if I can give my kids self esteem I've set them up for life and I stand by that'

> [Lindsay, Focus group with care-leavers]

5.9   Summary

This chapter explored the views of children who are or have been in care in relation to their schooling and education. Several young people said that (birth) family background and issues that they had to deal with at a young age often had a negative impact on their experiences at school and their educational career more generally. The interviewees referred to various difficult experiences at school, including behaviour issues, long periods of intermittent schooling or absenteeism, and academic underperformance. The accounts of the young people also seemed to suggest that once they moved into a more stable environment, either in a foster home or in a residential care unit, many of these difficulties diminished. The young people said the support from foster families and residential care workers motivated them to focus on education and to have high aspirations for their future careers. The analysis showed that, in general, social workers played a more modest role in the education of children in care, as their main focus was on the overall well-being of the child.

Several young people commented on their social interactions with teachers and peers in school. They believed that, where teachers did not seem to have been aware of the home situation of the young people, this seemed to have had a negative impact on their experiences. While most had relatively positive experiences and got on well with other students, two young people reported that they had experienced bullying in school.[58]

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58 Earlier sections of this chapter show that Margaret had very negative experiences at school.

The respondents differed in their academic experiences at school. While some reported that they were doing well, were taking many subjects at higher level and had aspirations to continue their education in college, others reported struggling with certain subjects. Not all seemed to have been given a choice of which Leaving Certificate programme they should pursue and many said they felt they were forced to sit the Applied Leaving Cert, which some of them felt had a lower reputation. Some young people with stable foster care backgrounds felt better able to focus on their studies at the end of secondary school. Others said that they were worried about what would be in store for them when they turn 18 and start to live independently; one young care-leaver, Lindsay, told us that she felt aftercare provision 'should be mandatory'.

While not representative of the whole population of children living in care, the views of the young people presented in this chapter provide a useful insight into factors that may have an impact on the educational experiences and progress of young people in school and beyond. The experiences of the young people in our sample indicates that children in care can do well at school when they are provided with the right conditions and appropriate support from teachers, social workers, carers, and foster/birth parents.

Chapter Six
Conclusion and Implications for Policy

6.1   Introduction

There are over 6,000 children in the care of the State in Ireland. The majority of these children are in foster care (either relative or non-relative foster care), while several hundred children are in residential care. In general, the upper legal age limit for State care provision is 18 years. Operational responsibility for all aspects of care placements, practical arrangements, planning, and monitoring of the child's progress currently rests with social workers employed by the HSE or, in a small number of cases, by approved independent agencies. While it is meaningful to speak of children in care as a single group, it is also vital to recognise that, as with any group of children, there are many sub-groups of children with different patterns of experience. This heterogeneity is evident even in the small sample of children and young people who participated in this study. The reasons for children being placed in care vary, but are mostly bound up with children being at risk and parents being unable to provide care and protection for their children. Internationally, there is now growing interest in the welfare of these children. In recent years, research has started to emerge on the educational experiences of children in care as there is a growing recognition that educational attainment is associated with improved life chances for all, including children in care. However, to date, little has been known about the educational experiences of children in care in Ireland.

This small-scale exploratory study addresses a gap in our knowledge by discussing international and national research in this area and providing information about the approaches being taken in four case study jurisdictions. In addition, the study examines the perspectives of key stakeholders who work directly in the care and/or education systems and stakeholders who have a professional role in care and/or education policy. The study also engages with and highlights the experiences of children in care and those who have left the care system (care-leavers) in Ireland. The findings emerging from these three research strands provide a generally consistent view of the key issues and facilitate the identification of steps that might be taken to improve educational support for children in care.

6.2   Education provision for children in care

While international empirical research focusing on the educational experiences of children in care is limited, existing studies indicate that there are generally differences between children in care and the rest of the pupil population in terms of school attendance, participation and attainment levels. Children in care tend to face more challenges to fulfilling their potential due to their personal and familial circumstances. Disruption within the home environment, disruption caused by having to move schools, limited attention from carers towards students' progress at school, and/or teachers'

limited awareness of children's personal circumstances and what it means to be 'in care' are all factors that can contribute to underachievement. The situation may be further complicated if these children have special educational needs or diagnosed behavioural difficulties. Children in care may also be more vulnerable to social problems at school such as bullying. Nevertheless, while children from care backgrounds tend to experience more hurdles than their peers, research also suggests that some young people in care can and do succeed in their education and achieve success in their adult lives. However, while academic underperformance is not inevitable, we need to learn more about the factors that encourage success.

The findings of this study indicate that the factors impacting on children's educational experiences at school are complex. Some interviews with children in care reported positive experiences at school, taking many subjects at higher level, and had aspirations to continue their education after school. However, more often, the interviewees referred to behavioural and disciplinary issues, long periods of intermittent schooling or absenteeism, academic underperformance, struggling with certain subjects, and not being able to choose between different Leaving Certificate courses. At times, several children experienced difficult relationships with some teachers and peers.

The professional stakeholders generally agreed that, for many children in care, schooling can be a largely enjoyable and academically successful experience. For others, particularly those from especially difficult backgrounds, the situation can be very different. The stakeholders believed schools can provide much-needed sources of stability that may be lacking in the lives of some children in care who have experienced disruptions in their natural family and/or care backgrounds. In order to bring this about, schools and social work/care services, and the overall education and care systems, need to share responsibility regarding the challenges that can arise for children in care. According to the stakeholders interviewed, achieving better attendance, participation and attainment rates for children in care should entail whole-school approaches and inclusive educational provision for these children (and other vulnerable groups) in the education system.

6.3   Importance of external factors

International research has shown that, while some children in care are known to do well academically, the more typical scenario is one of poor attainment. Explaining this pattern is no simple matter. It seems to arise from a combination of factors, some of which are related to the child's pre-care history and others to the child's care experience. Serious family difficulties may have a destabilising effect on a child's motivation to participate

and attain in education. In addition, instability of living arrangements before or during periods in care often entails disruptive moves to new schools. International research has also pointed to the lack of sufficient attention to education as a priority by at least some carers and social workers.

These factors identified in the literature review as being related to academic under-performance among children in care find resonance in the responses of the stakeholders and, to a lesser extent, the children in care and young care leavers who were interviewed for this research study. The accounts of the young people in our study seemed to suggest that once they moved away from their disruptive home life and into a more stable care environment (either a foster family or a residential care unit), many of the difficulties experienced at school diminished. The young people said the support from foster families and residential care workers motivated them to focus on education and to have high aspirations for their future lives and careers. Some young people from stable foster care backgrounds were well prepared to focus on their studies at the end of secondary school. Others said that they were worried about what would be in store for them when they turn 18 and need to start living independently. The research team was reliant on HSE staff to identify children and young people for interview so the findings may not be representative of the group as a whole. However, the fact that many young people in our sample reported doing well in school, being encouraged and supported by their carers and others, and having clear motivation and ambition to progress to further education, underlines the point that failure is not inevitable. Under the right conditions, young people in care can do well. In particular, it is important to raise awareness of the importance of education among children in care and support their progress throughout the education system. As some young people may wish to return to education later in life, availability of viable second-chance education options is important.

6.4   Implications for policy and practice

While there are specific issues and measures that are uniquely relevant to children in care, education provision for children in care needs to be understood as one strand of broader educational policy for all children experiencing educational disadvantage. Arising from the findings of this study, the following measures are suggested for improving the educational experiences of children currently in care and young people who have already left the care system:

1.   **Data collection and research:** The study highlights the need to establish a mechanism for systematically gathering data on the educational experiences of children in care in order to inform evidence-based policy making. Adequate data

is required about the number of children in care in primary and post-primary schools, their educational pathways, numbers of suspensions and exclusions, and the numbers of school placements among children in foster and residential care, among other issues. In addition, longitudinal research would contribute to a deeper understanding of the experiences and pathways of young people in care.

2. **Inter-agency cooperation and coordination:** There needs to be an explicit public policy commitment to promoting all possible educational opportunities (including access, participation, and attainment in education) for children in care. A joint action plan for children in care needs to be developed by relevant government departments, statutory agencies, and NGOs with responsibility for children in care. A robust collaborative and coordinated approach to supporting access, participation, and attainment in education of children in care is needed. Care and education professionals should strengthen their communications and liaison with one another regarding supporting the educational progress and continuing educational needs of children in care.

3. **Training and information dissemination:** Relevant government departments/ statutory agencies should collaborate on preparing training materials for key stakeholders, including social workers, carers, foster parents, teachers and school management, to help them deal with educational issues that can arise for children in care. As many education professionals, including teachers, may not have very frequent contact with children in care, there may be particular value in providing written and electronic guidance that can be referred to as required. Government policy documentation regarding quality of care and care outcomes for children in care should contain explicit references to educational outcomes. A commitment to combating stigma and negative stereotyping in all communications about children in care is essential.

4. **Strengthening supports through the care and education systems:** Stability and continuity of care placements should be enhanced, particularly at key moments in the education career of children in care (for example, preparation for State examinations). Continuity in social work supports for children in care should be strengthened, including smooth handover of case files between social workers. Additional educational supports from social workers and care givers should be provided where required. At school-level, whole-school approaches and inclusive education should be adopted for young people in care (and other high-need groups). A flexible approach is required for education provision for children from

care backgrounds, reflecting an understanding that it is possible for all children in care to achieve educational success, and, furthermore, while it may take some longer than others to progress through the system, all can do so under suitable conditions.

5.   **Hearing the views of children in care and carers:** Children in care, and their carers, need to be given opportunities to engage in decision-making processes and to express their views on matters affecting them, including issues relating to children's education, future pathways, and in the context of care planning and review. Children in care, and their carers, also need to be provided with clear information about the education and training options available to them in the education system (for example, subject choices and different types of Leaving Certificate programmes).

6.5   Conclusion

Educational progress is critical for the long-term social and economic well-being of every child, and especially so for children in care, where good progress in education may help to compensate for difficulties in other areas of their lives. The State, in its role as corporate parent, has a special responsibility to take all actions necessary to secure the best possible conditions to encourage and support the educational participation and attainment of children in care. Clear responses can produce desirable and predictable gains for a particularly vulnerable cohort of the population and for succeeding generations.

The research findings and policy measures outlined in this report will, it is hoped, stimulate policy debate and responses in this area. The study paints a chastening picture that highlights many challenges and barriers to education for children in care and care-leavers. It also points to various shortcomings in responding to their specific needs. The interviews with the sample of children reveal more positive views of motivation and support for children in care during their educational progress. Both scenarios are valid, but undoubtedly the reliance on a small, and selective sample, means that the views expressed may not be representative of the most vulnerable children in care. When conducting social research, it is often the case that people who consent to participate in interviews are more satisfied than potential respondents who decline.

One of the key messages from all the research evidence is the need for the combined education and care 'systems' to work together in child-centred ways that are responsive and flexible. They need to collaborate to prepare information and training materials

for carers, teachers, and other professionals, in order to provide assistance, support and advice for dealing with children in care. In order to safeguard children's and young people's right to access and participate in education, this flexibility needs to apply at each level of the system, from individual-level engagement with children through to national-level policy-making and planning.

In summary, it is necessary to acknowledge that there are important and complex issues in securing positive progress in education for children facing serious adversity, including children in care. The challenge is to help many more children in care to do well educationally. While the potential difficulties may be clear, the remedies may not be so simple or obvious. Adults and carers have important responsibilities in supporting the young person in school and this applies with special force in the case of children in care.

References

American Academy of Pediatrics, Committee on Early Childhood, Adoption and Dependent Care (2000), Development issues for young children in foster care. *Pediatrics 106(5)*, 1145-1150.

Andersen S.H. (Red.) (2010). *Når man anbringer et barn – Baggrund, stabilitet i anbringelsen og et videre liv.* [When a Child is Placed in Care – Background, Stability and Future Life]. Viborg: Rockwool Fondens Forskningsenhed og Syddansk Universitetsforlag.

Archer M. (1999). Careless Treatment. Special Children 120: 8-9.

Australian Institute of Health and Welfare (AIHW) (2007). Educational Outcomes of Children on Guardianship or Custody Orders: A Pilot Study. *Child Welfare Series No. 42.* Cat. No. CWS 30. Canberra: AIHW.

Barber J.G., Delfabbro P.H. (2003). The first four months in a new foster placement: Psychosocial adjustment, parental contact, and placement disruption. *Journal of Sociology and Social Welfare* 30(2): 69-85.

Baugh, E. (2007) A Population at Risk: Youth "Aging Out" of the Foster Care System and Implications for Extension, available online: http://www.joe.org/joe/2008august/iw3.php

Biehal N., Clayden J., Stein M., Wade J. (1995). *Moving On: Young People and Leaving Care Schemes.* London: Her Majesty's Stationery Office.

Borland M., Pearson C., Hill M., Tisdall K., Bloomfield, I. (1998). *Education and Care Away from Home: A Review of Research, Policy and Practice.* SCRE.

Broad B. (1998). *Young People Leaving Care: Life After the Children Act, 1989.* London: Jessica Kingsley.

Bruskas D. (2008). Children in foster care: A vulnerable population at risk. *Journal of Child & Adolescent Psychiatric Nursing 21*(2): 70-77.

Burke C. (2007). The view of the child: Releasing 'visual voices' in the design of learning environments. *Discourse: Studies in the Cultural Politics of Education 28*(3): 359-372.

Burley M. and Halpern M. (2001). *Educational Attainment of Foster Youth: Achievement and Graduation Outcomes for Children in State Care.* Olympia, Washington: Washington State Institute for Public Policy.

Canadian Coalition for the Rights of Children (CCRC) (2002). *Education and the UN Convention on the Rights of the Child, A Guide for People who Work with Children and Youth.* Available online at: http://rightsofchildren.ca/wp-content/uploads/2009/05/ed.pdf

Charter for Children in Out-of-Home Care (2007). *Victorian Government, Department of Human Services*, Available online at: www.office-for-children.vic.gov.au/every-child-every-chance/charter-for-children.

Child Wellbeing and Safety Act (2005). Victorian Government. Available online at: www.legislation.vic.gov.au/

Children, Youth and Families Act (2005). Victorian Government. Available online at: www.legislation.vic.gov.au/.

Christmas L. (1998). Looking after learning: Making a difference for young people in care. *Educational and Child Psychology* 15(4): 79-90.

Clancy P. (1995). Education in the Republic of Ireland: The project of modernity? In P. Clancy, S. Drudy, K. Lynch and L. O'Dowd, *Irish Society: Sociological Perspectives*. Dublin: Institute of Public Administration (pp. 467-491).

Clarke A., Eustace A. (2010). *Thematic Analysis of Irish Literature on Children in Detention and Out of Home Care in Ireland*. Children Acts Advisory Board: Report No. 6.

Clark A., McQuail S., Moss P. (2003). *Exploring the Field of Listening to and Consulting with Young Children*. Sheffield: DfES.

Condie R., Moscardini L., Grieve A., Mitchell I. (2009). *Inclusion and Education in the United Kingdom: Final Report to DOCA Bureaus, Netherlands*. Scotland: University of Strathclyde.

Conger D., Rebeck A. (2001). *How Children's Foster Care experiences Affect their Education*. Vera Institute of Justice.

Courtney M.E., Roderick M., Smithgall C., Gladden R.M., Nagaok J. (2004a), *The Educational Status of Foster Children*. Chicago, IL: Chapin Hall Center for Children.

Courtney M.E., Terao S., Bost N. (2004b). *Mid-West Evaluation of the Adult Functioning of Former Foster Youth: Conditions of Youth Preparing to Leave State Care in Illinois*. Chicago: Chapin Hall Centre for Children, University of Chicago.

Harvey J., Testro P. (2006). *Australian Children and Young People in Care: Report Card, Education*. Sydney: CREATE Foundation.

Daly F., Gilligan R. (2005). Lives in Foster Care: *The Educational and Social Support Experiences of Young People Aged 13 to 14 Years in Long Term Foster Care.* Dublin: Children's Research Centre, TCD.

Daly F., Gilligan R. (2010). Selected educational outcomes for young people aged 17-19 years in long term foster care in Ireland. In E. Fernandez and R.P. Barth, *How does foster care work? International evidence on outcomes.* London: Jessica Kingsley Publishers.

Department of Children and Youth Affairs (2011a). *Listen to Our Voices: A Report of Consultations with Children and Young People Living in the Care of the State.* Available online at: http://www.dcya.gov.ie/viewdoc.asp?Userlang=GA&DocID=1604.

Department of Children and Youth Affairs (2011). *National Strategy for Research and Data on Children's Lives 2011-2016.*

Department for Education and Skills (2010). *Promoting the Educational Achievement of Looked After Children: Statutory Guidance for Local Authorities.* Available online at: http://www.torbay.gov.uk/promotingtheeducationalachievement.pdf.

Department of Education and Early Childhood Development (DEECD) (2011). *Out-of-Home Care Education Commitment.* Available online at: http://www.eduweb.vic.gov.au/edulibrary/public/stuman/wellbeing/A4_partnering.pdf.

Department for Education and Department of Health (2001). *Guidance on the Education of Children and Young People in Public Care.* London: DfEE and DOH.

Department for Education and Skills (2005). *Statistics of Education: Children Looked After in England 2003–2004.* DfES: London.

Department of Education and Skills (2006). *Care Matters – Transforming the Lives of Children and Young People in Care.* Cm 6932. DfES: London.

Department of Education and Skills (2007), Every Child Matters, available online: https://www.education.gov.uk/publications/standard/publicationDetail/Page1/CM5860

Department of Health and Children (2002) "Promoting the Health of Looked After Children", available online: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_108501

Department of Health and Children (2001). *Report of the Working Group on Foster Care.* Dublin: DOHC.

Department of Health and Children (2004). *Preliminary Analysis of Child Care, Interim Dataset*. Dublin: Department of Health and Children.

Department for Health, Social Services and Public Safety Northern Ireland (2006a). *Children Order Statistical Bulletin 2005/06*. DHSSPS: Community Information Branch: Belfast.

Department for Health, Social Services and Public Safety Northern Ireland (2006b). *Adopting the Future.* DHSSPS: Belfast.

Department for Health, Social Services and Public Safety Northern Ireland (2006c). *Former Care Leavers in Northern Ireland 2005/2006 Statistical Bulletin*. DHSSPS: Community Information Branch: Belfast.

Department for Health, Social Services and Public Safety Northern Ireland (2006d). *Outcome Indicators for looked After Children*. Year Ending 30th September 2003, Statistical Bulletin. DHSSPS: Community Information Branch: Belfast.

Department of Human Services (DHS) (2005). *Charter for Children in Out of Home Care*, State Government, Victoria. Available online at: http://www.cyf.vic.gov.au/__data/assets/pdf_file/0009/96066/charter_for_children_in_out-of-home_care.pdf

Department of Human Services (2002). *Integrated Strategy for Child Protection and Out-of-Home Care.* Available online at: http://www.dhcs.act.gov.au/__data/assets/pdf_file/0018/5724/integrated.pdf

Department of Human Services (2010). *Best Interests Case Practice Model*. Available online at: http://www.dhs.vic.gov.au/__data/assets/pdf_file/0008/589643/best-interests-case-practice-summary-guide.pdf.

Department of Human Services (2005). Protecting Children: The Next Steps Department of Human Services. State G Department of Education and Early Childhood Development (2011). *Out-of-Home Care Education Commitment*. Available online at: http://www.eduweb.vic.gov.au/edulibrary/public/stuman/wellbeing/A4_partnering.pdf

Department of Education in Northern Ireland (2006). *Strategic Plan for Education in Northern Ireland*. Belfast: Department of Education Northern Ireland.

Department of Education in Northern Ireland (2009). *Every School a Good School: A Policy for School Improvement*. Belfast: Department of Education in Northern Ireland.

Department for Health, Social Services and Public Safety Northern Ireland (2007). *Care Matters in Northern Ireland, Bridge to a Better Future*. Available online at: www.dhsspsni.gov.uk.

Department for Health, Social Services and Public Safety Northern Ireland (2009). *Care Matters Consultation Summary Report*. Available online at: www.dhsspsni.gov.uk.

Department for Health, Social Services and Public Safety Northern Ireland (2009). *Children in Care in Northern Ireland, Statistical Bulletin, 2008-2009*. Available online at: http://www.dhsspsni.gov.uk/index/stats_research/stats-cib/stats-cib_pubs.htm.

Department for Health, Social Services and Public Safety Northern Ireland (2010). *Children Order Statistical Tables for Northern Ireland 2009-2010*. Available online at: http://www.dhsspsni.gov.uk/index/stats_research/stats-cib-3/statistics_and_research-cibpub/children_statistics.htm.

Department for Health, Social Services and Public Safety Northern Ireland (2010). *Children in Care in Northern Ireland 2008/09: Statistical Bulletin*, Belfast: Department for Health and Social Services and Public Safety in Northern Ireland.

Department for Health, Social Services and Public Safety Northern Ireland (2010). *Children Order Statistical Tables for Northern Ireland 2004-2005 to 2009-2010*. Available online at: http://www.dhsspsni.gov.uk/index/stats_research/stats-cib-3/statistics_and_research-cibpub/children_statistics.htm.

DHSSPS (2008). *Outcome Indicators for Looked After Children*. Available online at: http://www.dhsspsni.gov.uk/oc2-2008_statistical_bulletin_final.pdf.

Department of Families, Housing, Community Services and Indigenous Affairs (DFHCS) (2010). *An Outline of National Standards for Out-of-home Care: A Priority Project Under the National Framework for Protecting Australia's Children 2009-2020*. Available online at: www.fahcsia.gov.au/sa/families/pubs/nat_std_4_outofhomecare/Documents/PAC_national_standard.pdf.

Devine D., Nic Ghiolla Phádraig M., Deegan J. (2004). *Time for Children – Time for Change? Children's Rights and Welfare in Ireland during a Period of Economic Growth*. Report to the COST Network.

Dubowitz H. (1990). *The Physical and Mental Health and Educational Status of Children Placed with Relatives: Final report*. Baltimore, MD: Department of Pediatrics, School of Medicine, University of Maryland.

Emond R. (2012). Longing to belong: Children in residential care and their experiences of peer relationships at school and in the children's home. *Child & Family Social Work*. Article first published online 13 August 2012.

Emond R. (2002). *Learning from their Lessons: A Study of Young People in Residential Care and Their Experiences of Education.* Dublin: Children's Research Centre, TCD.

Essen, J., Lambert, L., Head, J. (1976), School Attainment of Children Who have been in Care, *Child, Care, Health and Development*, 2(6):339-351.

Eurochild (2010). *Children in Alternative Care, National Surveys.* Available online at: http://www.eurochild.org/fileadmin/user_upload/Publications/Eurochild_Reports /Eurochildper cent20Publicationper cent20-per cent20Childrenper cent20inper cent20Alternativeper cent20Careper cent20-per cent202ndper cent20Editionper cent20January2010.pdf.

Eurydice (2005). *Education and Culture.* European Commission. Office for Official Publications of the European Communities Eurostat, Eurydice.

Farris-Manning C., Zandstra M. (2003). *Children in Care in Canada: A Summary of Current Issues and Trends with Recommendations for Future Research.* Available online at: http://www.nationalchildrensalliance.com/nca/pubs/2003/Children_in_Care_March_2003.pdf.

Festinger T. (1983). *No One Ever Asked Us: A Postscript to Foster Care.* New York: Columbia University.

Fletcher B. (1993). *Not Just a Name: The Views of Young People in Foster and Residential Care. Who Cares?* Trust/National Consumer Council, London.

Fletcher A. (2003). *Meaningful Involvement: Guide to Inclusive School Change?* Olympia, WA: The Freechild Project and HumanLinks Foundation. Available online at: www.soundout.org/MSIGuide.pdf.

Fletcher-Campbell F. (1997). *The Education of Children who are Looked-After.* Slough: National Foundation for Educational Research.

Fletcher-Campbell F., Archer T., Tomlinson K. (2003). *The Role of the School in Supporting the Education of Children in Public Care.* DfES Research Report 498. London: DfES.

Flynn R.J., Ghazal H., Legault L., Vandermeulen G., Petrick S. (2004b). Use of population measures and norms to identify resilient outcomes in young people in care: An exploratory study. *Child & Family Social Work, 9*: 65–79.

Fox M., Arcuri K. (1980). Cognitive and academic functioning in foster children. *Child Welfare* 59: 491-496.

Gilligan R. (2003). *Promoting Children's Resilience – Some Reflections.* Paper presented at the launch event for the Glasgow Centre for the Child and Society.

Gilligan R. (2001). *Promoting Resilience: A Resource Guide on Working with Children in the Care System*. London: BAAF.

Gilligan R. (1998). The Importance of Schools and Teachers in Child Welfare. *Child and Family Social Work 3*: 13-26.

Government of Ireland (2006). *Report on the Youth Justice Review.* Dublin: Stationery Office.

Government of Ireland (2000). *National Children's Strategy Our Children — Their Lives*, Dublin: Stationery Office.

Havalchak A., White C., O'Brien K., Pecora P.J., Sepulveda M. (2009). Foster care experiences and educational outcomes of young adults formerly placed in foster care. *School Social Work Journal 34*(1): 1-28.

Harvey J., Testro P. (2006). *CRE ATE Education Report Card*. Sydney: CRE ATE Foundation.

Health Service Executive (2011). *HSE Performance Report on the National Service Plan (NSP) 2011*. Available online at http://www.hse.ie/eng/services/Publications/corporate/performancereports/December_2011_Performance_Report.pdf.

Health Service Executive (2012), HSE December 2012 Supplementary Report National Service Plan 2012. Available online at http://www.hse.ie/eng/services/Publications/corporate/performancereports/dec12sr.pdf

Health Equality and Information Association (HIQA) (2009). *National Children in Care Inspection Report 2008*. Ireland: HIQA.

Health Information and Quality Authority (HIQA) (2010). *Draft National Quality Standards for Residential and Foster Care Services for Children and Young People: A Consultation Document.* Ireland: HIQA.

Her Majesty's Inspectorate of Schools (2003). *Inclusion and Equality, Part 1: Evaluating Education and Care Placements for Looked After Children and Young People.* Available online at: http://www.hmie.gov.uk/documents/publication/hgioslac.pdf.

Her Majesty's Inspectorate of Schools (2008). *Count Us In: Improving the Education of our Looked After Children.* Available online at: http://www.hmie.gov.uk/documents/publication/cuiielac.pdf.

Her Majesty's Inspectors of Schools and Social Work Services Inspectorate (2001). *Learning With Care: The Education of Children Looked After Away from Home by Local Authorities*. Available online at: http://www.scotland.gov.uk/library3/education/lacr-00.asp.

Her Majesty's Inspectorate of Schools (2000). *Raising the Achievement of Children in Public Care*. OFSTED.

Her Majesty's Inspectors of Schools/Social Work Services Inspectorate (2001). *Learning with Care: The Education of Looked After Children Away from Home by Local Authorities*. Edinburgh: Scottish Executive.

Höjer I., Johansson H., Hill M., Cameron C., Jackson S. (2008). T*he Educational Pathways of Young People from a Public Care Background in Five EU Countries – State of the Art Consolidated Literature Review*. YIPPEE.

Irish Social Services Inspectorate (ISSI) (2010). *Annual report, 2010*. Ireland: HIQA.

Jackson S., Cameron C. (2010). *Final Report of the YiPPEE Project, WP12: Young people from a Public Care Background: Pathways to Further and Higher Education in Five European Countries*. Thomas Coram Research Unit, Institute of Education, University of London, United Kingdom.

Jackson S. (1989). *The Education of Children in Care*. Bristol: School of Applied Social Studies, University of Bristol.

Jackson S. (1994). Educating children in residential and foster care: An overview. *Oxford Review of Education 20*(3): 267-79.

Jackson S. and Martin, P. (1998), Surviving the Care System: Education and Resilience, Journal of Adolescence, 21(5):569-583.

Jackson S. (2000). Promoting the educational achievement of looked-after children. In T. Cox (Ed.), *Combating Educational Disadvantage: Meeting the Needs of Vulnerable Children*. London: Falmer Press (pp. 65-80).

Jackson S., Ajayi S. (2007). Foster care and higher education. *Adoption and Fostering 31*(1): 106-117.

Jackson S., McParlin P. (2006). Education of children in care. *The Psychologist 19*(2): 90-93.

Jackson S., Martin P.Y. (1998). Surviving the care system: Education and resilience. *Journal of Adolescence 21*: 569-583.

Jackson S., Simon A. (2005). The costs and benefits of educating children in care. In E. Chase, A. Simon, S. Jackson (Eds.) *In Care and After: A Positive Perspective*. London: Routledge.

Kendrick A. (1995). The integration of child care services in Scotland. *Youth Services Review* 17(5/6): 619-635.

Kennan D., Keenaghan C., O'Connor U., Kinlen L., McCord J. (2011). *A Rights-Based Approach to Monitoring Children and Young People's Well-being*. CYP: The Children and Youth Programme.

Kilkelly U., Kilpatrick R., Lundy L., Moore L., Scraton P., Davey C., Dwyer C., McAlistair S. (2004). *Children's Rights in Northern Ireland*. Belfast: NICCY. Research Commissioned by the Northern Ireland Commissioner for Children and Young People. Available online at: http://www.niccy.org/uploaded_docs/22323%20Final.pdf

Kilkelly U. (2007). *Barriers to the Realisation of Children's Rights in Ireland*. Commissioned by the Ombudsman for Children's Office (OCO), Dublin, Ireland.

Kilkelly U. (2011). *A Children's Rights Analysis of Investigations*. Commissioned by the Ombudsman for Children's Office, Dublin, Ireland.

Kilpatrick R., Berridge D., Sinclair R., Larkin E., Lucas P., Kelly B., Geraghty T. (2008). *Working with Challenging and Disruptive Situations in Residential Child Care. Sharing Effective Practice*. For the Social Care Institute for Excellence (SCIE).

Kortenkamp K., Ehrle J. (2002). *The well-being of children involved with the child welfare system: A national overview*. Assessing the New Federalism Policy Brief B-43. Washington, DC: The Urban Institute.

Kufeldt K., McKenzie B. (Eds.) (2003). *Child Welfare: Connecting Research, Policy and Practice*. Wilfrid Laurier University Press, Waterloo Ontario.

Laxton M., Laxton R. (2008). *A Review of the Future Requirements of Special Care and High Support Provision in Ireland: A Strategic Response*. Phase Three Consultancy.

Legault, L., Anawati, M. and Flynn, R. (2006),Factors Favouring Psychological Resilience Among Fostered Young People, *Children and Youth Services Review*, (28): 1024-1038

Lewis K., Chamberlain T., Riggall A., Gagg K., Rudd P. (2007). *How are Schools Supporting Children in Care?* Annual Survey of Trends in Education 2007: Schools' Concerns and their Implications for Local Authorities: LGA Research Report 4/07) Slough: NFER.

McAuley C., Bunting L. (2006). *The Views, Experiences and Aspirations of Care Experienced Children and Young People*. VOYPIC: Belfast.

McCoy, S., Byrne, D., Banks, J.(2011), Too Much of a Good Thing? Gender, 'Concerted Cultivation' and Unequal Achievement in Primary Education, *Child Indicators Research,* 5(1):155-178.

McCoy, S., Smyth, E., Banks, J.(2012), *The Primary Classroom: Insights from the 'Growing Up in Ireland' Study*, available online: http://www.esri.ie/publications/search_for_a_publication/search_results/view/index.xml?id=3398

McClung M., Gayle V. (2010). Exploring the care effects of multiple factors on the educational achievement of children looked after at home and away from home: An investigation of two Scottish local authorities. *Child & Family Social Work* 15(4): 409-31.

McLeod J., Yates L. (2008). Class and the middle: Schooling, subjectivity, and social formation, In L. Weis *The Way Class Works: Readings on School, Family, and the Economy.* Taylor and Francis. (pp. 347-362).

Malmgren K.W., Meisel S.M. (2002). Characteristics and service trajectories of youth with multiple serious emotional disturbances in multiple service systems. *Journal of Child and Family Studies* 11(2): 217-229.

Maunders D., Liddell M., Liddell M., Green, S. (1999). *Young People Leaving Care and Protection*. Australian Clearinghouse for Youth Studies, Hobart, Tasmania.

Maxwell D., Sodha S., Stanley K. (2006). *An Asset Account for Looked after Children*. Institute for Public Policy Research, London.

Melbye J., Husted, L. (2009). Døgnanbragte børn får sjældent en uddannelse [It is Uncommon for Children in Care to get an Education]. In: *AKF Nyt no. 2 June 2009.* (Danish Institute of Governmental Research news no. 2 June 2009).

Mullan C., Fitzsimons L. (2006). *The Mental Health of Looked After Children/Care-Leavers in Northern Ireland: A Literature Review*. CASPAR Project, supported by the Executive Programme Fund for Children.

National Conference of State Legislatures (2008). *Educating Children in Foster Care: State Legislation 2004-2007*. Available online at: http://www.ncsl.org/print/cyf/foster_care_education.pdf.

National Centre for Children in Poverty (NCCP) (2006). Mailman School of Public Health, Columbia University.

National Centre for Education Statistics (NCES) (2006). U.S. Department of Education, Institution of Education Sciences.

National Youth in Care Network (2001). *Who Will Teach Me to Learn: Creating Positive School Experiences for youth In Care*. Ottawa: NYCN.

Northern Ireland Commissioner for Children and Young People (2008) *Children's Rights: Rhetoric or Reality. A Review of Children's Rights in Northern Ireland 2007/08*, Northern Ireland Commissioner for Children and Young People.

O'Sullivan E. (2009). *Residential child welfare in Ireland 1965-2008: An outline of policy, legislation and practice*. A paper prepared for the Commission to Inquire into Child Abuse. In S. Ryan (Ed.), *Commission to inquire into child abuse report (Volumes I – V)*. Dublin: Stationery Office.

OECD (2010). *Strong Performances and Successful Reformers in Education: Lessons from PISA for the United States*. Paris: OECD.

Office for Standards in Education (2001). *Raising Achievement of Children in Public Care: A Report from the Office of Her Majesty's Chief Inspector of Schools*. London: Ofsted.

Office of the First Minister and Deputy First Minister (2006). *A Ten Year Strategy for Children and Young People in Northern Ireland 2006-2016*. Belfast: OFMDFM.

Office of the First Minister and Deputy First Minister (2006). *Our Children and Young people: Our Pledge*. Belfast: Office of the First Minister and Deputy First Minister.

Office of the First Minister and Deputy First Minister (2010). *Priority Areas for Action*. Belfast: Office of the First Minister and Deputy First Minister. OFMDFM's Anti-Poverty Strategy

Office for Standards in Education, Children's Services and Skills (OFSTED) (2000). *Raising Achievement of Children in Public Care*. A Report from the Office of Her Majesty. London: HMSO.

Office for Standards in Education, Children's Services and Skills (OFSTED) and SSI (1996). *The Education of Children who are Looked After by a Local Authority*. London: HMSO.

Office for Standards in Education, Children's Services and Skills (OFSTED) (2001). *Raising Achievement of Children in Public Care: A Report from the Office of Her Majesty's Chief Inspector of Schools*. London: Ofsted.

Office for Standards in Education, Children's Services and Skills (OFSTED) (2011). *Having Corporate Parents*. A Report of Children's Views by the Children's Rights Director for England. London: Ofsted.

Office for Standards in Education, Children's Services and Skills (OFSTED) (2009). L*ife in Residential Special Schools*. A report of children's experience by the Children's Rights Director for England. London: Ofsted.

Ombudsman for Children's Office, Annual Reports to the Houses of the Oireachtas. Available online at: http://www.oco.ie/publications/annual-reportsfinancial-statements.html.

Ombudsman for Children's Office (2006a). *Annual Report*. Dublin: OCO.

Ombudsman for Children's Office (2006b). *Report of the Ombudsman for Children to the UN Committee on the Rights of the Child on the occasion of the examination of Ireland's Second Report to the Committee*. Dublin: OCO.

Ombudsman for Children's Office (2011). *Submission to the 12th Session of the Working Group on Universal Periodic Review*. Dublin: OCO.

Ontario Association of Children's Aid Societies (2006). *Youth Leaving Care: An OACAS Survey of Youth and CAS Staff.* Toronto, ON: Ontario Association of Children's Aid Societies.

Ontario Association of Children's Aid Societies (2008). *Ontario's Children in Care, Facts from Children's Aid Societies*, Accessed June 2011 at http://www.fixcas.com/news/2008/cicreport08oct1.pdf

Ontario Association of Children's Aid Societies (2010). *Your Children's Aid, Child Welfare Report 2009/2010*, Accessed June 2011 at http://www.oacas.org/pubs/oacas/papers/oacaschildwelfarereport2010.pdf

Patton M. (1999), Enhancing the Quality and Credibility of Qualitative Analysis. *Health Services Research*, (34):1189–208.

Pinkerton J. (2001). Ireland's National Children's Strategy – An Inside Outsider's View. *Children and Society 15*(2): 118-21.

Pecora P.J., Williams J., Kessler R.C., Downs A.C., O'Brien K., Hiripi E., Morello S. (2003). *Assessing the Effects of Foster Care: Early Results from the Casey National Alumni Study*. Seattle, WA: Casey Family Programs. Available at http://www.casey.org. Revised January 20, 2004.

Pricewaterhouse Coopers LLP (PwC) (2011). *Study into How the Education Ssystem can Improve the Attendance of Looked After Children at Post-Primary School.* Research report conducted on behalf of the Department of Education, Northern Ireland.

Raman S., Inder B., Forbes C. (2005). *Investing for Success: The Economics of Supporting Young People Leaving Car*e. Centre for Excellence in Child and Family Welfare, Melbourne.

Reay D. (2008). Class out of place: The white middle classes and intersectionalities of class and 'race' in urban state schooling in England, In L. Weis, *The Way Class Works: Readings on School, Family, and the Economy.* Taylor and Francis. (pp. 87-99).

Flutter J., Ruddock J. (2004). *Consulting Pupils: What's in it for Schools?* London: Routledge Falmer.

Sawyer R.J., Dubowitz H. (1994). School performance of children in kinship care. *Child Abuse and Neglect* 18: 587-597.

Scherr T. (2007). Educational experiences of children in foster care – Meta-analyses of special education, retention and discipline rates. *School Psychology International 28*: 419-436.

Schutt R.K. (1999). *Investigating the Social World: The Process and Practice of Research*, 2d edition. Thousand Oaks, Calif.: Pine Forge Press.

Scottish Executive (2009). *Looked After Children, Young People and Care Leavers: Examples of Good Practice Under Section 30 Children (Scotland) Act 1995 by All Local Authorities in Scotland*. Edinburgh: The Scottish Government. Available online at: http://www.scotland.gov.uk/Publications/2008/09/16093450/0.

Scottish Executive (2009). *Guidelines of Local Authorities.* Available online at: http://search1.scotland.gov.uk/Scotland?n=All&$rcexpanded=false&action=search&q=guidelines+for+localauthorities.

Scottish Government Statistics (2011). Available online at: http://www.scotland.gov.uk/Topics/Statistics/Browse/Children/TrendAttendanceLAC (last updated July 2011).

Scottish Statutory Instrument (2000). The Education (National Priorities) (Scotland) Order 2000. Available online at: http://www.oqps.gov.uk/legislation/ssi/ssi2000/ssi_20000443_en_1.

Scottish Government (2008). *Analysis Report for Grant to Improve Educational Environment of Residential Units/Schools*, 2006/07. Available online at: http://www.

scotland.gov.uk/Publications/2008/06/10113331/0.

Smyth E., McCoy S., Darmody M. (2004). *Moving Up.* Dublin: Liffey Press.

Smyth E. (1999). *Do Schools Differ?* Dublin: Oak Tree Press.

Smyth E., Darmody M., McGinnity F., Byrne D. (2009). *Adapting to Diversity.* Dublin: Economic and Social Research Institute (ESRI).

Smyth E., McCoy S. (2011). *Improving Second-Level Education: Using Evidence for Policy Development.* Available online at: www.esri.ie.

Social Exclusion Unit (2003). *A Better Education for Children in Care.* London: Social Exclusion.

Stein M. (2009). *Quality Matters in Children's Services: Messages from Research.* London: Jessica Kingsley.

Stein M., Carey K. (1986). *Leaving Care.* Oxford: Blackwell.

Strand S. (2002). Pupil mobility, attainment and progress during key stage 1: A study in cautious interpretation. *British Education Research Journal 28*(1): 63–78.

Thomas S.A., Anderson C., Browning C.J. (2007). *Final Evaluation Report.* Melbourne: School of Primary Health Care, Monash University. Available online at: http://www.cyf. vic.gov.au/__data/assets/pdf_file/0007/64843/innovation-evaluation-report-2007.pdf.

Thomas N. (2010). *Children's Participation – Challenges for Research and Practice.* Paper delivered at TCD June 15th, 2010. Available online at: http://www.tcd.ie/ childrensresearchcentre/assets/pdf/Presentations/Nigel%20Thomas%20Dublin%20 lecture.pdf.

Trout A., Hagaman J., Casey K., Reid R., Epstein M.H. (2008). The academic status of children and youth in out-of-home care: A review of the literature, In *Children and Youth Services Review 30*(9): 979-994.

UN Committee on the Rights of the Child (2006). *Concluding Observations and Recommendations on the second periodic report of Ireland* (CRC/C/IRL/CO/2), Available online at: http://daccess-dds-ny.un.org/doc/UNDOC/GEN/G06/450/74/PDF/ G0645074.pdf?OpenElement

UN Convention on the Rights of the Child (1989). Available online at: http://www2. ohchr.org/english/law/crc.htm.

UN Guidelines for the Alternative Care of Children (2009). A/RES/64/142. Available online at: http://www.unicef.org/aids/files/UN_Guidelines_for_alternative_care_of_children.pdf.

Victorian Government (2005). *Principles to Guide Practice and Decision Making Fact Sheet*. Available online at: http://www.cyf.vic.gov.au/__data/assets/pdf_file/0005/41729/best_interests_principles_fact_sheet.pdf.

Victorian Government (2010). *Best Interest Case Practice Model*. Available online at: http://www.cyf.vic.gov.au/__data/assets/pdf_file/0004/497965/best-interests-case-practice-summary-guide.pdf.

Victorian Government (2007). *The Best Interest Framework for Vulnerable Children*. The Victorian Government Department of Human Services, Melbourne, Victoria. Available online at: http://www.cyf.vic.gov.au/__data/assets/pdf_file/0011/43013/ecec_best_interest_framework_proof.pdf.

Victorian Charter of Human Rights and Responsibilities Act (2006). Victorian Government, Melbourne, www.dms.dpc.vic.gov.au.

Victorian Government Department of Human Services (2005). *Victorian Families, Children and their Carers in 2016*. Background Paper Number 1, for the Family and Placement Services Sector Development Plan. Available online at: http://www.cyf.vic.gov.au/__data/assets/pdf_file/0008/34892/fpssdp_2016_attachs.pdf

Vinnerljung B., Sallnas M. (2008). Into adulthood: A follow-up study of 718 young people who were placed in out-of-home care during their teens. *Child and Family Social Work 13*(2): 144-155.

Vogt W.P. (1999). *Dictionary of Statistics and Methodology: A Nontechnical Guide*. Newbury Park: SAGE Publications.

Walker M., Smithgall S. (2009). *Underperforming Schools and the Education of Vulnerable Children and Youth*. Chicago: Chapin Hall at the University of Chicago.

Walker M. (2002). Meeting the challenge: Provision for school age asylum seekers in Glasgow. *Language Issues 14*(2): 22–4.

Winter K., Connolly P., Bell I., Ferguson J. (2011). *An Evaluation of the Effectiveness of the Letterbox Club in Improving Educational Outcomes among Children Aged 7-11 Years in Foster Care in Northern Ireland*. Belfast: Centre for Effective Education, Queen's University Belfast.

Wise S. (2003). Using Looking After Children to Create an Australian Out of Home Care Database. *Children Australia 28*(2): 38–44.

Wise S. (2009). *A Fairer Future? Addressing the Education Needs of Children in Care*. A Briefing paper. Available online at: http://www.acys.info/sector_resources/articles/a_fairer_future_addressing_education_needs_of_children_in_care

Zetlin A., Weinberg S., Kimm C. (2003). Are the educational needs of children in foster care being addressed? *Children and Schools 25*: 105-119.

Zima B.T., Bussing R., Freeman S., Yang X., Belin T.R., Forness S.R. (2000). Behavior problems, academic skill delays and school failure among school-aged children in foster care: Their relationship to placement characteristics. *Journal of Child and Family Studies 9*(1): 87-103.

Appendix 1
National Standards for Foster Care (2003)

12:   Education

Standard

The educational needs of children and young people in foster care are given high priority and they are encouraged to attain their full potential. Education is understood to include the development of social and life skills.

Criteria

12.1   Health boards encourage and support schools in promoting both continuity and quality of education for children in foster care.

12.2   In liaison with school personnel, the children's educational needs and progress are considered and recorded in assessments, care plans and reviews. Appropriate educational attainment targets are agreed, and supports necessary for the achievement of the targets are put in place.

12.3   The roles of the parents, foster carers and social workers in promoting children's education are clearly defined in care plans. Responsibility for contact with the school is clearly assigned and accepted.

12.4   Child and family social workers and foster carers share such information with schools as to enable them to offer appropriate help and support to children in foster care. The child and family social worker ensures that the school understands that the information provided is confidential.

12.5   Education and learning are valued in foster homes. Foster carers expect children to attend and attain at school and support this through provision of books, equipment and uniform, assistance with homework and financial, practical and moral support for participation in extracurricular activities.

12.6   Foster carers provide opportunities for the children to develop social and life skills and encourage and facilitate their participation in hobbies and interests.

12.7   Health boards ensure that, where appropriate, the social and learning development of pre-school children is stimulated through provision of opportunities for attendance at playgroups or nursery schools.

12.8   Young people approaching school leaving age are actively encouraged to participate in third level education or vocational training programmes as appropriate to their abilities, interests and aspirations. This is specified in their care plans.

12.9 Child and family social workers, in consultation with foster carers, ensure that concerns regarding school are brought to the prompt attention of staff at the school, and that an effective plan of action is agreed with the school and recorded on the case file.

12.10 Child and family social workers are aware of the procedures for the exclusion of children from a school and know how to appeal against such decisions.

Appendix 2
National Standards for Children's Residential Centres (2003)

8: Education

Standard

All young people have a right to education. Supervising social workers and centre management ensure each young person in the centre has access to appropriate education facilities.

Criteria

8.1   Education is valued and the educational needs of each young person are addressed. Each is encouraged and assisted to reach his or her educational potential.

8.2   Where possible, the supervising social worker tries to maintain the young person in his or her own school on coming to live in the centre.

8.3   The centre takes an interest in the young person's education, attends all relevant school functions and meetings, and supports the young person in the centre by having the physical facilities and household routine for homework and study.

8.4 The supervising social worker and centre manager in consultation with the school, ensure an educational assessment is carried out for any young person where there are any questions relating to ability, specific learning difficulties, under achievement or special talents.

8.5 Young people with deficits in educational attainment or temporarily not attending school are supported with extra tuition.

8.6   Young people approaching school leaving age are strongly encouraged to participate in third level education or vocational training programmes as appropriate to their abilities, interests and aspirations, and this is reflected in their care plan.