

2021 Day of General Discussion

Children's Rights and Alternative Care

Submission on behalf of

International School Psychology Association (ISPA)

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This document has been prepared by International School Psychology Association (ISPA) as a written contribution to the 2021 Day of General Discussion (DGD) in Geneva on “Children’s Rights in Alternative Care.”

Who are ISPA?

ISPA is a voluntary Non- Governmental Organization officially affiliated to UNESCO. The organization is comprised of 25 affiliate national professional school and educational psychology associations. ISPA is strongly committed to promoting healthy development and improved quality of life for children everywhere. Children’s human rights are high priority in its international work and the organization will maintain this emphasis moving forward. Readers are encouraged to visit the [ISPA Mission Statement](#) to understand more about the organization and how it aims to makes a difference for children and young people across the globe.

Education as a driver for sustainable development.

As exemplified in United Nations Sustainable Development Plan (UNDP, 2017) SDG 4 advocates for “the promotion of an inclusive, equitable high-quality education creates opportunities for children and young people to rise out of poverty and live a healthy purposeful life”. Within the context of sustainable development goals, poverty is deemed more than a lack of income or monetary wealth. It is associated with a paucity of basic services such as education. It has long been recognized that children in alternative care experience significant challenges in securing this basic right.

In this paper the term alternative care is consistent with the definition offered in Guidelines for the Alternative Care of Children (2009), including foster care, kinship care, other family based or family like care, residential or supervised independent living arrangements.

Education represents one constant in the lives of children without parental care. This can be a positive or a negative force that can influence outcomes into adulthood.

Adverse Childhood Experiences

The publication of the Adverse Childhood Experiences (ACEs) study (Felitti et al., 1998) established a relationship between early childhood abuse, neglect and negative life outcomes. The study was the impetus for a proliferation of research about the impact of early childhood trauma on health, social and emotional wellbeing, and academic outcomes. The development of the Adverse Childhood Experiences International Questionnaire (ACE-IQ) extended the scope of the original study, which lacked generalizability to global contexts. The aim of this document is not to review these studies in detail, however it is clear that child maltreatment in its many forms is a ‘widespread and global phenomenon affecting the lives of millions children all over the world, which is in sharp contrast with the United Nations Convention on the Rights of the Child ” (Stoltenburg et al., 2015). Children and young people living in alternative care are amongst the most vulnerable and disadvantaged (Branstrom et al 2017) and have been exposed to significant family instability, adversity and trauma.

ACES and Education

Academic attainment among children in care has been identified as an area of significant concern. Compared with same age peers not in care, youth drop out rates are higher with students leaving school earlier, less likely to graduate from high school or move into higher education. (Townsend et al., 2020)

Delay in reading and mathematics development have been noted, and students score significantly below peers on standardized tests and other academic achievement measures. Children in care are disproportionately represented in special educational settings. While education is often viewed as a constant in the lives of children in care, it can also be an ongoing source of trauma and failure through the use of punitive discipline, bullying and ineffective teaching practices (Reupert, 2019).

While the dominant research emanating from high income countries, emphasizes the educational challenges for youth in alternative care, a systematic review of the literature by Roche (2019) highlights the perceptions of youth regarding the role of residential care in low and middle-income countries in providing access to education which would otherwise be out of reach. Youth were often able to reconcile being placed in alternative care so that they can study and gain qualifications as a vehicle to a better life. The extent to which such optimistic expectations are fulfilled is unclear, however the lack of funding to support post primary education in many low and middle income countries suggests that oftentimes this is not so (Mhongera and Lombard, 2017). Increased accessibility to quality, consistent education for at risk youth is key to meeting needs in family based care and, where appropriate, part of the support offered to youth who remain in parental care.

Child's Voice in Education

The voice of the child is an essential element in creating educational experiences for all youth across the globe and the expansion of research incorporating children's perspectives is encouraging. Townsend et al. (2020) note the expression of a need for a safe and stable learning environment to support their learning, a safe haven from often chaotic and unpredictable lives. 'Safety' in this context can be found in positive relationships with teachers and peers, providing a sense of connection and belonging that promotes school engagement and academic achievement. Youth report difficulty with concentration which compromises their ability to engage with their school work, leading to disengagement and dropout (Rutman and Hubbersley, 2018). For many children and young people, the difference between school engagement and dropout rests with the student's perceptions of teacher (and to a degree their peers') appreciation of the impact of their life experiences outside of school on their ability to function in school socially, emotionally and academically (Morton, 2015). Many expressed a wish for both teachers and peers to be made more aware of their unique experiences and challenges (Clemens et al., 2017) suggesting that this would help to reduce stigma and build stronger relationships.

Access to education appears to associated with a greater sense of agency among youth in alternative care, however this can be compromised by social, emotional and mental health issues arising from early childhood experiences and entry into the care system. The emphasis on increasing autonomy, taking control of their education is a feature of the narratives that children in alternative care present. Empowerment comes in many forms, including access to flexible learning schedules, tutoring, mentorship and increased academic assistance from teachers. Educational stability is emphasized. The prevalence of unplanned transitions needs to be addressed to ensure continuity of education and reduce learning gaps that may compromise school completion. In addition, children in alternative care would like to see more collaboration, with education and welfare services working together, but most significantly to have a voice with regard to their educational needs and choices.

As a first step in creating a safe supportive environment for children in alternative care it is essential to listen to the voices of those who experience it, but also gain a deeper understanding of the impact of adversity on the developing brain and how it shapes cognitive, social and emotional functioning. If

children report that they cannot engage fully with their learning because of the intrusion of their life experiences into the school environment, then we must listen and find a way to offer a more nurturing approach. Educational outcomes for children in alternative care can be compromised in multiple ways. Harker et al. (2003), note that teachers frequently associate placement in alternative care with 'delinquent behavior'. Misinterpretation of challenging behavior can lead to inappropriate sanctions and disciplinary interventions that reinforce the trauma response and alienate students. Despite a move toward more positive behavior management strategies in schools, zero tolerance policies and corporal punishment still prevail in many educational settings across the globe. The very youth who need to be embraced and nurtured by our schools are too often punished and or excluded, temporarily or permanently.

Trauma informed practice in schools

Children who have been exposed to ACEs face unique learning challenges. The neurodevelopmental impact of early childhood trauma is becoming clearer as advances in neuroscience and neuropsychology shed light on the underlying processes required for learning and academic success. A deeper understanding of the dynamic relationship between nature and nurture, trauma and attachment, in child development and its implications for education offers significant scope for better supporting youth who have experienced adversity during their early years (Immordino- Yang, 2016). Early childhood trauma "sets off a cascade of neurodevelopmental changes in the brain that compromise later essential abilities for good decision making and adaption" (Fletcher-Janzen & Harrington, 2021). Significantly high ACEs are associated with difficulties with executive functions, emotional self regulation, attention, impulsivity, working memory, impulsivity and inhibition /impulse control, all of which are features of learning or behavioral issues in school. Neuroscience has helped to explain how developmental trauma and neglect can impact the development of the brain, leading to the difficulties described above.

Neuroscience has also prompted the evolution of interventions for youth who have experienced significant maltreatment, moving away from therapies grounded in the medical model, to embrace more developmentally sensitive, neurobiologically grounded, evidence based approach. The Neuro-sequential Model of Therapeutics (Perry and Hambrick,2009) is one such example.

Schools have a significant role to play in the mitigation of some of the negative effects of childhood trauma (NCTSN, 2017). The ACEs study has highlighted the importance of trauma informed care in schools. A range of initiatives and interventions have been developed for the school setting, frequently integrated into an ecological systems framework. The underlying principle of trauma informed care (TIC) in schools is to be able to recognize behaviors related to trauma exposure and taking appropriate measures to connect students with the resources they need. (Chafouleas, 2016). Trauma informed services in schools create environments that promote stability, prioritize physical and psychological safety through a model of trauma informed practice which aims to support positive developmental outcomes for at risk youth. A comprehensive review of Trauma informed Care can be viewed at [The National Child Traumatic Stress Network](#) .Trauma Specific Services (TSS) can be incorporated as part of the ecological systems approach underlying Trauma Informed Care. The aim is to make more targeted services available to the most vulnerable and at risk individuals, such as those who have experienced childhood trauma and neglect. Such services include but are not limited to Trauma Focused Cognitive Behavioral Therapy (TFCBT), Cognitive Behavioral Interventions for Trauma in Schools (CBITS), Head Start Trauma Smart (Thomas et al. 2019).

While the introduction of Trauma Informed Care in schools has been welcomed as a step towards identifying and addressing the needs of at risk youth such as those in alternative care, a recent study questioned the multicultural validity of evaluation research around Trauma Informed Care. (David, 2021) It might be argued that interventions based on western models of conceptualization and treatment do not easily translate into a global context, particularly where western models of trauma informed care are not culturally relevant.

Exploring future role of education for Children and Young People in Alternative Care

There are significant opportunities to improve educational outcomes for children and young people in alternative care and for schools to play a more central role in the provision of contextually relevant services, extending beyond academics, to support the development of the whole child. It is clear that youth in alternative care across the globe have a very clear vision of how their needs could be more adequately met. The aim of this paper is to prompt further dialogue about how developments in psychology, neuroscience and education can be integrated and translated into educational practice, and how a more participatory approach, involving all stakeholders could be developed in shaping educational experiences of children in alternative care. While evidence suggests that the neurodevelopmental impact of trauma and neglect is panhuman, there is no 'one size fits all' solution to supporting children in alternative care across the globe. Strategies must be both culturally and contextually relevant.

Much can be done within the educational arena to encourage improved social, emotional and academic outcomes for youth living in alternative care. It is equally important to note that educators and schools have a significant role to play in strengthening families and preventing placement of children in alternative care. Schools are at the heart of communities across the globe and can become an effective hub for all stakeholders, including families, educators, protective and health services. Many models of extended service schools already exist but should not be considered as global blueprints for action. Participatory approaches to the conceptualization and delivery of community services delivered through the schools is an essential element to ensuring sustainability of support networks around the child.

ISPA welcome collaborations with other interested parties to explore how best to advocate for children in alternative care within educational settings. The ultimate goal is to support SDG 4: the promotion of an inclusive, equitable high-quality education creates opportunities for children and young people to rise out of poverty and live a healthy purposeful life.

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